MADRAS UNIVERSITY LIBRARY (MUL)

University of Madras, Chepauk, Chennai – 600 005.

APPLICATION FOR LIBRARY MEMBERSHIP

(Faculty/ Staff)

Employee No.: | | | | | | **Date of Birth :** | | | | | | | |

ID Number (Assigned by the Office)	M	U										M	L			

Name in Block Letters	
Designation	
Department / Centre / Section	
Local Address	
Phone :	**Email :**
Permanent Address	

Date : **Signature:**

Certified that the above applicant is a Faculty Member/Staff of this Department / Centre / Section and may be enrolled as a member of the Library.

Date : Seal : **Signature of HOD**

(For Office use only)

Admission No. :
Date of Admission :
The applicant may be enrolled as a Library Member

University Librarian

Received No Due Certificate from the University Librarian after clearing all my dues/charges

Signature with Date:

No Due Certificate issued and Membership closed on .....

Date : **CRS Staff** **University Librarian**