

**Viswakarma Government Engineering College**  
**Chandkheda - Gandhinagar**  
**LIBRARY**

**Application form of Library Membership for STAFF**

Full Name: - \_\_\_\_\_  
(In Block letters)                      Surname                      Name                      Father/Husband Name

Department : - \_\_\_\_\_ Designation: - \_\_\_\_\_

Sex : - Male  Female                       Institute Joining Date: - \_\_\_\_\_

Permanent / Temporary / Ad hock / Visiting: - \_\_\_\_\_

Local Residential Address: - \_\_\_\_\_

(In Block letters) \_\_\_\_\_  
\_\_\_\_\_ Pin: - \_\_\_\_\_

Permanent Residential Add: - \_\_\_\_\_

(In Block letters) \_\_\_\_\_  
\_\_\_\_\_ Pin: - \_\_\_\_\_

Phone No: - (R) \_\_\_\_\_ (O) \_\_\_\_\_ ( Ext. No.) \_\_\_\_\_

Fax: - \_\_\_\_\_

E-Mail: - \_\_\_\_\_

Comment: - Pl. Issue Library Ticket / Pl. Issue Extra Library Ticket

Signature: - \_\_\_\_\_

(Head Of the Department)

Signature: - \_\_\_\_\_

(Applicant)

**( FOR LIBRARY USE ONLY)**

No. of Ticket Issued : \_\_\_\_\_ Member's ID. No. :- \_\_\_\_\_

Date of Issue: \_\_\_\_\_

\_\_\_\_\_  
Librarian