



ACHARYA TULSI NATIONAL COLLEGE OF COMMERCE

LIBRARY & INFORMATION CENTRE

STUDENTS APPLICATION FORM FOR LIBRARY MEMBERSHIP

NO OF BORROWER'S CARD ISSUED: 02

Date.....

Passport size

Photograph

Name of the Student (In Capital Letters)	
Date of Birth/Age/Gender	
Present Address	
Permanent Address	
Contact Number: Res. No. Mobile No. E-Mail.	
Blood Group	

Signature of the applicant

For Office Use Only

Library Membership

No.....Date..... Card Validity

from..... To.....

Librarian



ACHARYA TULSI NATIONAL COLLEGE OF COMMERCE

LIBRARY & INFORMATION CENTRE

FACULTY / STAFF LIBRARY MEMBERSHIP FORM

Date.....

Passport size

Photograph

Name of the Faculty (In Capital Letters)	
Department/Subject	
Date of Joining	
Present Address	
Permanent Address	
Contact Number: Res. No. Mobile No. E-Mail.	
Blood Group	

Signature of the Faculty

Signature of the Principal with Stamp

Note: The information given above is true to the best of my knowledge and I agree to abide by the Library Rules.

For Office Use Only

Library Membership

No.....Date..... Card Validity

from..... To.....

Librarian