**Request Form for Temporary Access to UL Email Account**

***to facilitate access to personal Email retained therein***

***(2 week access period)***

All email accounts maintained on UL email systems are the sole property of the University of Limerick.

The University wishes to facilitate retiree access to personal data which may be held in their UL Email account.

It should be noted that emails sent / received in the carrying out of official duties as an employee of the University are not personal emails and MUST NOT be saved or retained in any way. Official duties include administrative, teaching or research duties. **The majority of emails in UL email accounts fall into this category.**

1. **Leaver Details- please complete and return per the details below.**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PersonnelNumber |  |  |  |  |  |  |  |  | Employee Name |  |
| Department |  | Division/Faculty |  |
| Date of Retirement |  | Extension Date commencement:*To be completed by Leaver* |  |
|  |  | Extension Date closure: *Office Use Only* |  |
| Declaration of compliance with UL policy and procedures | **I agree that usage of the UL Email account is governed by the University’s** [**Acceptable Usage Policy**](https://www.ul.ie/policy-hub/policies/information-technology-division)**,** [**IT Security Policy**](https://www.ul.ie/policy-hub/policies/information-technology-division) **and associated** [**procedures**](https://ulsites.ul.ie/itd/policies-procedures)**, the University’s** [**Records Management Policy**](http://www.ul.ie/policy-hub) **and** [**Data Protection Policy**](http://www.ul.ie/policy-hub)**.****I understand that I must only download/copy/forward/transfer/print personal emails from my UL Email account. I understand that I am not permitted to download/copy/forward/transfer or print any emails that I received or sent in the course of carrying out my official duties as an employee of the University.** |
| Applicant Signature |  | Date |  |

1. **HR Director Approval ITD Director Approval**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| HR Director Signature |  |  | ITD Director Signature |  |
| Date |  |  | Date |  |

**Please forward completed form to the Compensations and Benefits Team, Human Resources Division for implementation (Email:** **compandbens@ul.ie****)**