

Sri Venkateswara Veterinary University Library & Information System (SVVULIS)

Application for Library Membership - Staff

Name of the College :

Name of the Applicant :

Staff ID No :

Blood Group :

Designation :

Department :

Permanent Address :

Phone No. :

Email ID :

DECLARATION

I do hereby agree to obey the Rules and Regulations of SVVU Library and Information System in force from time to time.

Signature of Applicant

INTRODUCTION BY HEAD OF DEPARTMENT/COLLEGE

I am glad to introduce Dr. /Mr. /Ms. _____ of this department/College who may please be permitted to avail the library facilities by issuing Library Readers/ID Cards. However he/she shall be insisted upon to clear all the dues and obtain "NO DUES CERTIFICATE" from the library at the time of leaving the institution on transfer or retirement.

Signature of
Head of Dept. (for Staff) or
Associate Dean (for H/D)

REMARKS OF HEAD OF THE LIBRARY

Please issue Reader's/ID cards, entitled to borrow _____ books at a time.

Library Card No's:

Assistant Professor
(Library & Information Sc.)