



Institute of
Management Technology
Ghaziabad

LIBRARY

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