

 MIT Academy of Engineering (An Autonomous Institute)	Library Membership Form For Student	
	Alandi (D), Pune – 412105	ACADEMIC YEAR 2020-21
	DEPARTMENT OF CENTRAL LIBRARY	TERM I / II

APPLICATION FORM OF LIBRARY MEMBERSHIP FOR STUDENTS

To,
The Librarian
Maharashtra Academy of Engineering,
Alandi (D), Dist. Pune.

Membership No.

Respected Sir/Madam,

I wish to avail of the library facility, I kindly request you to permit me to use library facility. I shall abide by the rules of the library. My particulars are as follows :

Full Name (Surname first) : _____
 (In Block Letters)

Email ID : _____

Permanent Address : _____

Parents Phone Number : _____

Local Address : _____

Student Phone Number : _____

Class : _____ Division / Branch : _____

Roll No. : _____ Academic Year : _____

Amount of fees paid Rs. _____ : Challan No. _____ Date : _____

PRN NO: _____

Previous years library dues (if any) : _____

Date : _____

Signature of Applicant

Membership sanctioned : Yes / No

Librarian