



Email address request form for offices  
ICT(Information and Communication Technology) Cell      911  
University of Dhaka

Office Name : Department of Pharmacy

Office Phone : 8120, 8121

Name of User : Dr. Firoj Ahmed

Designation of User : Professor

Mobile : 01711972965

Existing Email : firoj72@du.ac.bd

Requested Email id(s) : exam.pharmacy5@du.ac.bd

Purpose of this email address :

Applicant Signature and Date : .....

I hereby take the full responsibility of the authenticity of the information provided in this form. The administration of the University of Dhaka or the ICT Cell shall not be held responsible if any of the aforementioned information is found forged/incorrect.

**N.B. The email account will be activated after two working days from receiving this application form ICT Cell.**

signature and date  
(Head of office ) : .....

Office Seal :

.....  
**Director, Information and Communication Technology Cell**  
**University of Dhaka**