



Raipur Institute of Medical Sciences
Bhansoj Road Off NH-6, Vill. - Godhi
Raipur (Chhattisgarh)

PHOTO

Library Membership Form

Nursing Staff

First Name : _____

Last Name : _____

Permanent Address : _____

Designation & Department : _____

Date of Birth : _____

Hosteler

Day Scholar

Telephone No. : _____ Mobile No.: _____

E-Mail : _____

Member's Sign.

& Date

Librarian's Sign.

& Date