



Guru Gobind Singh Indraprastha University
Sector-16 C, Dwarka, New Delhi-110078
University Information Resources Centre

MEMBERSHIP FORM FOR TEACHING (INCLUDING CONTRACTUAL) AND NON-TEACHING EMPLOYEES

1. Name (in Block Letters) : _____

2. Employee Code : _____

3. Date of Birth : _____

4. Father's Name : _____

5. Date of Joining the University : _____

6. Blood Group (with Rh factor) : _____

7. Designation : _____

8. Nature of Employment : _____

Regular	Deputation	Contract (Valid upto)
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9. School/ Branch : _____

10. Residential Address : _____

11. Phone: Office _____, Residence _____, Mobile _____

12. E-Mail : _____

I have read the **Membership Rules for UIRC** available on ipu.ac.in/urc/digital.htm and agree to abide by them and **shall obtain 'No Dues Certificate' from UIRC at the time of leaving the University.** I (Contractual Faculty Member) am enclosing 02 passport size (PP) photographs for Library Card.

Date: _____

Signature of the Applicant

Recommendation of the Dean / Head of the Department

Applicant may be enrolled as a member, as UIRC services would benefit in the discharge of his/ her duties. Undersigned vouchsafes for compliance of rules by the applicant.

Date: _____

Signature with Stamp **Dean / HOD**

For UIRC Use

Mr./ Ms. _____ may be enrolled as member of UIRC.

LIBRARIAN

Entered in UIRC database vide Membership No. _____.

Library Card is issued (*for Contractual Faculty Member*).

Incharge Circulation