EMAIL ADDRESS REQUEST FORM FOR OFFICES

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

Ref. No: **1580**
Date: 20/07/2025

OFFICE INFORMATION

Office Name	:	Faculty of Pharmacy
Office Address	:	Mukarram Hossain khandaker Biggan Bhaban
Office Phone	:	4364

EMAIL USER

Name of User	:	Professor Dr. Md. Selim Reza Reza
Designation of User	:	Professor
Employee ID	:	1992041001
Mobile	:	01715363765
Existing Email	:	selimreza@du.ac.bd

REQUESTED EMAIL

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

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