

Alandi (D), Pune 412 105

**Department of Library**

**Academic Year:**

**Application form for SC /ST Students for Book Bank Facility**

To

The Principal  
MIT Arts Commerce & Science College  
Alandi Pune – 412105

Library Membership No.

Respected Sir,

I wish to avail the Book Bank facility from Library. I kindly request you to permit me to make use of Book Bank Facility. I shall abide by the rules of the library book bank facility. My particulars are as follow.

**Fill the form in BLOCK Letter**

Full Name (Surname First) : \_\_\_\_\_

Email ID : \_\_\_\_\_

Permanent Address : \_\_\_\_\_

Parents phone Number : \_\_\_\_\_

Local Address : \_\_\_\_\_

Students Phone Number : \_\_\_\_\_

Branch : \_\_\_\_\_ Class & Division:

Category : \_\_\_\_\_ Annual Income :

Last Year Marks :  Percentage :  %

Student Signature

Head of Department

Librarian

Principal

<b>Sr. No</b>	<b>Book Name</b>	<b>Author</b>	<b>Accession Number</b>	<b>Issued Date</b>	<b>Student Signature</b>
1					
2					
3					
4					
5					
6					

I have issued the following books under SC/ST Book Bank Facility. This book I will be return after my final examination. Incase books are damage or lost I will pay the as per the library rules.

**Required Document: 1. Cast Certificate 2. Result**

**Student Signature**

**Date: - / /**

**Library Staff**