

**MOHINDER SINGH RANDHAWA LIBRARY, PAU, LUDHIANA**

Application form for **CASUAL MEMBERSHIP for Ex-Student of PAU**

MEMBERSHIP NO.: .....

Name: \_\_\_\_\_ Father's Name : \_\_\_\_\_

Purpose of joining library (competent examination/General Reading) \_\_\_\_\_

Are you vaccinated for covid (Y/N) provide proof if yes \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Permanent Address (attach proof) \_\_\_\_\_

Mobile No. \_\_\_\_\_ Email: \_\_\_\_\_

**Declaration:** I Shall abide by the rules and regulations of the Library. If I cause any damage to the University property it may be recovered from me. I also agree to rules relating to copyright. I will use the reading halls only if the seats are vacant as I understand that it is meant for PAU Members. **(Four wheelers are not allowed)**

I have read the above declaration and agree to it.

Date: \_\_\_\_\_

Signature \_\_\_\_\_

**(Casual membership fee for One month Rs. 300/-, Six months Rs.1500/-)**

Certified that Mr/Ms \_\_\_\_\_ Has passed as degree \_\_\_\_\_

With Registration No. \_\_\_\_\_ from this department

Dean/Head of Department  
(Seal)

Dispatch No. \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICE USE**

With this approval total CMs will be \_\_\_\_\_

Incharge Circulation Section

Submitted for approval/consider please.

University Librarian

Received Rs. \_\_\_\_\_ on account of library membership for one month/ six months vide  
receipt no. \_\_\_\_\_ dated \_\_\_\_\_

Jr. Lib. Asstt. (Cir.)

Checked and Verified.