



STATE BANK LIBRARY MEMBERSHIP FORM

(For State Bank Employees / Retired Employees)

Name: _____

Father's Name: _____

PIN: _____ Index No: _____

Library Card No (if issued earlier): _____

Designation: _____ Grade: _____

CNIC No: _____

Employee Category:

In Service Retired

Date of Appointment: _____

Date of Retirement: _____

Posting Office: _____

Department: _____

Present Home Address: _____

Permanent Home Address: _____

Phone (Office): _____ (Res): _____ (Mobile): _____

E-mail Address: _____

Date: _____

Applicant's Signature

FOR IN SERVICE EMPLOYEES

(To be verified and forwarded by the concerned Department)

Name (forwarding officer): _____ PIN: _____

Designation: _____ Grade: _____

Department: _____

Phone (Off): _____ (Res): _____ (Mobile): _____

E-mail Address: _____

Date: _____

Office Seal & Signature

FOR RETIRED EMPLOYEES

(To be verified by an in-service SBP/SBP-BSC employee having at least three years of confirmed service in the Bank)

Under-Taking by the Surety/Guarantor

I, agree to stand surety for Mr/Miss/Mrs _____
S/D/W/O _____, a retired employee of the State Bank of Pakistan, and undertake to pay the Bank the amount on account of loss of borrower's card, library fine on late return of book(s), and replacement cost of the lost or damaged book(s) upon the borrower's failure to pay the same and hereby authorize the Bank to recover such amount from my salary/provident Fund Balance or any other asset(s) lying with bank.

Surety/ Guarantor Information

Name: _____ Designation: _____

Department / Posting Office: _____ Grade: _____

PIN: _____ Index No: _____ Date of Retirement: _____

Phone (Office): _____ (Res): _____ (Mobile): _____

E-mail Address: _____

Date: _____

Office Seal & Signature

FOR OFFICE USE ONLY

Please check and issue the Borrower's Card to the applicant.

Chief Librarian

Unit Head

Card No: _____ Issue Date: _____

Borrowing Limit: _____ Valid Up to: _____

Assistant Librarian