# EMAIL ADDRESS REQUEST FORM FOR OFFICES

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

Ref. No: **1856**
Date: 15/07/2026

## OFFICE INFORMATION

| | | |
|---|---|---|
| **Office Name** | : | Department of Pharmaceutical Technology |
| **Office Address** | : | University of Dhaka |
| **Office Phone** | : | 01705948057 |

## EMAIL USER

| | | |
|---|---|---|
| **Name of User** | : | Md. Sarkar |
| **Designation of User** | : | Associate Professor |
| **Employee ID** | : | 2015032005 |
| **Mobile** | : | 01705948057 |
| **Existing Email** | : | raihan.rezvi@du.ac.bd |

## REQUESTED EMAIL

| | | |
|---|---|---|
| **Requested Email id(s)** | : | **taxicology.egp@du.ac.bd** |
| **Purpose of this email address** | : | Reseach project , EGP |

### 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 |