Requesting an @uiowa.edu Alias Address for an Existing Departmental Account
Mail to: ITS Enterprise Communications Team / 2800 UCC or Fax to: (319) 335-5505

NOTE: You must have a departmental account created before requesting an alias address.

Healthcare Users: go to http://hcis.healthcare.uiowa.edu/helpdesk/ or call the HCIS Help Desk at 356-0001 to request a departmental account and/or alias address before you submit this form.

Departmental account alias addresses are available to University departments and organizations upon request. These aliases are assigned in the same format as an individual e-mail address (its-helpdesk@uiowa.edu). The department/org/program name or abbreviation followed by a hyphen must appear first (e.g. ITS-). **Do NOT publish this address until you have been notified that your request has been approved and processed.**

STUDENT ORGANIZATIONS please go to http://its.uiowa.edu/content/student-organization-shared-account

1. CHECK ONE: [ ] New Request [ ] Update [ ] Delete _____ (list alias here)

2. DEPARTMENTAL E-MAIL ALIAS ADDRESS: *(WHAT E-MAIL ADDRESS WOULD YOU LIKE?)*

@uiowa.edu Email Alias Address Naming Standards (No exceptions)

**** The organization, department or program name** (or an abbreviation for it) **MUST appear first and be followed by a hyphen.**

(e.g.: IntMed-cath-lab; HCIS-ideas; UIHC-AdvancedCare; dentistry-research; ITS-HelpDesk)

* Must contain at least one hyphen. * No spaces or special characters allowed.
* Limit of 32 characters or less to the left of the @ sign.

NOTES: * The alias needs to clearly represent the purpose of the mailbox. * Selection of overly generic aliases cannot be supported. * It is best to have the AccountID and the Email Alias be in alignment.

Requested alias address: _____
(**Dept/Org/Prog)–**(remainder of email alias) @uiowa.edu

Comments: _____

3. ROUTING ADDRESS: *(WHERE WOULD YOU LIKE TO READ THIS MAIL?)*

I want to read this e-mail at this departmental account: _____

Note: 19 characters or less to the left of the @ sign. (e.g. hcis-ideas@healthcare.uiowa.edu)

Note: This **CANNOT** be a personal email account

4. DIRECTORY INFORMATION: *(WHAT INFORMATION WOULD YOU LIKE PUBLISHED IN THE ON-LINE DIRECTORY?)*

Department/Organization/Program Name: _____

Department Phone Number: _____

Department Address: _____

5. AUTHORIZATION INFORMATION: *(WHO IS RESPONSIBLE FOR THIS ACCOUNT?)*

Name: _____ Hawk ID: _____

Department: _____

Campus Address: _____ Phone: _____

Signature: _____ Date: _____