



Marathwada Shikshan Prasarak Mandal's  
**Shri Shivaji Institute of Engineering  
and Management Studies, Parbhani**

**LIBRARY**  
**Library Membership Form for Student**

Passport  
Size  
Photograph

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

Name of Applicant (IN CAPITAL): \_\_\_\_\_

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

Gender (Male /Female): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Student PRN: \_\_\_\_\_

Branch/Department/Course: \_\_\_\_\_

Correspondence address: \_\_\_\_\_

\_\_\_\_\_

State: \_\_\_\_\_ PIN: \_\_\_\_\_

Phone / Mobile No: \_\_\_\_\_ E-Mail ID: \_\_\_\_\_

**Declaration and Undersigned:** I, \_\_\_\_\_, undertake the following:

1. I shall be responsible for the books borrowed from the Central Library.
2. In case of loss of books/other reading material issued to me, I will replace the new book/pay the replacement value of the book cost assessed by the Central Library.
3. I shall return all the books borrowed within due date failing which the fine (overdue) accumulated may be charged for the book at the rate of Rs. 1/- per day.
4. I will update Library of any change in my notice.
5. I agree to abide with all the rules and regulations of the Library and make up for any loss or damage of any library resources borrowed by me.

Signature of the applicant

Head of the Department

Director