



ATAL BIHARI VAJPAYEE CENTRAL LIBRARY
 MAHATMA GANDHI CENTRAL UNIVERSITY
 CHANAKYA CAMPUS, MOTIHARI, BIHAR - 845401

LIBRARY MEMBERSHIP FORM

Please enrol me as a member of the University Central Library [or renew my membership]. I shall abide by its rules and regulations which I have read.



LIB Registration/Enrolment No: _____

Full Name _____ S/O or D/O _____
 (Block Letters)

Office/Deptt./School: _____

Designation: _____ Joining Date: _____

Date:/...../.....

Signature _____

*[Certified that: (i) I am not a member of the University Library System; (ii) I shall obtain Clearance Certificate/No Dues from the Library prior to leaving the University; (iii) If temporary, tenure of present appointment]

Recommendation

I, the undersigned, recommend that the applicant be enrolled as a member of the Library. I undertake that the concerned student/Research scholar/ Employee of the university shall not be issued End-Semester Examination Admit Card/Relieving Certificate/Last Pay Drawn Certificate or any other document to her/him unless she/he produces Clearance/No Dues Certificate from the library. She/He would be required to take a NOC from the Library prior to leaving the University. The information furnished has been verified by my office.

Recommended by:
 (Head/Dean/Deputy Registrar)

Signature: _____

Received Library Cards/Identity Card on _____ Member's Sign _____

Recd Hnd card on _____ Member's Sign (Head of Central Library/Incharge)

Recd Duplicate card on _____ Member's Sign _____

Surrendered Library Cards/Identity Card on _____

Issued Clearance Certificate on _____ (Head of Central Library/Incharge)



Present Address:

Permanent Address: S/O Shri

Mobile No.: District: State: Pin

Code: E-mail: _____