



Request for an MCPS E-Mail Account

Office of Information and Organizational Systems
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

INSTRUCTIONS: This form is used to obtain a Montgomery County Public Schools e-mail account. Read Regulation IGT-RA. Complete **Part I; Part II or III; Part IV;** and **Part V.** Your signature indicates compliance with the regulation. Submit completed form to E-mail Accounts, Room 147, CESC. **Please print all requested information. Incomplete forms cannot be processed.**

PART I—To be completed by all applicants

PLEASE PRINT Name of person requesting access:

New account Reapplying (renewal)

_____ / _____ / _____
Last

First

MI

PART II—To be completed by a student requesting an account, the staff member sponsoring the student, and parent/guardian (if student is under the age of 18, parent or guardian must sign this section).

Student's School _____ Grade _____

Reason for requesting access (for student) _____

_____/_____/_____
Signature, Sponsoring Staff

_____/_____/_____
Date

As the parent or guardian of this student, I have read Regulation IGT-RA: User Responsibilities for Computer Systems and Network Security. I understand this e-mail use is for educational purposes only. Further, I accept full responsibility for supervision if and when my child's use is not in a school setting. I hereby give my permission to issue access privileges for my child.

_____/_____/_____
Signature, Parent/Guardian

_____/_____/_____
Date

NOTE: The project described above may require that the e-mail account be able to send and receive internet e-mail. If internet e-mail is required, please read and sign below.

As the parent or guardian of this student, I give my permission for the ability to send and receive internet e-mail to be added to my child's e-mail account.

_____/_____/_____
Signature, Parent/Guardian

_____/_____/_____
Date

PART III – To be completed by non-MCPS employee requesting an account (See chart on page 2)

Specify role (check only one)

Attorney retained by MCPS

MCCSSE

School Nurse or Health Room Technician

Connection Resource Bank

MCEA

School Nurse Supervisor

Elected Government Official

MCPS/BOE Standing Committee

SERT

Grant Paid Employee

MC Business Roundtable

SHARP

Head Start Staff

MC Print Shop Employee

Student Teacher

ICB

On-site Contractor

Youth Services (provide name below)

Infants and Toddlers Program

PTA ADMAIL Server Administrator

Other MCPS-MC government collaborative program not listed above

Linkages to Learning

Probation Officer

MCAASP

Public Library Librarian

The MCPS Office or School Sponsoring the Account: (see chart on back)

Your address _____

Daytime phone number _____-_____-_____

OPTIONAL: Account Verification Information—Please provide a 6- to 8-digit number that will be used to verify any account changes you may request (i.e., the first 6 digits of your SSN or something similar).

PART IV—To be completed by all applicants

Please read the following before signing:

I have read Regulation IGT-RA and understand its contents. I understand that violation of the regulation is unethical and may be a criminal offense. Should I commit any violation, my access privileges may be revoked, disciplinary action may be imposed, and/or appropriate legal action may be taken.

_____ /_____/_____
Signature, Requestor *Date*

PART V—To be completed by principal (for school-based requests) OR Unit Supervisor (for all other requests)

Principal/Designated Approver:

Please sign to verify that the student account request is part of a school-sponsored project, or that you are sponsoring the non-MCPS employee for an account (for non-MCPS accounts, the signature must be that of the person designated to approve the account—see chart below.)

_____ /_____/_____
Signature, Sponsoring Principal/Supervisor *Date*

Submit completed forms to E-mail Accounts, Room 147, CESC.

APPROVAL OF ACCOUNT

Use this chart to determine who must approve your account and who will sign Part VI of this application.

PERSON REQUESTING ACCOUNT	PERSON RESPONSIBLE FOR APPROVING ACCOUNT
Attorney retained by MCPS	Chief Operating Officer
Connection Resource Bank	Director, Division of Community Outreach
Elected Government Official	Chief Operating Officer
Grant Paid Employee	Principal/Director of Department for which the grant is managed
Head Start Staff	Coordinator for Head Start Unit
ICB	Chief Operating Officer
Infants and Toddlers Program	Director, Placement and Assessment Services
Linkages to learning	MCPS Linkages to Learning Program Coordinator
MCAASP	Director, Department of Association Relations
MCCSSE	Director, Department of Association Relations
MCEA	Director, Department of Association Relations
MCPS/BOE Standing Committee	Assoc. Super. or BOE Designee to whom the committee reports
MC Business Roundtable	Director, Division of Community Outreach
MC Print Shop Employee	Director, Division of Information Services
On-site Contractor	Principal/Director for which they work
Probation Officer	Principal
PTA ADMAIL Server Administrator	Current MCCPTA ADMAIL Administrator
Public Library Librarian	Director, School Library Media Programs
School Nurse or Health Room Tech	Principal
School Nurse Supervisor	Director, Department of Student Services
SERT	Director, Department of Facilities Management
SHARP	Principal
Student Teacher	Principal
Youth Services	Principal
Other MCPS-MC Govt. Collaborative Program	Principal/Director of the School/Dept. working with the program