

LIBRARY – THE OPEN UNIVERSITY OF SRI LANKA
APPLICATION FOR STAFF REGISTRATION

01. Name in Full (Rev./Prof./Dr/Mr./Miss/Mrs.): E-mail:
02. Tel: (L) (M)

03. Permanent Address:

04. Designation:

05. Department:

06. Date of Birth: NIC No:

07. Employee No:

Date Signature of the applicant

*Please attach a copy of your appointment letter.

RECOMMENDATION OF THE HEAD OF THE DEPARTMENT

I certify that Rev./Prof./Dr/Mr./Mrs./Miss is a/an
..... of Department.

I recommended him/her for library facilities.
.....

Date Signature of Head of Department with official seal

I received the library card on Signature of the applicant:

Office Use: Member No: