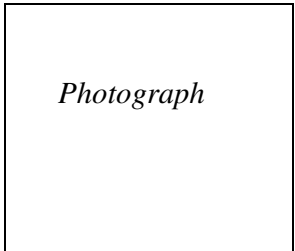


NUJS LIBRARY
The W. B. National University of Juridical Sciences, Kolkata
Block LB-12, Sector III, Salt lake City, Kolkata – 700 098



MEMBERSHIP APPLICATION FORM

Name (in Caps): _____

**Designation (Staff)/Course
(students):** _____

Local Address: _____

Telephone: _____

Email: _____

Permanent Address: _____

Telephone: _____

Area of specialization (Faculty/Research Scholars only)

I hereby undertake that I shall abide by the Rules and Regulations of the NUJS Library.

Date: _____

Signature of the Applicant

Recommendation by Head of the School/Unit

I certify that the applicant is a member of the faculty/staff/temporary visitor/student /research fellow of the Institute, and recommend him/her for library membership.

Name:

Signature:

Date:

(To be filled in by library staff only)

Membership No. -----& Category-----

Date: _____

Signature of the Librarian