PONDICHERRYUNIVERSITY
COMPUTER CENTRE
REQUISITION FORM FOR PU-MAIL ACCOUNT CREATION

(To be submitted through Dean/HOD)   Date:

Purpose (tick)   **: New Mail A/c Creation**

Name   :   Identity No: Valid upto:
                                             (Enclose copy of ID Card issued by the University Library)

Designation: Department:

Intercom No/Mobile No: Email ID for reply:

Category   : Faculty/Staff/Others   _____

DEAN/ HOD'S Signature   **Applicant Signature**

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* On receipt of the username and password, kindly change your password at your first login

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(FOR OFFICIAL USE)

Action taken by   :   Received Date & Time:

Remarks   :   Acknowledgement by: Intercom/Mobile/E-mail

Signature of Mail Administrator   **Systems Manager & Head**
(with date)

I received my username password from Computer Centre