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Academy of Engineering (An Autonomous Institute)	Library Membership Form For Student	
Alandi (D), Pune – 412105	ACADEMIC YEAR	2021-22
DEPARTMENT OF CENTRAL LIBRARY	TERM	I / II

APPLICATION FORM OF LIBRARY MEMBERSHIP FOR STUDENTS

To, The Librarian				Membership No
MIT Academy of Engineer Alandi (D), Dist. Pune.	ing,			
Respected Sir/Madam,				
I wish to avail of the library I shall abide by the rules of				use library facility.
Full Name (Surname first) (In Block Letters)	:			
Email ID	:			
Permanent Address	:			
Parents Phone Number	:			
Local Address	:			
Student Phone Number	:			
Class	:	Divisio	n / Branch:_	
Roll No.	: Academic Year:			
Amount of fees paid Rs		: Challan No	Date	e:
PRN NO:				
Previous year's library dues ((if any):			
Date:				
	/N		Sig	nature of Applicant
Membership sanctioned: Yes	S / INO			