

NEW USER ACCOUNTS

Please fill out the following information for requesting e-mail accounts and submit a minimum of 3 days prior to start date.

Legal Last Name: _____

Legal First Name: _____ **MI:** _____ **Employee ID #:** _____

Starting Date: _____ **Department:** _____

Job Title: _____

Immediate Supervisor/Manager/Dean: _____

Employment:

Location:

Classified Full Time Employee
Classified Part Time Employee
Faculty
Adjunct Faculty

District Office
Evergreen Valley College
San Jose City College

Office Number: _____ **Business Extension:** _____

Accounts required:

NT Account
E-mail account
Unix/Datatel account

Other: _____

Distribution Lists (DLs):

AllDistrict
AllClassified (CSEA DL)
DO
EVC
SJCC
AllFaculty

Other: _____

