

office of the central library মাজুলী সাংস্কৃতিক বিশ্ববিদ্যালয়

MAJULI UNIVERSITY OF CULTURE

GARAMUR, MAJULI

ENROLMENT FORM FOR EMPLOYEE

To, The Assistant Librarian, Central Library, MUC, Majuli Please paste recent passport size photograph

I have joined in the Office/Br	anch/Department o	f	, as
(Please write the de	esignation) and I wish to a	avail the Library facilities.
Please admit me in the Library.			
I agree to abide by the rules of	the Library.		
Signature	:		
Full Name (In Block Letters)	:		
Father's Name	:		
Date of Birth	:	Gender:	
Date of Joining	:		
Permanent Address	: H. No.:	, Ward No.:	
	Road:		
	Vill./Town:		
	P.O:	P.S:	PIN:
	District:	, State:	
Local Address	: H. No.:	, Ward No.:	
	Road:		
	Vill./Town:		
	P.O:	P.S:	PIN:
	District:	, State:	
E-mail ID (Write legibly)			
Phone No. /Mobile No.	:		
Recommended/Introduced by Head of the Department	Admitted/Not Admitted		

Assistant Librarian MUC, Majuli

<u>Documents to be enclosed with the Application Form:</u>

1. Copy of Appointment Letter