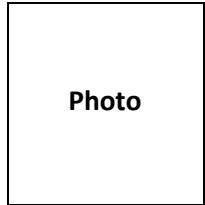


**DEFENCE INSTITUTE OF ADVANCED TECHNOLOGY (DU)**  
**Library Membership Form**



**Date** \_\_\_\_\_

**Sr. No.** \_\_\_\_\_

I, the undersigned would like to apply for Library Membership as **Individual/ Institutional/ Corporate/ Alumni**. I hereby undertake the responsibility to abide by rules of the library. In case of late return/ loss or damage of any library resources borrowed by me, I am willing to pay the required amount.

**Personal Information**

**Name in Full Mr. / Mrs. /Miss:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

**Course Details (Name & Duration):** \_\_\_\_\_

**Department / Wing** \_\_\_\_\_

**Name of the Institute and Address (If applicable):** \_\_\_\_\_

**Present Address:** \_\_\_\_\_

**Telephone No: O:** \_\_\_\_\_ **R:** \_\_\_\_\_ **M:** \_\_\_\_\_

**Email ID:** \_\_\_\_\_

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Signature of applicant

**Recommendation**

I recommend that Mr./Mrs./Miss: \_\_\_\_\_ May be given library Membership.

**Head of the Department:** \_\_\_\_\_

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**For Office Use Only**

**Librarian Asstt:** \_\_\_\_\_

**Membership ID:** \_\_\_\_\_

**Membership Approved/Not Approved:** \_\_\_\_\_

**University Librarian:** \_\_\_\_\_