

	<b>Library Requisition Form (For Books)</b>	
Alandi (D), Pune – 412105	ACADEMIC YEAR	2018-2019
DEPARTMENT OF CENTRAL LIBRARY	TERM	I / II

Following Books are required for \_\_\_\_\_ Department ( UG )

Date :

Sr. No	Title	Author	Edition	PBS	Price	Copies available in the Lib. for the concerned Dept.	Total no. of copies available in the Library	Additional copies required	I n t a k e	
	_____	_____	_____				Approved / Not approved			
	_____	_____	_____							
Name & Signature of Applicant	Signature of Library Committee member of respective Department	Remark & Signature of Head of Dept. Concerned		Remark & Signature of Dean Academic		Director				