

Mangalayatan University Library

Faculty/Staff Registration Form (All entries to be filled in block letters)

Paste your recent passport size photograph

University Librarian Mangalayatan University		
Aligarh Staff Code No.:	Date of Joining:	Designation:
Name:		
Father's Name:		
Institute / Faculty:		
Department:		
Permanent Address (Home):		
Local Address:		
Phone No.:	Mobile:Email:	
Signature of HOD / Dean with O	ffice Seal Sign	nature of Registrar with Office Seal
I request you to enroll me as a n University, Aligarh. I promise to	nember of the University Library as Faculty / Visiti abide by the rules & regulations of Mangalayatan	ng Faculty / Staff of the Mangalayata University Central Library.
Date:		Signature of Staff
	For Office Use Only	
Staff ID No. (MFN):	Book No.:	Circulation In-charge