

NITTE MEENAKSHI INSTITUTE OF TECHNOLOGY
Department of Library & Information Centre

Library Membership Form

(For Students)

Photo

Signature



(Fill in CAPITAL LETTERS Only)

Name (Block Letters) :	
Course :	
BRANCH :	
Date of Birth :	
VALID UP TO: :	
Phone Number :	
Address :	
Blood Group :	
E-mail Address :	

Librarian Signature:

Card. No:

Date of Issue:

Note: We request you to submit One Passport size photo to the Counter In charge.