LIBRARY FORM (GDC DODA 2017-18)

CLASS …… **CLASS ROLL NO……..**

Name													**PHOTOGRAPH**			
Father's Name																
Mother's Name																
Sex					**Contact No.**											

Address

(i)	**Correspondence:**
(ii)	**Permanent:**

Subjects Combination in which Admission is Sort :

Subject Name						

S. No.	TITLE	ACC.NO.	DATE OF ISSUE	SIGNATURE OF STUDENT	DATE OF RETURN	SIG. OF LIB. ASSTT.	FINE IF ANY