REQUEST FORM FOR ISSUING DUPLICATE LIBRARY CARD

Date________________

ROLL NO: ____________________________________________________________

NAME: ________________________________________________________________

REASON: ______________________________________________________________
_____________________________________________________________________

Undertaking: I confirm that the information given above is true to the best of my knowledge, and that I will be solely responsible for any discrepancy discovered at a later point.

Holder Signature Library Card Received

Attach: One Photograph (Signature)

For Office Use Only

Duplicate Library Card Issuing Fee: Rs.100.00 Receipt No. ________________

Date: ______________________

Librarian Signature

Membership & Circulation Desk