

**Shri G.S. Institute of Technology & Science, Indore**  
**Centre for Innovation Design & Incubation**



REGISTRATION FORM  
For Students Only  
Personal Information  
(Form should be filled in Capital)



Date: - \_\_\_\_\_

Full Name: - \_\_\_\_\_

Branch / Section: - \_\_\_\_\_

Enrolment No.: - \_\_\_\_\_

Aadhar ID: - \_\_\_\_\_

Address: - \_\_\_\_\_  
\_\_\_\_\_

Please stick one  
stamp size photo &  
staple one photo with  
form

City: - \_\_\_\_\_ State: - \_\_\_\_\_ Pin Code: - \_\_\_\_\_

Gender: - \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_

Email Id: - \_\_\_\_\_ Contact no: - \_\_\_\_\_

Fathers Name: - \_\_\_\_\_

Occupation: - \_\_\_\_\_ Contact no: - \_\_\_\_\_

Purpose of entry in C.I.D.I.: - \_\_\_\_\_

Details (if applicable): - \_\_\_\_\_

Contd...

## Instructions

1. Maintain adequate silence, as not to disturb others.
2. Picking/taking things without intimation will be considered as punishable offence by the institution and may result in restriction/debar from usage.
3. Follow regulations as guided by C.I.D.I. personnel.
4. Your activity is recorded through CCTV cameras.
5. Changing desktop settings is strictly prohibited.
6. Person shall be responsible for his/her own belongings.
7. Kindly keep bags and shoes in respective places.
8. Kindly attach a copy of Photo ID Proof as well as Institute/Organisation ID Card.
9. You are required to intimate malfunctioning/dead state of any instrument being used by you immediately.
10. Privacy should be maintained, leaking any information of CIDI will be considered as punishable offence.

**I hereby acknowledge that I have read and understood the terms and conditions of C.I.D.I. and agree to follow and certify that the information provided by me is correct as per my knowledge and belief.**

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**Forwarding Authority [H.O.D. / Director / Any other (specify)]**

Name: - \_\_\_\_\_

Designation: - \_\_\_\_\_

Signature: - \_\_\_\_\_

**Signature Coordinator C.I.D.I.**