Below please find a selection of branded email signatures approved for use with your Knox College account. Please note that the grey content is optional. Images can be downloaded directly from this document.

**STANDARD OPTION**

**FULL NAME**

Title

(pronouns)

Knox College

Office, Department or Program | Building, Room #

2 East South Street | Campus Box K-XXX

Galesburg, Illinois 61401-4999

309-341-XXXX | Mobile: xxx-xxx-xxxx

[knox.edu](http://www.knox.edu)



**Variations**

**JANE DOE**

Professor of English

Knox College

Department of English | Old Main, Room 202

2 East South Street | Campus Box K-236

Galesburg, Illinois 61401-4999

309-341-XXXX | Mobile: xxx-xxx-xxxx

[knox.edu](http://www.knox.edu)



**\*\*  
  
JANE DOE**

Professor of English  
(she/her)

Knox College

Department of English | Old Main, Room 202

309-341-XXXX

[knox.edu/english](https://www.knox.edu/academics/majors-and-minors/english-literature)



\*\*

**JANE DOE**

Admission Counselor | Office of Admission

**KNOX COLLEGE**

309-341-XXXX

[www.knox.edu](http://www.knox.edu)

  
  
*Your Future is Wide Open*

\*\*

**JANE DOE**

Professor of English | Department of English

(she/her)

**KNOX COLLEGE**

309-341-XXXX

[knox.edu/english](http://www.knox.edu/english)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VENTURE BOLDLY OPTION**

**FULL NAME**

Title

(pronouns)

Knox College

Office of Advancement | Building, Room #

2 East South Street | Campus Box K-XXX

Galesburg, Illinois 61401-4999

309-341-XXXX | Mobile: xxx-xxx-xxxx

[knox.edu](http://www.knox.edu)/venture-boldly



**Variations**

**JOHN DOE**

Assistant Director of Annual Giving | Office of Advancement

**KNOX COLLEGE**

Mobile: xxx-xxx-xxxx

[knox.edu](http://www.knox.edu)/venture-boldly



**JOHN DOE**

Athletics Trainer

**\*\***

**JANE DOE**

Professor of English  
(she/her)

Knox College

Department of English | Old Main, Room 202

309-341-XXXX

[knox.edu/english](https://www.knox.edu/academics/majors-and-minors/english-literature)



\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ATHLETICS OPTION**

**FULL NAME**

Title

(pronouns)

Knox College

Department of Athletics | Building, Room #

2 East South Street | Campus Box K-XXX

Galesburg, Illinois 61401-4999

309-341-XXXX | Mobile: xxx-xxx-xxxx

prairiefire.knox.edu

**Variations**

**JOHN DOE**

Athletics Trainer | Department of Athletics

(he/they)

**KNOX COLLEGE**

309-341-XXXX 

prairiefire.knox.edu

\*\*

**JANE DOE**

Head Coach | Women’s Soccer

Knox College

Department of Athletics

Mobile: 309-341-XXXX

prairiefire.knox.edu