

Date:

Signature of the applicant:

ALL INDIA INSTITUTE OF MEDICAL SCIENCES MANGALAGIRI, ANDHRA PRADESH

CENTRAL LIBRARY

APPLICATION FOR CENTRAL LIBRARY MEMBERSHIP DATABASE USE

I request you to enroll me as a member of the Central Library, and Online Database user, AIIMS Mangalagiri. I undertake to abide by the library and Online Database uses rules as applicable from time to time.

Last Name: First Name: (Please fill in all block in capitals)					
Father's Nam	Photograph				
Address:					(Please do not staple)
DOB: Date of Joining/Admission: (DD/MM/YYYY)					
		Email:			
		y below that best describes yo			
SR (Department)	JR (Department)	PhD / MD / MS / MCh / DM / MDS / MSc / Fellowship (Department)	UG (MBBS)	UG (B.Sc. Nursing)	Others
Duration of n	nembership: Fr	omto	(DD/MM/YYY	YY)	
Do you have disability or specific need which means you require extra assistance in the Library / Computer / Printing and Photocopy? Yes / No:					
The Personal Information that you give on this form will be used to administer your Central Library and Online Database User account. The account may be withdrawn if any outstanding charges have not been paid or violation of any Central Library rules or misuse of Database.					
I agree to abide by the Central Library / Database users regulations.					



ALL INDIA INSTITUTE OF MEDICAL SCIENCES MANGALAGIRI, ANDHRA PRADESH

Forwarding Authority

1.	I	undersigned Recor	nmended and	certified	that		
	hi	is/her appointment l	letter no./Admi	ission/Reg	istratio	on No	be
	er	nrolled as a member o	of the Central L	ibrary, AI	MS, I	Mangalagiri.	

- 2. I/ This Institute/ Department undertakes accept responsibility for due return of such Library documents as are issued to him/her and shall pay the price of document(s)/damaged by him/her in case he/she fails to do so.
- 3. The information and photograph furnished by him/her as above has been verified by my office.
- 4. That on the expiry of his/her accreditation or association with this Institute/ Department will not make any final payment due to his/her without obtaining a NO DUE CERTIFICATE from Central Library, AIIMS, Mangalagiri.

Recommended b	y HOD
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Recommended by Dean (Academics)

(For Library use only)

Details are verified by Sr. Librarian

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Borrower's Library Card No.	Borrower's Library Card /		
	Overdue deposited on		
Terms Expires	Expiry Date (add in Koha)		
Remotexs ID	ID Deleted On		
	No dues issued on		
Signature & Date (Library membership card / and Database IDs received)	Remarks, if any:		
	Sign (Librarian – I/II/III)		

No Dues certificate received by (Signature & Date):

Faculty Incharge, Central Library.