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GOVERNMENT COLLEGE WOMEN UNIVERSITY FAISALABAD

DEPARTMENT OF LIBRARY

No_____

Dated_____

LIBRARY MEMBERSHIP FORM

Kindly enroll as a member of the library. I hereby undertake to abide by the rules and regulation of the library and to pay the replacement value of any book/material lost, damaged or destroyed while in my possession along with the prescribed penalty. My particulars are given below.

PARTICULARS

1.	Name		
2.			
3.	Present Address		
4.			
5.			
6.			
7.		Session	
8.	Department		
9.	Roll No	Section	
10.	CNIC No/B-Form No	Blood Group	
11.	For Boarders Hostel	Room No	
12.	Phone No.(Res Guardian)	Mobile No	
Atte	station by chairperson.	Signature of the applicant	
	I hereby certify that the applicant is a bonafide of this University and the above		
particulars given by her are correct.		Signature (Chairperson)	
		Name	
		Designation	
		Stamp	
Docu	ment Attached		

i. Copy of National identity card (Student/Parents/Guardian).

ii. Membership fee Rs.200/-

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No. Lib. /_____

Dated _____

APPLICATION FOR DUPLICATE LIBRARY CARD

Kindly issue me duplicate Library card under the rules and regulations of the Library as my previous card has been lost. I tried my best to locate it but not successful. My particulars are as under:

PARTICULARS	
Semester	
Library Incharge	Signature of Applicant
	Principal Officer (Library) Department of Library.
	Semester

Bank Receipt No_____