



Devi Ahilya Vishwavidyalaya, Indore
School of Computer Science & IT

Khandwa Road, Takshashila Campus, Indore (MP) INDIA – 452 017
Phone No. : +91-731-2438540, Fax: 2761358 email : head.scs@dauniv.ac.in

Session:-2015-2016

Code: _____ ID: _____ DATE: _____

DEPARTMENT LIBRARY
APPLICATION FOR SC/ST MEMBERSHIP
(USE CAPITAL LETTERS ONLY)

PHOTO

It is requested to enroll me as a member of the departmental Library. My

Particulars are as follows:

Name : _____

Father's Name : _____

Mother's Name : _____

Local Address : _____

Tel. No. _____ Mobile No. _____ E-mail _____

Permanent Address : _____

Tel.No. _____ Mobile No. _____ E-mail _____

Nationality _____ Category: SC/ST. _____ Date of Birth _____

Class _____ Session _____ Semester _____

If renewal Last Membership No. _____ Session _____

Bank Challan No. _____ Date _____ Enrollment No. _____

* Enclosed SC/ST category certificate photocopy

Signature Candidate

_____ is regular

Student of school of Computer Science & Information Technology and above Information is verified.

I recommended to provide membership in the Departmental library.

Head, SCSIT
Signature with seal



Devi Ahilya Vishwavidyalaya, Indore
School of Computer Science & IT

Khandwa Road, Takshashila Campus, Indore (MP) INDIA – 452 017
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Telephone No. _____ Mobile No. _____ E-mail _____
Permanent Address: _____

Telephone No. _____ Mobile No. _____ E-mail _____
Nationality _____ Category: GEN/SC/ST/OBC _____ Data of Birth _____
Class _____ Year _____ Semester _____
If renewal Last Membership No. _____ Year _____
Bank Challan No. _____ Date _____ Enrolment No. _____

Signature Candidate

This is to certify that Shri/Smt./Ku. _____ is regular Student of school of Computer Science & Information Technology and above Information is verified. I recommended to provide membership in the Departmental library.

Head, SCSIT
Signature with seal



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Nationality _____ Category: GEN/SC/ST/OBC _____

Class _____ Session _____ Semester _____

Date of Birth _____ Date of Appointment _____ Designation _____

Regular/Contract/Visiting: _____

Signature Candidate

This is to certify that Shri/Smt./Ku. _____ is regular/contract/visiting: _____ faculty of school of Computer Science & Information Technology and above Information is verified. I recommended to provide membership in the Departmental library.

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Signature with seal