Application for Institute Email Service for Student

All fields are mandatory

NAME (In Block Letter)	
DEPARTMENT NAME	
COURSE/ PROGRAMME NAME	
REGISTRATION NUMBER & ENROLMENT NUMBER	
PRESENT SEMESTER	
VALID MOBILE NO.	
PERSONAL E-MAIL ID	
STUDENT ID CARD NUMBER/ PROVISIONAL ADMISSION LETTER. (Please enclose copy)	
DEGREE COMPLETION DATE	
REMARKS (IF ANY)	

Declaration

This undertaking is given by me to the best of my knowledge that I will not use the Institute email for any unfavorable activities rather than academics and official purposes and I will solely be responsible for all kind of activities by the registered email ID specified in this format.

(Signature of the student)
Date:

Recommended by

Signature of HOD/ HOC/ HOS
Date:
Office Seal:……………………………………

For Office use only

Email Id allotted: Allotment No:

Password: Signature of Official of Computing & ICT

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Application for Institute Email service for Faculty/Staff

All fields are mandatory

NAME of Employee (In Block Letter)	
DEPARTMENT NAME	
DESIGNATION	
MOBILE NO	
PERSONAL E-MAIL ID	
Preferred Email-ID	
EMPLOYEE ID CARD NO (Please enclose copy)	
REMARKS (IF ANY)	

Declaration

This undertaking is given by me to the best of my knowledge that I will not use the Institute email for any unfavorable activities rather than academics and official purposes and I will solely be responsible for all kind of activities by the registered email ID specified in this format.

(Signature of the Faculty/ Staff)
Date:

Recommended by

Signature of HOD/ HOC/ HOS
Date:
Office Seal:…………………………………

For Office use only

Email Id allotted: Allotment No:

Password: Signature of Official of Computing & ICT

Application for Institute Email service for Section/Office

All fields are mandatory

Name of the Section (In Block Letter)	
Preferred Email-ID	
Name of responsible Person/ People	
Name of Designation	
Mobile No	
Alternative E-mail ID	
Employee ID Card NO (Please enclose copy)	
REMARKS (If Any)	

Declaration

This undertaking is given by me to the best of my knowledge that I will not use the Institute email for any unfavorable activities rather than academics and official purposes and I will solely be responsible for all kind of activities by the registered email ID specified in this format.

(Signature of the responsible Staff/ Faculty)
Date:

Recommended by

Signature of HOD/ HOC/ HOS
Date:
Office Seal:…………………………………

For Office use only

Email Id allotted: Allotment No:

Password:

Signature of Official of Computing & ICT