

CENTRAL LIBRARY

INTER LIBRARY LOAN DOCUMENT DELIVERY REQUEST APPLICATION

Name							
Roll No./Staff ID No.							
Year/Branch/Designation							
Purpose/Research Topic							
Phone No.							
E-mail ID							
			1				
Sl.No.	Title of Book/Journal		Author		Edition/ Year of Publication	Journal Vol./No./Page.	
1							
2							
3							
4							
5							
FOR OFFIECE USE ONLY							
Request			Received			ILL Charge	
Ref. No. Date of Supply			Date Staff/Student			Receipt No.	
Remarks			Asst. Librarian			Librarian	