काशी हिन्दू विश्वविद्यालय BANARAS HINDU UNIVERSITY

AN INSTITUTION OF NATIONAL IMPORTANCE ESTABLISHED BY AN ACT OF PARLIAMENT

Computer Centre

Applicant Photograph

Photo must be certified by Head of Department

Application Form of e-Mail: Teaching Staff

1.Name of the Applicant			2. Designation	
3.Department			4.Date of Appointment	
5.Faulty/Institute			6.Employee ID	
7.Date of birth			8. Type of Employment	
9.Nationality			10.Date of Retirement	
11.Choice of Email Id (Default email Id Name of the applicant(Fullname/Short form).department.year)	**Choice**		12.Mobile No	
	Ist		13.Alternate email Id	
	2nd			
	3rd			

Undertaking:

i)The university email account is intended for official use related to university work and it must be used for academic activities only.

Ii)All users must check their email accounts regularly for academic, administrative, and official communications. Failure to do so may result in missed important information. All official communication must be made using the …@bhu.ac.in email id. Communications sent from any other email ID may not be considered official or valid.

iii) Users are prohibited from using their university email accounts to:

- Send harmful software, malware, or viruses.
- Misrepresent the identity of the sender.
- Engage in the distribution of offensive, illegal, or inappropriate content.

iv**)** Users must take all necessary steps to secure their email accounts, including maintaining password confidentiality and regularly backing up important data. The computer centre (CC) is not responsible for restoring lost data.

v)Users should regularly delete unnecessary emails and large attachments to manage mailbox space effectively. Important emails should be archived, and users should take periodic backups.

vi)The maximum email size for Faculty will be 20GB.

vii)User email accounts will remain active for one year after retirement, after that email account will be deactivated and it may be deleted.

viii) University email Policy must be applicable to all email users.

Date:……

Place:…….. (Signature of the Applicant)

Declaration by the Head/Dean of the Department

This is to certify that Prof./Dr./Mr…… is working in our Department/ Faculty/Institute/Centre/Section…… as …… Please issue him/her Email ID for his/her works.

Date:……

Place:…….. (Signature of the Head of the Department with Seal)

NOTE:- Kindly submit this form to the Computer Centre duly signed by the appropriate authority and your E-mail ID will be instantly created and will be send to your alternate Email-ID.