EMAIL ADDRESS REQUEST FORM FOR OFFICES

ICT (Information and Communication Technology) Cell, University of Dhaka

Ref. No: **1130**

OFFICE INFORMATION

Office Name	:	Department of Clinical Pharmacy and Pharmacology
Office Address	:	Department of Clinical Pharmacy and Pharmacology, University of Dhaka, Dhaka-1000
Office Phone	:	09666911463

EMAIL USER

Name of User	:	Faria Tasneem
Designation of User	:	Lecturer
Employee ID	:	2023086024
Mobile	:	01684130736
Existing Email	:	fariatasneem1996@gmail.com

REQUESTED EMAIL

Requested Email id(s)	:	**fariatasneem@du.ac.bd**
Purpose of this email address	:	

DECLARATION

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.

Applicant	**Head of Office**	**Director**
Signature and Date	Signature, Date and Office Seal	ICT Cell, University of Dhaka