



# Central University of South Bihar

## Central Library

### Faculty/Staff Membership Form

Passport size  
colour Photo  
(Attested by  
HODs/Dean)

#### **Office Use Only**

User ID/Enrollment No.:

KohaID :

Date of Registration :

Date of Expiry :

**(To be filled by the faculty/staff in capital letter only)**

Kindly, enclose the photocopy of Joining Report/Employee ID and one additional photograph.

1. Name ( In Block Letters) :
2. Father's/Husband Name :
3. Designation :
4. Aadhaar Number : Blood Group :
5. Date of Joining :
6. Nature of Appointment : (a) Regular  (b) Contractual
7. Type of Membership : (a) Teaching  (b) Non-Teaching
8. Centre/Department : .....
9. Sex : (a) Male (b) Female
10. Address:
  - a) Present : .....
  - b) Permanent: .....
  - c) Email:..... Phone/Mob :
11. Specialization (for faculty ):

Faculty/Staff's Signature

Seal and Signature of H.O.D./Dean

University Librarian

