THE GOVT. SADIQ COLLEGE WOMEN UNIVERSITY, BAHAWALPUR
Directorate of Information Technology

EMAIL ID REQUEST FORM
Note: Fill out the form and send it to Directorate of Information Technology and Data Center

PERSONAL INFORMATION (All the information must be in uppercase latter)

Name: ☐ Dr. ☐ Mrs. ☐ Mr. ☐ Ms.

Full Name: _____

Father's Name: _____

CNIC: _____

Contact No.: _____

Current Email: _____

Choice for Official Email ID: (if email id according to default format already exists)
Default format for official email ID are: firstname.lastname@gscwu.edu.pk

firstname.middleinitial.lastname@ @gscwu.edu.pk

Option A: _____   Option B: _____

UNIVERSITY AFFILIATION:

Category: ☐ Faculty   ☐ Staff

Designation: _____

Department: _____

Employee ID: _____

ACCEPTANCE OF THE TERMS & CONDITIONS

I hereby agree to the university terms and conditions and would NOT use the official Email ID for sending SPAM/Commercial Emails or for any sort of other unlawful activities.

For Applicant/Department User

Applicant Signature: _____   Application Date: _____

Dean/HOD/Chairperson/Director: _____
Signature/Stamp

For Directorate of Information Technology user only

Authorized Signature: _____   Approval Date: _____