

REQUEST FOR -DISTRICT NETWORK / E-MAIL ACCOUNTS

- ◆ Please fill out this form and return to your library contact person or the technology department at the District Office.

Date: _____ Your Name: _____

School: _____ Department: _____

Preferred Network/Email Password: _____

!!! Passwords must be at least 8 (eight) characters long, of which 2 (two) must be numbers and/or symbols!!!

***** FOR NETWORK ADMINISTRATOR'S USE ONLY!! *****	
Date Account Activated:	_____
Your Network/E-mail User Name is:	_____
Your Network/E-mail Password is:	_____
Your Full E-mail Address is:	firstname.lastname@sweethome.k12.or.us

WELCOME TO THE SHSD NETWORK!