

FORM 4

RABINDRA-BHAVANA, VISVA-BHARATI

For obtaining archival/library material for office use

(Documents are provided free of any charges only for official use)

Name of applicant in block letters:

Designation:

Department:

Purpose:

Email Id:

Mobile No.:

I undertake to comply with the rules and regulations of the archives and library of Rabindra-Bhavana which have been explained to me.

Signature of applicant:

Date:

.....

Copy of document received: Letter from Director / Principal / HoD / In-Charge / Other:

Application processed by:.....Date:.....

Application processed by:.....Date:.....

Special Officer: RB Professor in charge (Archives).....

Director: RBRegistrar: VB.....

Application approved/ rejected by: Vice-Chancellor: VB

Documents/ archival materials received by:

Signature:

Date: