User Registration Form



Section 1 - User Information

* Mandatory information (Required for Account creation) *SDM – Service Desk Manager

New NIC Number		Name Mr./Miss./M	1rs./Dr	
(12 Digits):*		Prefix:	-	
First Name:*		Middle Name		
Last Name: *		Personal Ad	dress	
Initials:*				
Position:*				
Institute Name and Head Number:*				
Email Address:*				
Contact Number:*	Office			
Contact Number:	Mobile	SDM Access Required?	Y	N

Section 1.1 – User Personal Information

(Required for account creation / will use to verify the user in case of password reset)

Army Registration Number:	Date of Birt	th :
Marital Status :	Place of Bir	rth :
Marriage Date :	Gender	:

Section 2 – Work Information

* Mandatory information (Required for Account creation)

Work Address*:	Head of the Dep*:	
	Contact Number:	

Section 3 - Access Information*

List of Functions are listed in the Annexure.

Function Name	Read	Write	Delete	Role/Responsibility

Section 4 – Infrastructure information

Network Type	Ethernet/ Wifi	Computer Type	Laptop/ Desktop
IT Contact Person*	Name	Number	

The information given above is true and accurate to the best of my / our knowledge.

Signature of Requester

Signature of Head of the Dep.

Date

For Office Use	Accepted	
	Rejected	

Section 5 – Security Questions (Private and Confidential)

(Will use to verify the user in case of password reset)

Select any 5 questions and write your answer.
Q1. In what town was your first job?
Q2. What school did you attend for sixth grade?
Q3. What was your favourite food as a child?
Q4. What is your favourite movie?
Q5. What is the middle name of your oldest child?
Q6. What is your favourite cricket team?
Q7. What was the make and model of your first car?
Q8. What was the name of the hospital where you were born?
Q9. Who is your childhood sports hero?
Q10. What was the name of the company where you had your first job?
Q11. What was your childhood nickname?
Q12. Where were you New Year's 2000?
Q13. What's your Fathers middle name?
Q14. What was the name of your second dog?

Returning Address:

User Registration, ITMIS Centre of Excellence, Room 37, Ministry of Finance, Lotus Road, Colombo 1

Email: itmishd@treasury.gov.lk (Scanned Copy)