



MIMIT CENTRAL LIBRARY

Membership Form



Name _____
(In block letters)

Designation _____

Department _____

Mobile No. _____ Email ID _____

Residential Address _____

Please **affix 1** unattested passport size photograph here and **attach 1** unattested passport size photograph at the left corner of this form.

I wish to become a membership of the MIMIT Central Library and avail of its privileges as admissible under the rules. I am Temporary staff member of the MIMIT Malout.

Dated _____

Signature of the Applicant

Recommended

Head / Incharge of the Department

Admitted

Librarian

For office use only

1. Membership No. _____

2. Serial No. _____

3. Membership Cancelled on _____

Librarian