

Mailing List (ListServ) Request Form

Return this form to the ITS HelpDesk — Building 7B, Room 1113
FAX 475-7860 475-4357 voice 475-2810 TTY

Mailing List Name: _____

Primary Subject Area: _____

Estimated number of participants: _____

An RIT faculty or staff person who will serve as the list owner must sponsor all requests.

Your Name (if different from sponsor's name): _____

Sponsor's Name: _____

Sponsor's Username: _____

Sponsor's Department: _____

Sponsor's Phone: _____

In signing this mailing list request form, I acknowledge that I have received and read the *RIT Code of Conduct for Computer Use* document, the *ListServ* ITS HelpDesk document, and the *ListProcessor List-Owner Manual*. I acknowledge that I am responsible for the content of the mailing list and any violations of policies stated or implied by the aforementioned documentation.

Sponsor's Signature: _____

Date: _____

When the mailing list is created the sponsor is notified by e-mail. It is the sponsor's responsibility to add members and other moderators if desired. ITS is a moderator of all mailing lists for maintenance purposes.

For ITS use only:

Date received: _____ Date created: _____

Authorized signature: _____

Notes: