

**PONDICHERY UNIVERSITY
COMPUTER CENTRE**

E-MAIL ACCOUNT PROCESSING FORM

(Note: Proof of ID card issued by the University to be attached)

Date:

Personnel information

Name :
Emp. Code/ Registration Number :
Date of Birth :
Date of Retirement/Year of Completion :
Designation :
School/Dept/Section :
Personal E-Mail- ID :

Preferred Official E-Mail-ID : @pondiuni.ac.in
(*FirstNameInitial@pondiuni.ac.in*
Or
FirstNameLastName@pondiuni.ac.in)

Mobile Number :
Category : Regular / Contract / Temporary/ Student/ Scholar

I hereby declare that the information given above is true.

Signature of the Competent Authority
(Signature with Seal)

Signature of the Applicant with date

Systems Manager & Head
Computer Centre