



UNIVERSITY OF AGRICULTURE, FAISALABAD
DEPARTMENT OF LIBRARY

No. _____

Dated _____

LIBRARY MEMBERSHIP FORM

Kindly enroll me as a member of the Library. I hereby undertake to abide by the rules and regulations of the Library and to pay the replacement value of any book/material lost, damaged or destroyed while in my possession along with the prescribed penalty. My particulars are given below:

PARTICULARS

1. Name _____
2. Father's Name _____
3. Present Address _____
4. Permanent Address: Village/House No. _____
5. Street No. _____ P.O. _____ Police Station _____
Tehsil _____ District _____
6. Registered No. _____
7. Class _____ Semester _____ Major/Faculty _____
8. Roll No. _____ Section _____
9. N.I.C. _____ Blood Group _____
10. Local Address: Hall _____ Room No. _____
11. Phone No. (Res) _____ Mobile No. _____
12. Signature of the applicant _____

Attestation by any member of the teaching staff i.e. Tutor/Advisor in case of undergraduate while Chairman in case of postgraduate students. Countersigned from Senior Tutor in case of undergraduate students.

I hereby certify that the applicant is a bonafide student of this University and the above particulars given by him are correct.

Signature _____

Name _____

Designation _____

Countersigned by _____ Stamp _____

For Official Use Only

Received Rupees one hundred fifty only as prescribed membership fee vide Receipt No. _____
Book No. _____ Dated _____

CIRCULATION DESK
LIBRARY, UAF

- i. All the dues of the Library are payable on the Library Circulation Desk.
- ii. Please attach two attested recent photographs (Passport size).
- iii. Copy of National Identity Card (Student/Guardian/Parents).
- iv. Undergraduate & Postgraduate Membership fee Rs.150/-.