ITHACA
Information Technology Services

Mailing List Announcement Request Form

(for announcing lists to students)

Representatives of registered IC student organizations or departments who wish to announce their organization's or department's Majordomo list to students, may send one mass email message to all students each semester with an invitation to join the list. The email message must be in accordance with Student Affairs' Mass E-Mail Policy. To have the announcement email sent on your behalf, please fill out this form and ITS will forward your request to the Registrar's office.

Information About the Requester (list owner)

Name:_____ IC Email Address:_____@ithaca.edu

Campus Address:_____ Campus Phone:_____
(Building & Room)

College ID:_____ ❑Faculty ❑Staff ❑Student

List name:_____@lists.ithaca.edu

1. Who do you want this email sent to (i.e. only freshman):_____
2. Who is the email to be sent from **(**i.e. club or individual name)? _____
3. The subject of the email will be the announcement of the organization's list serve.
4. **Student organizations**, your announcement will read: This is an invitation to join the (name of student organization) Majordomo List Serve. By joining this list, you can receive detailed information about this organization as well as updates about upcoming meetings and events. To become a member of this list, simply send an email to majordomo@lists.ithaca.edu with the following text in the body of the message: subscribe (name of the list).
5. **All other organizations/departments**, please write out or attach a copy of the body of the email below:

_____
_____
_____
_____
_____
_____
_____
_____

The email message is to promote your list, not advertise events. Please make sure you include information about how to subscribe to the list. See the Managing Majordomo Lists Quick Guide for more information.

Signatures

_____ Date:_____
Requester's Signature (indicates agreement to abide by the *Ithaca College All College Computer and Network Use Policy)*

_____ Date:_____
Signature of Department Head or Director (for departmental requests)

_____ _____ Date:_____
NAME SIGNATURE
Approval of advisor or faculty (for organizational lists)

Bring completed form and college ID to the ITS main office, 102 Muller Center. Please allow 3 business days for processing.

OA Initials_____ Date_____