SHARED EMAIL ACCOUNT REQUEST FORM

All shared email accounts require approval by Departmental Head and IT Services.

**Account Owner Information- Please Print Clearly (owner must be an active LU employee or sponsored by an active LU Department Head)**

*(ALL FIELDS ARE REQUIRED)*

Account Owner’s Name: __________________________ Owner’s LU ID: __________________

Owner’s LEA username: __________________________ Office Phone: __________________

Owner’s Department: __________________________ Owner’s Affiliation (faculty/staff): __________________

*Account Owner’s Department Dean/Director: __________________________

*Must be different from Account Owner

---

**Service Requested- Please indicate action below**

☐ Create New Account ☐ Renew Existing Account ☐ Delete Shared Mailbox ☐ Hide Address in GAL

Describe the reason/use for this account: ____________________________________________________________

Desired/Current email address: ________________________________________________________________

---

**User Access – Please indicate if anyone other than the account owner needs access to this Shared Email Account (use a separate excel spreadsheet for additional users)**

☐ Full Access ☐ Send As ☐ Send on Behalf

User’s LEA username: __________________________ User’s LU ID: __________________________

User’s Affiliation: ☐Faculty/Staff ☐Contractor/Vendor ☐Student Worker

---

**NOTE:** This shared email account is valid for the duration requested up to one (1) year from request date. You must request account reauthorization prior to the end date or the account will be locked. If at any time ownership changes, a new request form must be submitted by the new account owner.

---

Instructions to fill out the form:

1. Please fill out all information requested, incomplete forms take longer to process.
2. Completed forms must be scanned in with all signatures and emailed to servicedesk@lamar.edu Attn: Enterprise Applications.
3. *The initial credentials will be given to the account owner.
4. *All passwords are subject to Lamar University Password policy and are required to be changed at first login.
5. *Account passwords are not to be shared with others. It is the account owner’s responsibility to assign share permissions to other users as necessary.

*Shared mailboxes do not have credentials, unless this is an account that will be used within an application that requires authenticated sending for SMTP or otherwise indicated to require account login.

**Required Signatures**

**Account Owner’s signature indicates that:**

☐ I understand that this account request is in direct support of the mission of the University.

☐ I understand to comply with established university privacy policies and published information technology policies.

☐ I understand that the owner takes all responsibility for activities on the shared email account.

Account Owner: ____________________________ Date: ________________

**Dean/Director’s signature indicates that:**

☐ I authorize IT Services to facilitate the access requested for the duration requested and understand the risks associated.

Dean / Director: ____________________________ Date: ________________

**Information Technology Services Use Only**

Approved by (print name): ____________________________

Signature: ____________________________ Date: ________________

Assigned Username (LEA): ____________________________ Request #: ____________________________
**Information Section**

The request process for shared email accounts requires that the account owner do the following:

1. Open a Service Ticket with Lamar’s IT Service Desk (880-2222 or servicedesk@lamar.edu)
2. Complete a “Shared Email Account Request Form” (see pages 1 and 2)
3. Provide information about the account owner and department.
4. Provide information about users who need Full Access and/or Send As permissions to the shared account.
5. Explicitly agree to accept ALL responsibility for:
   a. owner account access and privileges,
   b. assure that the account owner is aware of and intends to follow applicable LU appropriate use policies, and any/all activity undertaken by the account
6. Certify the above through appropriate signatures from the responsible parties for that account (e.g., department chair, dean, director, etc.)
7. Submit the completed form to IT Service Desk via email, campus mail, or hand delivery. IT Services will process this request and respond either approving the request by providing the account name and *password as requested, or denying the request and explaining why.

For an approved request, the account owner accepts all responsibility to manage the account as follows:

- communicate user privileges to account users
- educate users on appropriate use of the account

*NOTE:* The information section is for your records only and does not need to be submitted with the above request form.