CENTRAL LIBRARY:: KITS, WARANGAL – 506 015
REQUEST FOR INDENTITY CARD
(NEW / DUPLICATE)

Photo

For Student:

Name :_____

(Capital Letters)

Roll No. :_____

Blood Group :_____

Class :_____**Branch**_____

Challan No. :_____ **Date**_____**Amount:**_____

Mobile No :_____

Address :_____

Sign. of the Candidate **Dean Academic** **LIBRARIAN**

CENTRAL LIBRARY:: KITS, WARANGAL – 506 015

REQUEST FOR INDENTITY CARD

(NEW / DUPLICATE)

Photo

FOR STAFF:

Name :————————————————————————————

(Capital Letters)

Staff ID No. :————————————————————————————

Blood Group :————————————————————————————

Designation :————————————**Department:**————————————

Mobile No :————————————————————————————

Address :————————————————————————————

Sign. of the Staff **Administrative Officer** **LIBRARIAN**

CENTRAL LIBRARY:: KITS, WARANGAL – 506 015
REQUEST FOR INDENTITY CARD
(NEW / DUPLICATE)

Photo

FOR FACULTY :

Name :_____
(Capital Letters)

Staff ID No. :_____

Blood Group :_____

Designation :_____**Department:**_____

Mobile No :_____

Address :_____

Sign. of the Faculty **Registrar** **LIBRARIAN**