



**INFORMATION AND COMMUNICATION TECHNOLOGY OFFICE**  
**CITY GOVERNMENT OF VALENZUELA**  
**EMAIL ADDRESS REQUEST FORM**

ICRTF
DATE: _____

This form is issuance of an official email address which is under **valenzuela.gov.ph** domain. Please fill-up all the information below and secure approval from the office/department head.

**Office/Department:** \_\_\_\_\_

**Employee's/User Information:**

**First Name:** \_\_\_\_\_

**Middle Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

<b>Office/Department Head Approval</b>
<b>Department Head Name:</b> _____
<b>Department Head Signature:</b> _____

**Reason for Request:** \_\_\_\_\_

*\* The email address issued should be used for official business transaction only and the user has the full accountability on the misuse of it.*

ICTO Approval (Do not fill-up this portion)	<b>Email Address :</b> _____
<b>Approved by :</b> _____	<b>Date Received :</b> _____
<b>Date Approved :</b> _____	<b>Date Processed :</b> _____

Form No. QP-VAL-IT-1.03 F1



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