



**SINHGAD TECHNICAL EDUCATION SOCIETY'S
SMT. KASHIBAI NAVALE MEDICAL COLLEGE & GENERAL HOSPITAL
NARHE, PUNE-41
CENTRAL LIBRARY**



APPLICATION FOR ISSUING IDENTITY CARD & BORROWER CARD (Student)

(TO BE FILLED IN BLOCK LETTERS)

To,
The Librarian,
Smt. Kashibai Navale Medical College & General Hospital,

Photo

Respected Madam,

I request you to issue me the identity card & borrower card. My particulars are as below.

| | | | | |
|---|-----------------------|---------|------|---------------|
| 1 | ADMISSION RECEIPT NO. | | | |
| 2 | NAME OF THE APPLICANT | SURNAME | NAME | FATHER'S NAME |
| 3 | DATE OF BIRTH | | | |
| 4 | BLOOD GROUP | | | |
| 5 | LOCAL ADDRESS | | | |
| 6 | PERMANENT ADDRESS | | | |
| 7 | YEAR | | | |
| 8 | E-MAIL ID | | | |
| 9 | MOBILE NUMBER | | | |

The Information given above is true to the best of my knowledge & I agree to abide by the library rules notified time to time.

Date :-

Signature of the Applicant

Note : Enclose a photo copy of admission receipt & two copies of I Card size photograph.

FOR LIBRARY USE

SLIM User Id

No of Cards Issued

Checked & Prepared by

Librarian

Date :