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APPLICATION FOR CANCELLATION OF MEMBERSHIP AND NO DUES CERTIFICATE

Category (Put \checkmark) UG , Integrated PG , PG , M.Phil. , Ph.D. , PDF , Teachers ,
Non- Teaching Staff , Graduate Membership , No Membership

Name :

Membership No. (If Any) :

For Teachers

Designation :

P.F. No. (for University Dept. Teachers) :

Department / School/ College :

For Students, Research Scholars and PDF

Course & Subject :

Department / Institutional Address :

For Non- Teaching Staff

Designation & P.F. No. :

Place :

Signature :

Date :

RECOMMENDATION

(For University Department Teachers/ Students/ Research Scholars/ PDF)

Certified that Mr./Ms./Mrs./Dr.in the Department/ School
ofhas cleared all dues in the Department/
School Library and there is No Objection for issuing No Dues Certificate from the University Library.

Name & Signature of the Dept. Librarian with Date

(Office Seal)

NDC Received :

Signature of the Applicant with date