



# Sree Sankaracharya University of Sanskrit University Library

Kalady P.O., Ernakulam, Kerala-683 574 / Email:dl@ssus.ac.in Ph: 0484 – 2463380

## Application for Library Membership

**Details to be filled by the applicant- Faculty/Guest Faculty/Non-Teaching Staff**

Name (Capital letters) :  
Uty. ID Card No. :  
Department/Section :  
Designation :  
Name of the Centre :  
Date of Retirement :

**Affix recent  
photo**

Permanent Address (Capital Letters)			
Communication Address (Capital Letters)			
Contact No		Email	

I have gone through the contents of the library Brochure . I declare that , I shall abide by the rules and regulations of the library given thereof.

Place : Kalady  
Date :

Signature of the Applicant

### **Recommendation of the H. O. D**

Sir / Smt \_\_\_\_\_ is admitted to the University and he /she is recommended to enroll as a user in the University Library.

Place : Kalady  
Date :

Office Seal

Signature of the Head

### **For Office use only**

Koha ID No.

Date of Expiry.

Vol.

P.No.

Issuing Staff

Deputy Librarian