

**AMRITLAL BASUMATARY MEMORIAL LIBRARY  
GOSSAIGAON COLLEGE, GOSSAIGAON  
APPLICATION FORM FOR LIBRARY MEMBER**

To,

The Librarian  
Amritlal Basumatary Memorial Library  
Gossaigaon College, Gossaigaon

Sir/Madam,

I beg to apply for permission to use the library, I undertake to abide by the Rules and Regulations of the library. I would be liable to pay any dues, which I may owe due to my negligence library rules.

Date:.....

Yours Faithfully

.....  
Signature

(To be filled in by the applicant legibly)

1. Name (IN BLOCK LETTERS).....
2. Father's Name/Husband's Name (In case of married women).....
3. Date of Birth .....
4. Gender: Male/Female (Please tick)
5. Roll No. ....
6. Session.....
7. **Course : (Tick Mark)**
  - A. Higher Secondary**
    - (i) Arts: 1<sup>st</sup> Year/2<sup>nd</sup> Year
    - (ii) Science: 1<sup>st</sup> Year/2<sup>nd</sup> Year
  - B. Four Years Degree Course (FDC)**
    - (i) Arts: Sem.....General/Major in.....
    - (ii) Science: Sem.....General/Major in.....
  - C. Master of Arts: Sem.....Department.....**
8. **Permanent Address:**

Name.....Father's Name.....

Vill/Town.....PO.....

Dist.....State.....PINCODE.....

Mobile No. ....Email ID (Compulsory).....
9. **Present Address:**

Name.....Father's Name.....

Vill/Town.....PO.....

Dist.....State.....PIN CODE.....
10. Name, Address and Signature of Guarantor (**not for student for special for special users only**).....

**N.B: Attach Admission Receipt with this Application.**

Librarian

Admission Receipt No.....

Date.....