

CENTRAL LIBRARY
RAJIV GANDHI UNIVERSITY

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APPLICATION FOR LIBRARY MEMBERSHIP

To
The Librarian
Rajiv Gandhi University

Faculty/Student/Research Scholar/
Non-Teaching Staff/Others

Sir,

ID/Roll No.....

I wish to enroll as a member of the Central Library, Rajiv Gandhi University and I shall abide by rules and regulations of the library.

Name [in block letters] : Ms/Mr./Mrs/Dr./Prof.....

Designation/ Course [in block letters] : Date of Joining.....

Department/ Centre [in block letters] :

Name/ Dept./ Guide :
(In case of Research Scholar)

Permanent Address :
(Address proof must be attached)

Present Address [in block letters] :

E-mail :

Contact No :

Recommended by Dean/ H.o.D./ In-charge :

I hereby declare that the information given above is true and correct to the best of my knowledge.

Date:.....

Signature of the Applicant

[For Office Use Only]

User Account No:.....

Created on:.....

Remarks:.....

Circulation Incharge

Librarian