

JOURNAL / STUDY MATERIAL REQUISITION SLIP

Date.....

Name of the Student/ Faculty.....ID No.....

Title of the Journal (loose issues only)/Study Material:

Year..... Month.....

Signature of the Student/Faculty.....

NB: The journals must be returned to the authorized person in sound condition. Students are responsible for journals given for photocopying. All dues are to be cleared within the working day.

For Office Use:

No. of Issues: No. of Issues given for photocopying

Signature of the Staff:

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