



ALIAH UNIVERSITY

21, Haji Md. Mohsin Square, Kolkata, West Bengal, 700016

Library Membership Proforma

(Please fill in BLOCK Letters)

Name :

Designation :

Department :

Employee ID :

Date of Birth (DD-MM-YYYY):

Present Address :

Vill/House No. :

P.O. :

P.S. :

District :

PIN :

State :

Permanent Address :

Vill/House No. :

P.O. :

P.S. :

District :

PIN :

State :

Aadhaar No. :

Phone/Mobile No. :

Emergency Contact No. :

Email :

Blood Group :

Father's/ Mother's/ Husband's/ Spouse's Name:

Date:

Signature

(For office use only)

Date of issue :

Validity :

(Signature with Stamp)

Head of the Department

(Signature with Stamp)

Library Personnel

* Send a Soft copy of photograph and signature to aliahlibraryt@gmail.com

*Contact : +91 8139841076