



## KERALA UNIVERSITY LIBRARY

### Application for the Remote Access of E-resources

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Name :

Permanent Address :

Membership Number :

Membership Category:  Research Scholar  Public Graduate  Student  
 Teacher  staff

Mobile Phone Number :

Email :

Department / Institution :

Signature :

Place:

University Librarian i/c

Date:

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#### Office Use

Access given on :

Expiry :

UID Number :

Type :  INFED