

Request for Staff E-Mail Account

1. You must have an Accept created.	able Use Policy signed and on file before an e-mail account will be
2. Please complete the follow	wing information and return to Janet Thompson at the High School.
Full Name: (include middle i	nitial)
Building:	Position:
Please note the following: You will be required to chang password must meet to be acc	ge your password at first login. Below are the criteria that your cepted by the system.
English Uppercase ch English Lowercase Cl Numerals (0-9) Non-Alphabetic chara	In the last 0 days Int (user name) or full name following four character groups Intracters (A-Z) Intracters (a-z) Intracters (a-z) Intracters (such as !, \$, #, %)
After three failed attempts technology department for	you will be locked out of the account and have to call the assistance.
This form will be returned to secure place.	you after your account has been created. Please keep this form in a
This item to be completed by	the Technology Department
Your E-mail Address is	@jackson.sparcc.org
Attach e-mail instructions	