



TRIPURA UNIVERSITY

(A Central University)

Suryamaninagar- 799022

CENTRAL LIBRARY

MEMBERSHIP FORM FOR RESEARCH SCHOLAR

Name (*in capital letters*):

Gender:.....

Father's Name:

Department:

Course: Full-Time/ Part-Time:.....

Name of the Supervisor:.....

Date of Admission:..... Session:

Enrolment No:.....

Category (*UR/SC/ST/OBC/PWD/etc.*):.....

Communication Address:

Dist./City:..... State:..... PIN.....

Permanent Address:

..... Nearest Police Station.....

Dist. /City:..... State:..... PIN.....

Mobile No.: Email ID:

DECLARATION

I hereby declare that the information furnished above is true and correct to the best of my knowledge and further declare that I will abide by the rules and regulations of the Central Library, which may be made applicable from time to time.

Recommended by HoD

Signature of the Applicant

Supervisor
Signature with Seal

HoD
Signature with Seal

Date:.....

Documents Required:

- Copy of I.D. Card / Pay-in-Slip
- Copy of Address Proof (*Aadhaar Card /Voter ID Card, etc.*)

FOR OFFICE USE ONLY

Membership No:

No. of Books Allotted:.....

Date of Activation:.....

PA/SPA/LA
Membership Section

Assistant Librarian
Membership Section (i/c)

Librarian

N.B.: After completing the Ph.D. coursework, the Research Scholar should submit a copy of the Ph.D. Registration letter for continuing the Library Membership.