



Office of the Information Resource Management (IRM)



E – MAIL ACCOUNT APPLICATION (College/Basic Ed/Department/Faculty)

Applicant's Copy

A. TYPE OF E-MAIL ACCOUNT

[] College [] Basic Educ [] Montessori
[] Department [] Faculty

Date of Application :

B. PERSONAL INFORMATION

Name _____ Employee ID No. _____
Position _____
Office _____ Tel. No. _____
Division _____

C. ENDORSEMENT

Endorsed by Immediate Unit Head:

(Signature over printed name) Date: _____

(Position)

D. ACCEPTANCE

I hereby declare that I have read and fully understood the USC Acceptable Use Policy and agree to its terms and conditions as well as other related USC policies in general for my membership in the USC E-mail facility. By signing this request I accept and bind myself to the provisions/terms of the said Policy. Violation of any term/provision of the Policy will mean immediate cancellation of the e-mail account without prejudice to any other administrative or legal action.

I understand that my e-mail account will be closed once I separate myself from service to USC.

Applicant's Signature _____ (Signature over printed name)
Date _____
Witnessed and Noted by:
Immediate Head _____ (Signature over printed name)
Date _____

Items below are to be filled up only by the IRM Personnel

Received by _____ (Signature over printed name / Date)
Referred To _____
Date Started _____ Date Finished _____
Endorsed by:
RHEA ROWENA B. RIVERA
Head, IRM-TNS/HDS (Technical & Networking Services and Help Desk Services)
Approved by:
FR. FELINO B. JAVINES, JR., SVD, DM
VPAA and Director, IRM

To be filled up only by IRM-TNS/HDS Personnel

Applicant/Office Email Account:



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