Centre de Sciences Humaines

 Library Card Number

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Name of the member (in capital letter) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current job title; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the University/organization; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of joining (dd/mm/yy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Valid up to 31st Dec’24

Date of Birth(dd/mm/yy) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nationality; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Address of the member; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PIN Code; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mobile N° ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail ID (in capital letter)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tell something about your Project/purpose to visit;

\*By submitting this form, I agree to observe the CSH library policies, rules and regulations and all my details provided on the form are correct.

Signature of the member; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Librarian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_