

Dr. Mahalingam College of Engineering and Technology - Central Library

Book Transfer - Recommendation Form

Date:

Name of the User :

User ID No :

Designation :

Department :

Mobile No :

Mail ID :

S.No	Accession No	Author	Title, Edition etc.	Publisher	No.of Copies already transferred to Dept.Library	No.of Copies required	No. of Copies available at Central Library	Justification
1								
2								
3								
4								
5								
6								
7								
8								

Signature of the User

Department Library i/c

HOD

Library Use: Assistant Librarian

Associate Librarian

Librarian

Principal