Financial System Management Unit
Ministry of Finance, Government of Bangladesh.

NETWORK ACCESS REQUEST

To be completed by User (Applicant)

Full Name: _____

Title/Designation: _____   Short Name: _____

GPF No.: _____   Date of Birth: _____

Mobile Phone No.: _____   Office Phone No.: _____

Office*: _____   Section: _____

Building/Location: _____   Floor/Room No: _____

Signature: _____   Date: _____
    Applicant

Name of Supervisor: _____   Title/Designation: _____

Signature: _____   Date: _____
    Supervisor

To be completed by FSMU

Group: ☐ Accounts   ☐ Budget   ☐ Mail   ☐ Internet   Other: _____

Organisational Unit : _____

User Id: _____   E-mail Id: _____

Initial Password: _____   Host name: _____

Created by: _____   Date Created: _____

Verified by: _____   Date Verified: _____

User informed and configured by: _____   Date Informed: _____