

**DHAKA UNIVERSITY LIBRARY**  
**FACULTY MEMBER BORROWER'S INFORMATION FORM**  
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EMPLOYEE ID----- JOINING DATE-----

DESIGNATION-----

DEPARTMENT/INSTITUTION/AFFILIATION-----

LIBRARY CARD NO.-----

TITLE-----FIRST NAME-----MIDDLE NAME-----LAST NAME-----

DATE OF BIRTH-----DATE OF RETIREMENT----- BLOOD GROUP-----

E-MAIL-----  
(Required valid e-mail address)

**MAILING ADDRESS**

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VILLAGE/ROAD-----POST OFFICE-----

UPAZILA/THANA-----DISTRICT-----COUNTRY-----

POST CODE-----LAND PHONE-----CELL PHONE-----

FAX NO-----WEB URL-----

**PERMANENT ADDRESS**

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VILLAGE/ROAD-----POST OFFICE-----

UPAZILA/THANA-----DISTRICT-----COUNTRY-----

POST CODE-----LAND PHONE-----CELL PHONE-----

FAX NO-----WEB URL-----

Signature -----→  
(Please Use Black Signature Pen)