

# **CENTRAL LIBRARY**

#### Jawaharlal Nehru Krishi Vishwa Vidyalaya Krishinagar, Adhartal, Jabalpur (M.P.) - 482 004

#### LIBRARY MEMBERSHIP FORM (STUDENT)

Enrollment No			
Name ( Block Letters)			
S/D/W Name			
Course			
Registration Year			
Department			
College			
Blood Group			
Date of Birth			
(DD-MM-YYYY)			
Contact No.	Mobile-	Others-	
E-mail ID			
Registered in CeRA	CeRA ID:		
Permanent Residential Address			
Class Advisor Name			
Date of Issue (filled by Library)			
Valid upto (filled by Library)			

**Declaration**: I, The undersigned would like to apply for library membership. I have read the Library rules and Regulations and agree to abide by them.

**Student Signature** 



# **CENTRAL LIBRARY**

# Jawaharlal Nehru Krishi Vishwa Vidyalaya Krishinagar, Adhartal, Jabalpur (M.P.) - 482 004

# LIBRARY MEMBERSHIP FORM (Faculty/Staff)

ID No *			
Name ( Block Letters)			
S/D/W Name			
Designation			
Department			
College/Unit/Directorate/ Centre			
Blood Group			
Date of Birth			
(DD-MM-YYYY)			
Contact No.	Mobile-	Others-	
E-mail ID			
Registered in CeRA	CeRA ID:		
Permanent Residential Address			
Date of Issue (filled by Library)			
Valid upto (filled by Library)			

Note: \* Official staff ID No. will be issued by office of AR (G)

**Declaration**: I, The undersigned would like to apply for library membership. I have read the Library rules and Regulations and agree to abide by them.

**Signature** 

**HOD Recommendation**