



GURUCHARAN MEDHI LIBRARY
MORIGAON COLLEGE (AUTONOMOUS)
MORIGAON, ASSAM, PIN-782105

LIBRARY MEMBERSHIP FORM

Paste Recent
Colour
Passport
Size Photo

Name of the Student

Father's / Guardian's Name.....

Mother's Name.....

Date of Birth/...../.....(dd/mm/yyyy)

Class in which admitted : BA/BSc/B Com/B.Voc/BCA

(\ / mark) PG MA/MSc ITEP

Semester I/II/III/IV/V/VI/VII/VIII

Department.....

Roll No HS Arts/Science, 1st Year/ 2nd Year

Major Subject (FYUGP).....

Nationality.....Religion.....

Caste: General/OBC/SC/ST

Present Address: Vill/Town.....PO.....

Dist.....Satate.....Pin.....

Mobile No.....e-mail.....

Permanent Add.: Vill/Town.....PO.....

Dist.....Satate.....Pin.....

Name of the Local Guardian.....

Declaration:-

I declare that I am committed to follow all the rules and regulations of the library and accept penalties if I break those norms.

Date.....

Place.....

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(Signature)