

Mississippi Library Commission E-Mail Account Request Form

Library System:		
Branch:		
Name of Applicant:		
Email Address:		
Full-time Employee Add email account Delete email account Reset Password Make email account a men	Part-time Employee nber of distribution list:	
all-directors eratemIc everyone Other:	illpublic technicalcontacts	youthservices
Name:		Date:
Email:		
Phone:		
Please submit a separate form for	or each new request or cha	ange If you do not receive a

response in 2 business days or for questions, please call our Helpdesk at 1-877-652-8324.