



**INFORMATION TECHNOLOGY DEPARTMENT**  
**JINNAH SINDH MEDICAL UNIVERSITY, KARACHI.**

**EMAIL REQUISITION FORM FOR EMPLOYEES**

First Name:

Last Name:

Department:

Institute:

Designation:

Employee ID:

Office Landline No:

Mobile No:

Email address: `firstname.lastname@jsmu.edu.pk`

Applicant Signature: \_\_\_\_\_

HOD Signature: \_\_\_\_\_

**DECLARATION**

I have carefully read the terms and conditions set below and agree to comply in letter and spirit with all of them.

- The form must be forwarded through Concerned Head of Department.
- Employees in BPS-17 or above are authorized to obtain official Email Address, in special case approval of the Vice Chancellor will be required.
- Copy of University ID Card and CNIC will be required with this form.
- You will receive first password through sms on mobile number provided above. You are required to change the password immediately on receiving the sms.
- This official email should not be used for any commercial activity or unofficial use of.
- Do not share your password with anyone and it is good practice to change your password periodically.
- If you need any assistance please contact ext- 356.
- Official email for personal use would be considered serious violation of service rules and will be dealt with accordingly.
- Replies to outsiders by staff would first be approved by the HOD, who will be responsible for emails initiated in their department.
- Policy matters will not be responded without authorization from the competent forum.

\_\_\_\_\_  
Applicant Signature

Date: \_\_\_\_\_