



**VIVEKANAND CENTRAL LIBRARY  
CENTRAL UNIVERSITY OF JHARKHAND  
CHERI-MANATU - 835222, RANCHI (JHARKHAND)**

**Library Membership Form for Faculty & Staff**

Membership Category (please tick (✓) the appropriate option below):

Teaching  Non-Teaching

Photo  
1x1

Name (Block Letter): \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of Joining: \_\_\_\_\_ Department \_\_\_\_\_

Designation: \_\_\_\_\_ Employee Code: \_\_\_\_\_

Present Address: \_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_ Pin: \_\_\_\_\_

Email: \_\_\_\_\_

Mob. \_\_\_\_\_

Permanent Address: Road/Area/ \_\_\_\_\_ H.N. \_\_\_\_\_

Distt \_\_\_\_\_ State \_\_\_\_\_ Pin: \_\_\_\_\_

Registration Validity: From \_\_\_\_\_ to \_\_\_\_\_

**UNDERTAKING**

**I agree to abide by the library rules and regulations enforced from time to time.**

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

(Applicant)

I recommend that Mr./Ms./Dr./Prof.: \_\_\_\_\_ may be given library Membership.

Dean/HOD/Controlling Officer: \_\_\_\_\_

(Sign with stamp)

**(For office use only)**

Membership No. \_\_\_\_\_ Date \_\_\_\_\_ Page No. \_\_\_\_\_

Date of Expiry / Clearence \_\_\_\_\_ Signature \_\_\_\_\_