



Taki Government College Central Library Library Membership Form

(For Teaching & Non-Teaching Staff)

Name (in Block Letter):	
Designation:	
Department: Date of Joining:	
Present Address:	
Contact No.(Mobile):	
Email:	
I, the undersigned would like to apply for library membership as Teaching/Non-Teaching Staff. The information given above is true to the best of my Knowledge. I he undertake the responsibility to abide by rules of the library. In case of lost or damage any book borrowed by me, I am willing to replace the same or new edition of that boowhich I lost.	reby of
Date: Signature:	
Conformation from the Principal/ OIC	
Certified that Dr./Mr./Ms is a newly joined Teaching/I Teaching staff of this college.	Non-
Date: Principal/Officer-in-Charge (With Sea	 al)

Signature of the Librarian (with Seal)