



**U-mail Department/ Organization
Account Request Form**
University of North Dakota
ITSS
243 Centennial Drive, Stop 9041
FAX: 777-3978

1. Type of Request:
 Department Organization

2. Department/Organization Name: _____

3. Department/Organization 4-digit dept#*: _____
* this number is used when charging items on campus – Note: there is no charge for the e-mail account

4. Contact Person (must be a staff or faculty person):

Name: _____

E-mail Address: _____

5. Phone Number: _____

6. E-mail Address being requested (based on dept/org name, e.g. itss):

_____@und.nodak.edu

7. Signature of Contact Person: _____

8. Date of Request: _____

Office Use Only	DEP/ORG#: _____
E-mail user-name: _____	
<input type="checkbox"/> Purge Immune	Purge Immune End : _____
Comment: _____	
Processed by (initial): _____	Processed Date: _____