



BENGAL LIBRARY ASSOCIATION
P-134, C.I.T. Scheme 52
Kolkata-700 014

[Please Fill up the Form and send it by-post/hand to the Association Office within 10th February, 2025]

ABSTRACT INFORMATION

SC	ST	PH
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(Please tick on the box)

Arts	Commerce	Science
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(Please tick on the box)

Name.....

FORM NO. INT/_____

(For Office use only)

Address.....

Whether deputed

.....

Yes	No
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Contact No.....

E-mail id.....

Name of the School/College with District *

Marks obtained

1) SF/MP.....

Examination	Grand Total	Total Marks Obtained	Percentage	Average %
SF or equivalent				
HS or equivalent				

*District:

2) HS.....

.....

*District:

* District means the district from where he/she passed the SF/HS Examination

Last date of submission of form
10th February, 2025

Price Rs. 100.00
Form No. INT/

District

BENGAL LIBRARY ASSOCIATION

General Office : P-134, C.I.T. Scheme 52, Entally, Padmapukur, Kolkata – 700 014
(1.00 p.m. to 8.00 p.m.) Phone : 8276032102
Website : <http://www.blacal.org>

For office use only

Selected /Waiting List

Roll No.

Sec.

Secretary

**Library Science
Training Sub-Committee**



**CERTIFICATE IN
LIBRARY SCIENCE COURSE**

APPLICATION FORM

**PLEASE PASTE
HERE SELF-
ATTESTED COPY
OF RECENT
PHOTOGRAPH**

**The Director
Certificate Course in Library Science
Bengal Library Association**

Sir,

I beg to apply for admission to the next ~~Week-end~~ Summer Session, 2025 of the Certificate Course in Library Science. I submit the following particulars along with certified relevant documents in support of my application.

Yours faithfully

Date:

Signature in full:

1. Name (in block letters):
2. Date of Birth: District of Domicile:
3. Father's/Husband's Name:
4. a) Permanent Address:
.....
- b) Correspondence Address:
- c) Contact No.:
- d) E-mail id:
5. Present position:

FOR DEPUTED CANDIDATE ONLY

- a) Name of the Institute/Organisation:
- b) Designation:
- c) Working as full-time library staff since: Pay Scale:
(Self-attested copy of the appointment letter along with salary statement and duty hours should be furnished)
- d) Whether facilities to attend the classes will be available:
(No objection Certificate should be furnished along with this application)

Certified that the above statements are true and correct. I depute the candidate for Certificate Course in Library Science conducted by the Bengal Library Association.

Office Seal:

Signature of the Head of
the Institution

BENGAL LIBRARY ASSOCIATION P-134, C.I.T. Scheme 52, Entally, Padmapukur, Kolkata – 700 014
NAME..... (To be filled in by the candidate in block letters)
FORM NO.: INT/
Received the Application Form for the Certificate Course in Library Science for the Week-End/ Summer Session of 2025. <div style="text-align: right;">For General Secretary</div>

- Do not tear off the slip from the Application Form
- Fill up the Application Form correctly

6. Whether belongs to the Scheduled Caste/Scheduled Tribe:
(If yes, please attach a certificate from the appropriate authority)

Yes	No
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7. Whether the candidate is permanently disabled?
(If yes, please attach a certificate from the appropriate authority)

Yes	No
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8. Academic qualifications (Self attested copies of mark sheets of all public examinations should be attached):

Board/Council/ University	School/College /University	Exam Roll No.	Year	Examination Passed	Divn./ Class	Subjects	Grand Total	Total Marks obtained	Percentage

9. Payment Details:

a) Mode of Payment [Amount: Rs.100/-] (Please Tick on the following):

Google Pay/PhonePe/IMPS or RTGS/Bank Transfer/Demand Draft

b) Transaction No./Draft No. and Name of the Bank:

c) Date of Transaction:

[N.B.: Payment should be made:

1) through Google Pay/PhonePe to the following number: 8961910437 (Indrashis Dey)

[Please attach screenshot of payment along with the form]

2) through IMPS/RTGS Mode in favour of Bengal Library Association, payable at Indian Bank, Branch: Kolkata Entally, Branch Address: P22, C.I.T. Road, Entally, Kolkata-700014, IFSC: IDIB000K751, Account No. 20488295691, MICR Code: 700019076 **[Please attach screenshot of payment along with the form]**

3) through Demand Draft in favour of Bengal Library Association, payable at Kolkata]

Date:

.....
Full signature of the Candidate