**Satyanarayan Sinha Central Library**

 **Jawaharlal Nehru Krishi Vishwa Vidyalaya**

**Krishi Nagar, Adhartal, Jabalpur (M.P.) 482 004**

 **Paste**

 **Photo**

**LIBRARY MEMBERSHIP FORM**

 Department: ----------------------
Library Card ID: -----------------------

|  |  |
| --- | --- |
| Name ( Block Letters) |  |
| Father’s Name  |  |
| Date of Birth ( DD-MM-YYYY) |  |
| Gender  |  |
| Course Category ( Tick one)  | **UG** **PG** **Ph.D**  |
| Present Residential Address at Jabalpur ( Hostel / Paying Guest) |  |
| Permanent Residential Address |  |
| E-mail ID Mobile No. |  |
| Bar-coding ID No. ( Office Use)  |  |
|  Class Advisor Name  |  |

**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 of Student Signature of Class Advisor**