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**Reference the** [**Stationery Buddy**](https://staffnet.southernhealth.ca/admin-resources/stationery-buddy/) **for naming conventions and titles/credentials in both official languages:**

1. COPY sample signature block below

2. Within the main window of Outlook on screen, click

 FILE, OPTIONS, MAIL, SIGNATURES

3. Select “new”

4. Enter your name and select OK

5. PASTE signature block

6. Customize text with your information. Note that pronouns and physical address are optional.

7. Click SAVE

8. Best practice is to customize ‘Replies/forwards’ signature with the required parameters below:

NAME/NOM *(he,him/il, lui) or (she, her/elle, lui) or neutral (They, them/iel) (optional)\**

**SOUTHERN HEALTH-SANTÉ SUD**

**T**  204-xxx-xxxx

 \**For more information on pronouns, click* [*here*](https://sharedhealthmb.ca/about/community/)*.*

9. Click OK (twice)

(For further assistance, please contact the ICT Service Desk at 1-866-999-9698 or email at servicedesk@sharedhealthmb.ca)

**NAME/NOM** *(he,him/il, lui) or (she, her/elle, lui) or neutral (They, them/iel) (optional)*

Title-EnglishTitle-French

**SOUTHERN HEALTH-SANTÉ SUD**

**English Program-Service-Site/French Programme-Service-Site**

Box/CP 190, 40 Rogers St/40 rue Rogers *(optional)*

Notre-Dame-de-Lourdes MB R0G 1M0 *(optional)*

**T**  204-248-7254 **F**  204-248-7255

**Cell**  204-xxx-xxxx

[www.southernhealth.ca](http://www.southernhealth.ca)



Healthier **people**. Healthier **communities**. **Thriving** together.

Le mieux-être des **gens**. Le mieux-être des **communautés**. **Prospérons** ensemble.

*Planned absence/Absence(s) prévue(s) :*

[*Land Acknowledgement*](https://southernhealth.ca/about-us/) */* [*Reconnaissance du territoire*](https://southernhealth.ca/fr/a-propos-de-nous/) *(optional)*