

DOON UNIVERSITY, DEHRADUN
UNIVERSITY LIBRARY

LIBRARY MEMBERSHIP FORM FOR STUDENTS

1. Name (Block Letters) : _____	Please paste recent passport size photographs
2. Father's Name : _____	
3. Male/Female : _____	
4. Enrolment No. : _____	
5. School : _____	
6. Academic Program : _____	10. Blood Group.....
7. Duration of Course : _____	11. DOB
8. Correspondence Address: _____ _____	
9. Permanent Address / Phone No /Email : _____ _____	

UNDERTAKING

I have read the Library Rules and agree to abide by them and also agree with records maintained by the library in respect of issue & return of documents & other related matters. I undertake

1. To pay any dues when demanded by the Library as per the rules.
2. That after written examination of Final Semester, I will return all the books issued to me to the Library otherwise University reserves the right to withhold my Result.
3. To obtain "*No Dues/ Clearance Certificate*" from Library at the time of leaving the University.

Signature with Stamp of HOD
Date : _____

Signature of Applicant
Date: _____

For Library Use

Mr./Ms. _____ has been enrolled as member of the Library. His/ her membership No. is _____.

Librarian
Date: _____

