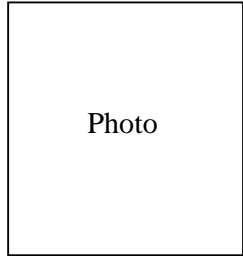




North South University Library

Plot-15, Block-B, Bashundhara, Dhaka 1229
Tel. 880-2-8852000 Ext. 1351-1360, Fax: 880-2-8852016
E-mail: library@northsouth.edu, Web: <http://www.northsouth.edu>



MEMBERSHIP APPLICATION FORM

1. Name (block letters): _____
2. Father's name : _____
3. Status : Core Faculty Visiting Faculty Part-Time Faculty
 BOG Officer Research Assistant
 Under-Graduate Student Graduate Student
 Under-Graduate Assistant Graduate Assistant
4. Department : _____
5. Position (non-student): _____
6. ID No. : _____
7. Residential Address : _____
8. Telephone : T&T _____ Mobile _____
9. E-mail : _____

I hereby declare that all the above information is correct and agree to comply with the library rules and regulations.

_____ Date

_____ Applicant's Signature

Forwarded By	
i. Student	<input type="checkbox"/> Registrar _____ Date _____
ii. Faculty	<input type="checkbox"/> Chair/Director _____ Date _____
iii. BOG	<input type="checkbox"/> VC/Pro-VC _____ Date _____
iv. Officer	<input type="checkbox"/> Director/Head _____ Date _____
v. UGA/GA	<input type="checkbox"/> Chair/Director _____ Date _____
vi. RA	<input type="checkbox"/> Chair/Director _____ Date _____

For Office Use Only:

Library ID #

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Date _____

_____ Librarian