



## I.IV PDF

**FORM FOR REQUISITION OF OFFICIAL EMAIL ID**

Staff ID	:
Name	:
Fellowship	:
Mentor	:
Head of the Department	:
Department / Faculty	:
Duration	:
Current Email address*	:
Mobile Number	:
Date of Joining and Order No	:

## Note

1. Please spell the names and all other information sought above correctly.
2. \*This Email address should be currently used by you.
3. The filled-in form should be submitted after getting duly signed from the respective Mentor and Head of the Department.
4. An official Email address would be created within 48 hrs. - 72 hrs.
5. Information regarding the official Email address created would be sent to your current Email address.
6. A copy of the appointment order should be submitted along with the form.
7. The email account will be deactivated once the individual leaves the institution.
8. Individual should get their Liabilities cleared from ICTeG department on leaving the institution.

Date:

(Signature of the PDF)

(Signature of the Mentor)

(Signature of the HoD)