

T.K.M College of Engineering
Karicode, kollam-5 www.tkmce.ac.in

Application for Internet Access/E-Mail Account

(Please tick (✓) the requested services and read the instructions given in the reverse of this page; The completed application form, duly signed by the concerned Project Coordinator/HOD of the concerned dept., should be submitted to Support Center at TKMCE(Internet server room). Please use CAPITAL LETTER. It is mandatory to provide THREE preferred email_ids. In absence of which email accounts will not be created.

1) Name *: _____
 (Dr./Mr./Ms. First name Middle Name Surname)

2) (a)Date of Birth* : _____ (b)Designation*: _____

3) /Dept./Org*: _____

4) Address for correspondence*: _____

_____ City: _____ Pin Code: _____

5) Telephone Number: (O)* _____ (R) _____ Mobile: _____

6) Current Email account if any : _____

7) a) Preferred email_id_pattern** :@tkmce.ac.in

b) Preferred email_id_pattern** :@tkmce.ac.in

c) Preferred email_id_pattern** :@tkmce.ac.in

8) Alternate e-mail address, if any, for correspondence : _____

This is to declare that I have read the terms and conditions and I agree to abide by them.

* Entries are mandatory and need to be filled.

**The login id(s) will be generated based on the existing e-mail address policy.
 A suffix may be added to make the e_mail id unique across the domain

Signature of the Applicant
 with date and seal

signature of HOD, Concerned Department

FOR SUPPORT CENTRE USE

Account Category: Free/ Paid

If free, on What Basis: _____

If paid, Project No. : _____

Signature of System Administrator

Name & Designation: _____

E-mail and Tel. _____