

PRESIDENCY UNIVERSITY LIBRARY

Kolkata – 700073

LIBRARY MEMBERSHIP FORM

(University Faculties, Officers and Non-Teaching Staff)

NAME (in capital)	:		Photograph
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Department	:		
Date of Joining	:		
Address	:		
Contact No (Mobile)	:		
E-Mail	:		
Area of Interest	:		
Signature & Date	:		
Library Membership No . (to be issued by library)	:		
Received the Library Cards			
(Signature of the Member w	ith date)		
Date:		(Signature of the i	ssuing authority