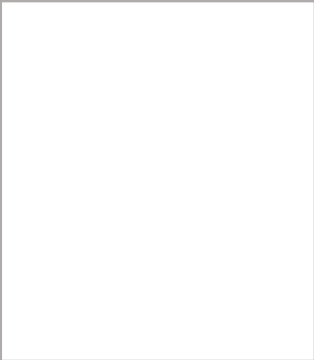




**Indira Gandhi Memorial Library
UNIVERSITY OF HYDERABAD**



APPLICATION FOR LIBRARY MEMBERSHIP FOR RETIRED FACULTY

I wish to borrow books from the University Library. I have read the rules and regulations of the Library and abide by the same.

Name (in block letters): _____

Designation at the time of superannuation: Assistant Professor / Associate Professor / Professor

School/Centre/Department: _____

Retirement ID:

Permanent Address: _____

Present Address (If different): _____

E-mail _____

Phone (Res. Landline with STD code): _____ Mobile: _____

I hereby declare that the information given above is true and correct to the best of my knowledge.

Date:

Signature of the Applicant

(FOR OFFICE USE ONLY)

Patron Account No. _____ Created on: _____

Amount Received: Rs.4000/- Receipt No/Date. _____

Remarks: _____

Circulation Counter staff / In-charge

Officer In-charge: