Library Membership Form for Research Scholars

(Fill the form in CAPITAL LETTERS only)

(FIII the form in CAPITAL LETTERS	5 only j		
I hereby apply for the membership of the library to borrow books and other study material from the University Library.			Photo 1x1
Name	S/D/O		
Department	Reg. No	Batch	
Email			
Mob Procent Address	Mob (Res.)		
Present Address			
Permanent Add: Road/Area/Vill_			_H.N
P.OP.S		Distt	
State		1	
	<u>UNDERTAKING</u>		
I agree to abide by the library r	ules and regulations e	nforced from time to	o time.
Date:		Signature:	(Applicant)
Confirmation from	m the Guide and Head	of the Department	
Certified that Mr. /Ms		is a bonafic	le student of
Department of			
Signature of the Guide	Sign of the HOD with stamp		
(For office use only)			
Membership No	Date	Page No	

Date of Expiry / Clearence_____Signature____