

CENTRAL LIBRARY, KUMAUN UNIVERSITY, NAINITAL

LIBRARY MEMBERSHIP FORM

**Note- 1- Please fill the form in capital letters only.
2- Attach one passport size photograph extra with write your name on the back.**

Name-
Last Name-.....First Name.....
Father's Name.....
Sex (Male/Female)-.....
Designation-.....
Department-.....
Permanent Address-.....
.....
Postal Address-.....
.....
Phone Nos-.....
E-mail-.....

Signature of Candidates

(For official use only)

Barcode-RS.....
Valid From..... Expiry.....

Signature of dealing staff