

Dr.Mahalingam College of Engineering and Technology

Central Library

Date:

Membership Form

Name :
Staff ID :
Designation :
Department :
Date of Joining :
Category : Teaching Staff / Non-Teaching Staff
Address :

Mobile No :
Intercom No :
Email ID :

Passport Size Photo

I assure you that I will follow the rules and regulations of central library.

Note: You are requested to send your photo in JPEG format to library@drmcet.ac.in

Signature of the Applicant

HOD

PRINCIPAL

Library Use:

Counter Staff

Assistant Librarian

Associate Librarian

Librarian