

MEMBERSHIP NO.:

MOHINDER SINGH RANDHAWA LIBRARY, PAU, LUDHIANA

Application form for **CASUAL MEMBERSHIP** for **WARDS** of PAU

Name of the ward _____
(First Name) (Middle Name) (Last Name)

Date of Birth: ___/___/_____ Age: ___years ___Months Qualifications _____
(Attach age and qualification proof)

Name of the Employee: _____ Designation: _____

Department: _____ Library Membership No.: _____

Email: _____ Tel/Mobile No.: _____

Residential Address (Attach proof) _____

My ward will abide by the rules and regulations of the Library. We also agree to the rules relating to copyright. He/she will use the Saxena Reading Hall & Dr. Kulbir Singh Gill Reading Hall only if the seats are vacant as we understand that it is meant for PAU Members.

Signature of the Ward: _____

Date: _____

Signature of the Employee: _____

Certified that Mr/Ms _____ is working as _____
(Faculty/employee) in this department

Head of Department
(Seal)

Despatch No.: _____ Date: _____

FOR OFFICE USE

May be allowed to use this library as per university rules

University Librarian

Incharge Circulation Section

Received Rs. 500/- on account of library membership vide receipt No _____ dated _____

Library Card No. _____ received

Jr. Lib. Asstt. (Cir)

Signature