



MORARJI DESAI NATIONAL INSTITUTE OF YOGA

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BOOK BANK FORM

ACADEMIC SESSION

COURSE

SEMESTER

Date

Name (Mr. / Ms.) : _____

Enrollment No. : _____

I wish to borrow the following books from the Book Bank of MDNIY's Library:

S. No.	Name of the Book	Author	Medium
1			
2			
3			
4			
5			

Signature of the Student

.....Undertaking.....

Total Annual Income _____ (enclosed Income Certificate)

I agree to handle the borrowed books with utmost care and return them intact within five working days of the completion of my semester examination. I shall also abide by the rules of the Institute's Library.

Signature of the Student

Recommended by:
Course Co-ordinator