



# WILBERFORCE UNIVERSITY

## Email Account Request

Please Complete and Return to Wolfe 002 – Information Services

(Your Email Address by default is set as your First Name Initial and Full Last Name)

### Personal Information (please print or type)

Name (First and Last)	
Official Title	
Direct Supervisor	
Office Location	
Telephone (local Office)	
Current E-mail (off campus)	

### Staff Department (please check only one)

- |                                                             |                                                    |                                                           |
|-------------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Academic Affairs                   | <input type="checkbox"/> Controller                | <input type="checkbox"/> Physical Plant                   |
| <input type="checkbox"/> Academic Support Services          | <input type="checkbox"/> Co-op                     | <input type="checkbox"/> Police                           |
| <input type="checkbox"/> Administrative & Financial Affairs | <input type="checkbox"/> Custodial                 | <input type="checkbox"/> Presidents Office                |
| <input type="checkbox"/> Admissions                         | <input type="checkbox"/> Financial Aid             | <input type="checkbox"/> Registrar                        |
| <input type="checkbox"/> Adult & Continuing Education       | <input type="checkbox"/> First Year Program        | <input type="checkbox"/> Residence Life                   |
| <input type="checkbox"/> Alumni Affairs                     | <input type="checkbox"/> Health Clinic             | <input type="checkbox"/> Student Affairs                  |
| <input type="checkbox"/> Athletics                          | <input type="checkbox"/> Human Resources           | <input type="checkbox"/> Transportation                   |
| <input type="checkbox"/> Bookstore                          | <input type="checkbox"/> Institutional Advancement | <input type="checkbox"/> UCS (Univ. Computing Services)   |
| <input type="checkbox"/> Bursar                             | <input type="checkbox"/> Library                   | <input type="checkbox"/> Contracted Serv.(Outside Vendor) |
| <input type="checkbox"/> CLIMB (Adult & Cont. Ed.)          | <input type="checkbox"/> Mailroom                  | <input type="checkbox"/> Other _____                      |

### Faculty Department (please check only one)

- |                                                           |                                                        |                                       |
|-----------------------------------------------------------|--------------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> FT - Arts & Sciences             | <input type="checkbox"/> Adjunct: Arts & Sciences      | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> FT - Professional Studies        | <input type="checkbox"/> Adjunct: Professional Studies |                                       |
| <input type="checkbox"/> FT - Graduate Program (Master's) | <input type="checkbox"/> Adjunct: Graduate Program     |                                       |

### Authorization Signature from HR Department

Name:	Lyman A. Montgomery	Date:
HR Authorized signature:		

### Wilberforce University E-Mail Address

University E-Mail Address:		Password:
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### Signature from IT Department

Name:	Jeff Choi	Date:
IT Authorized Signature:		