



UNIVERSITY OF CALCUTTA

University Library

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APPLICATION FORM FOR OUTSIDE USERS TO AVAIL READING ROOM FACILITIES

To
The University Librarian
University of Calcutta

Sir,

Please allow me to avail the reading room facilities of the University Library, University of Calcutta.
I undertake to abide by the rules of the University Library.

Thank you.

Your faithfully,

_____ *[please put your signature with date above the line]*

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Address for communication :
Phone No. :
Email :
Proof of identity submitted (self-attested photocopy of).....

Recommended by

Name
Designation
Signature with seal

FOR OFFICE USE

Reading room facilities granted from to

Library consultation card no. issued on (date).....

Library Staff

University Librarian/ Deputy University Librarian / Assistant University Librarian