Emerson University, Multan Account Creation Form Campus Management System



User Details

Designation			
Designation			
First Name			
Last Name			
Full Name			
CNIC			
Employee ID Number (By Tre	easure Office)		
Personal Phone Number			
Official Phone Number			
Official Email			
Personal Email			
Department Name			
			_
Required Access			
Instructor	HoD □	Controller Examinations	
specific access requirements.			
Approved By			
Approved By	Chairman /HOl	D/ Incharge/Registrar/Vice Chancellor	
	Chairman /HOI	O/ Incharge/Registrar/Vice Chancellor For Official Use (IT Section)	
Approved By Sanctioned By	Chairman /HOI		
	Chairman /HOI	For Official Use (IT Section)	
Sanctioned By	Chairman /HOI	For Official Use (IT Section) ID No: Date of Creation:	
	Chairman /HOI	For Official Use (IT Section) ID No:	