

SHRI MADHAV COLLEGE OF EDUCATION AND TECHNOLOGY LIBRARY HAPUR

Library Membership Form

Session – 20.....- 20..... Library Membership No.

Counselling

Name of Student

Husband's/Father's Name

Course

Permanent Address

.....

Phone No.

Admission Date

Student's Sign.

All the terms are fulfilled by the student library cards should be issued to her/him

Librarian Sign.

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