

GOVERNMENT OF PUDUCHERRY
DEPARTMENT OF ART AND CULTURE

ROMAIN ROLLAND LIBRARY / GOVERNMENT BRANCH LIBRARY,
PUDUCHERRY

APPLICATION FOR MEMBERSHIP

DO NOT FOLD OR TEAR OR DAMAGE THIS APPLICATION

Name (in Block Letters) :	<table border="1" style="width: 100%; height: 20px;"></table>	Affix a recent Photograph.
Date of Birth (dd/mm/yyyy) :	<table border="1" style="width: 100%; height: 20px;"></table> Sex : <table border="1" style="width: 20px; height: 20px;"></table>	
Occupation of Applicant :	<table border="1" style="width: 100%; height: 20px;"></table>	
Father's / Guardian's Name :	<table border="1" style="width: 100%; height: 20px;"></table>	
Residential Address :	<table border="1" style="width: 100%; height: 40px;"></table>	
Phone / Mobile No. :	<table border="1" style="width: 100%; height: 20px;"></table> PIN Code <table border="1" style="width: 20px; height: 20px;"></table>	
Office Address, if any :	<table border="1" style="width: 100%; height: 40px;"></table>	
Phone / Mobile No. :	<table border="1" style="width: 100%; height: 20px;"></table> PIN Code <table border="1" style="width: 20px; height: 20px;"></table>	
Mother-Tongue :	<table border="1" style="width: 100%; height: 20px;"></table>	
E-mail Address :	<table border="1" style="width: 100%; height: 20px;"></table>	
Educational Qualification :	<table border="1" style="width: 100%; height: 20px;"></table>	
Nationality :	<table border="1" style="width: 100%; height: 20px;"></table>	

(Office Use only)

Resident Proof

Ration / Voter / Aadhaar Card
No. :

Age Proof

BC / TC / ML / DL / Aadhaar Card

Verified

UNDERTAKING

I herewith deposit Caution Money Deposit / Additional Caution Money Deposit with Annual Subscription ₹ (Rupees.....only) in cash to enroll myself as a member of the Romain Rolland Library / Government Branch Library,, Puducherry. I undertake to abide by the rules of the Library and to inform the Librarian at once of any change of address or loss of membership card. I assure that I will come and take books personally. In case the book is damaged or lost by me either replace the book with the latest edition or pay for the cost of the book at **Twice** the prevailing market price with additional charge as determined by the Library. I also assure that the borrowed books will be returned within the stipulated due date or otherwise I would pay the late fee / penalty promptly.

Date :

Signature of the Applicant

[P.T.O.]

(To be filled-in by the Parents)

Thiru / Tmt. as a parent stand guarantee to my Son /
Daughter Selvan / Selvi
to borrow books from the Romain Rolland Library / Government Branch Library,
Puducherry.

Date :

Signature of the Parent

Strike out the irrelevant portion.

(FOR OFFICE USE ONLY)

Admission Number :

Admission Date :

Receipt No. :

Signature of LIA :

Admit :

A.L. & I.O. / L.I.O. :

Date of Notice of Withdrawal :

Withdrawal Number :

A.L. & I.O. / L.I.O. :