

GOVERNMENT OF JAMMU AND KASHMIR
MEMBERSHIP FORM FOR THE PUBLIC LIBRARIES OF UT OF J&K

Affix
photo

Enlisted under B. No. _____ .
Upto _____ 20 _____ .

I request that I may be enrolled as a member of the library under Roll No. _____ of the Library Rules, I have studied the Rules and promise to abide by them. I shall intimate to you changes, if any in my address. I am personally responsible for any sort of damage to the books or any other library property. The following are my particulars:

Name (in block letters): _____

S/o, D/O: _____

Present Address: _____

Permanent Address: _____

Profession Designation: _____ Qualification: _____

Contact No.: _____ .

Proof of Identity: Ration Card/Election Card/Passport/Driving License/School/College Identity Card (Photostat copy to be attached with this form)

Signature of the Applicant

ATTESTATION OF GAZETTED OFFICER OF THE STATE

I am personally responsible to make good all losses the library property on the part of the applicant including books and other reading material issued to him/her. The responsibility is valid up to _____ .

Name of Gazetted Officer (State): _____

Designation: _____

Official Address: _____

Present Address: _____

Permanent Address: _____

Contact No. _____ Date of Retirement: _____

Dated: _____

Signature with official seal

DEPARTMENTAL CERTIFICATE FOR STATE/CENTRAL GOVT. EMPLOYEES

No. _____ .

Dated _____

Forwarded in original to the Chief Librarian SPS Library/Librarian District/Tehsil/Block/Border Block Library with the remarks that the applicant Sh./Smt. _____ is working permanently as _____ in the office. She may be enrolled as a member of the library and books be issued to him/her under rules. Any loss or damage in the books of any other library property by the applicant will be made good from his/her departmentally on receiving such intimation from your end. In case of his/her transfer etc., the necessary information will be communicated to you accordingly.

Signature of D.D.O