



# TRIPURA UNIVERSITY

(A Central University)

Suryamaninagar- 799022

## CENTRAL LIBRARY

### APPLICATION FOR ISSUE OF LIBRARY CLEARANCE CERTIFICATE (EMPLOYEE)

To  
The Librarian  
Central Library, Tripura University  
Suryamaninagar, Agartala, Tripura

Sir/Madam,

I, undersigned Prof./Dr./Mrs./Mr./Ms.....  
a Faculty/Staff, Department/Branch/ Center of ....., &  
my Employee ID/Library Membership No. is ..... of Tripura University  
during the service period from..... to..... I hereby declare that I have  
returned all books & no outstanding dues pending against me from the Central Library and cleared all  
books with dues from the Department Library of the University.

I request you to issue me a Library Clearance Certificate at the earliest kindly.

Thanking you;  
Yours faithfully,

Recommended

Signature of the Applicant

Date. :

Mobile No.:

Full Signature

Department Library (i/c)

Date:

HoD

Signature with Seal

Date. :

#### FOR OFFICE USE ONLY

Section	Remarks	Signature
Circulation (PA/SPA/LA)		
Project (Books, etc.) (PA/SPA/LA)		
Membership (PA/SPA/LA)		

Library Clearance Certificate No..... dated.....

Assistant Librarian  
Circulation Section (i/c)

Assistant Librarian  
Membership Section (i/c)

Librarian

N. B.: The Library Clearance Certificate application shall be submitted three days in advance.



# TRIPURA UNIVERSITY

(A Central University)

Suryamaninagar- 799022

## CENTRAL LIBRARY

### APPLICATION FOR ISSUE OF LIBRARY CLEARANCE CERTIFICATE (STUDENT & RESEARCH SCHOLAR)

To  
The Librarian  
Central Library, Tripura University  
Suryamaninagar, Agartala, Tripura

Sir/Madam,

I, undersigned Mr./Ms./Mrs./.....,  
a Student/Research Scholar, Department of ....., & my  
Enrolment/Library Membership No. is ..... of Tripura University for the  
academic session/year..... I hereby declare that I have returned all books  
& no outstanding dues pending against me from the Central Library and cleared all books with dues  
from the Department Library of the University.

I request you to issue me a Library Clearance Certificate at the earliest.

Thanking you;  
Yours faithfully,

Recommended

Full Signature of the Applicant

Date. :

Mobile No. :

Full Signature

Department Library (i/c)

Date:

Supervisor /HOD

(Signature with Seal)

Date. :

.....  
**FOR OFFICE USE ONLY**

Section	Remarks	Signature
Circulation (PA/SPA/LA)		
Membership (PA/SPA/LA)		

**Library Clearance Certificate No.....**

Assistant Librarian  
Circulation Section (i/c)

Assistant Librarian  
Membership Section (i/c)

Librarian

N. B.: The Library Clearance Certificate application shall be submitted three days in advance.  
Please mentioned name of research guide (only for research Scholar):