



Software Technology Parks of India - Bangalore

Online Quarterly Performance Report-Authorization Form

I hereby authorize Mr./Ms. _____, whose details are furnished below to collect the user name & password and his / her specimen signature is attested below.

1. Signature _____

2. Signature _____

Passport Size
Photo of the
Authorized
Representative.

Designation of Authorized Person :

Name of STP Unit :

Address :

Contact No. :

Email id :

Attested By,

Name : _____

Designation : _____

Signature : _____
(With Office Seal)

Note: Please affix / attest the photo of the person nominated for user name & password collection.

Acknowledgement

I _____ (name) have collected the user name and password of STPI-Online Quarterly Performance Reporting System..

Date :

Signature of the Recipient
(Name & Designation)