

## Bahauddin Govt. Arts College, Junagadh.

## **Library Membership Form - Student**

Name (English only):			
(Surname)	(First name)	(Middle name)	
Date of Birth:/	_ Gender(Male/Fe	emale):	Latest Passport size
Email ID :			Photograph
Contact Number: 1)	2)		
Member Type GEN	OBC	SC	ST
Course: BA / MA:	Main Subject:		
Year of Joining: Ad	cademic Year:	FY SY_	TY
Present Address:			
Parmanent Address:			
<b><u>Undertaking:</u></b>			
1. I have read library rules carefully	and shall be responsible for	or the library material b	orrowed by me.
2. I shall return library material as pe	er rules on or before due d	late failing of same will	charges as fine.
3. I am responsible to clear my librar	ry account before leaving	the college.	
Date:			Sign of Applicant
	For Library use only.		
Member ID:	Member Code:		
Valid up to:			Sion of Librarian