



CENTRAL LIBRARY

M.J.P. ROHILKHAND UNIVERSITY, BAREILLY

1. Student's Name.....
(In Block Letters).....
2. Father's Name.....
3. Father's/Mother's/Guardian Mobile No.....
4. Deptt./Faculty.....
5. Class.....
6. Semester.....
7. Session.....
8. Correspondence Address.....
.....
9. Permanent Address.....
.....
10. Fee Receipt No.Date.....Rs.....
11. Mobile No
12. E-mail Id.....
13. D.O.B..... Category.....

**Affix Recent
Passport Size
Photograph**

I apply for membership of the library and agree to comply with rules of the library.

Student's Signature

Signature

Head of the Department
(Seal)

Note- Please mail your name, father's name, class, department and photograph (JPEG) in soft copy also. **Mail id:** library@mjpru.ac.in