



VIDYASAGAR UNIVERSITY
CENTRAL LIBRARY
Membership Registration Form
[For Non-stipendiary Research Scholars only]

To
The Librarian
VidyaSagar University
Midnapore – 721102

ID No.....
(for office use only)

Sir,

Kindly enroll me as a member of your library. I furnish below my relevant particulars. I promise to abide by the library rules which may be made applicable from time to time. I submit the required documents with this application. I shall be liable to pay any dues which I may owe to my negligence or infringement of library rules.

1. Name: Mr./Mrs./Ms.
2. Department
3. Date of Joining as Research Scholar
4. Permanent Address
.....
.....

Dist..... PIN

5. E-mail address (if any):
6. Mobile No.
7. Tenure of engagement: From To
8. Caution Deposit Receipt No.

.....
Signature of the Supervisor with seal

.....
Signature of the applicant

.....
Countersigned by the HOD

.....
Signature of the Librarian

- **Caution Deposit Receipt copy to be produced with this application form**
- **Copy of Ph.D Registration certificate to be attached**