

ROOSEVELT COLLEGE SYSTEM
INFORMATION AND COMMUNICATIONS TECHNOLOGY OFFICE

RCS E-MAIL ACCOUNT REQUEST

DATE: _____

NAME: _____

POSITION: _____

DEPARTMENT: _____

RC CAMPUS: _____

EXISTING E-MAIL ADDRESS: _____

DESIRED USER NAME: (1) _____ (2) _____

(3) _____

REASON/S FOR REQUESTING E-MAIL ACCOUNT:

Verified by:

Noted by:

Approved by:

Ms. Sheryl R. Villaroman
Systems Operation Supervisor

Mr. Carlos N. Forteza
Asst. Dean, CSBAE

Mr. Victor E. Alfonso
Dean, CSBAE

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