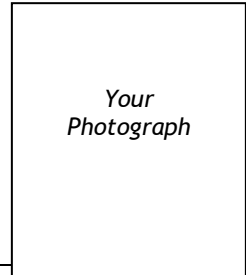




DLHSBLR LIBRARY

DLHSBLR LIBRARY MEMEBRSHIP FORM

The Chief Librarian
DLHSBLR Library
Bengaluru Campus



This is to request you to kindly enroll me as a Member of MLSBLR Library, Bengaluru Campus. My personal particulars are given below:

MAHE ID No.		
Name (in Block Letters)		
Department	Department of	
Category	UG/ PG/ Ph.D/Faculty/ If any Other, Please Specify:	
Date of Joining		
Communication Address	Students: Hostel Name (Full):	
	Room Number:	
Tel No.		
Mobile No.		
MAHE Email ID (official)		
Alternate E-mail ID		

I hereby agree to the following:

- a. I promise to abide by all Library Rules, which may be made applicable from time-to-time.
- b. I would be liable to pay any dues, in respect of damage/non return of Library books and fine payable for non-compliance of Library Rules and Regulations.

Signature of the Applicant: Date: _____

(If Category is if any) Signature of the HOD : Date: _____

Office Use

The Library Staff will create the patron account on our LMS

Name: _____ Signature: _____ Date: _____

Temporary Membership No. Assigned (if any): _____