



**SOKOINE UNIVERSITY OF AGRICULTURE  
DIRECTORATE OF INFORMATION AND COMMUNICATION  
TECHNOLOGY (DICT)**

**APPLICATION FOR SUASIS/EDMS/EMAIL LOGIN ACCOUNT**

(To be submitted to the Director Directorate of Information and Communication Technology)

Full Name:.....  
Check No.....Date of Birth.....  
Date Joined SUA .....Designation:.....  
Department.....  
Priority Requested:.....  
Email Address:.....  
Phone number:.....

Reason for request:.....  
.....  
.....

.....  
SIGNATURE OF APPLICANT Date:.....

**A: RECOMMENDATION FROM HEAD OF DEPARTMENT:**

.....  
.....  
.....

.....  
HEAD OF DEPARTMENT Date:.....

**B: AUTHORITY**

PASSED FOR SUASIS LOGIN ACCOUNT CREATION BY:.....  
DATE:.....

.....  
DIRECTOR, DICT Date:.....

Comments after service/work  
.....  
.....

Name:..... Signature:..... Date:.....