

DAYANANDA SAGAR UNIVERSITY
LIBRARY AND INFORMATION CENTRE
SCHOOL OF ENGINEERING
HAROHALLI – 562112

Date:

To,
The Chief Librarian
Dayananda Sagar University
Harohalli – 562112.

Sir,

Sub: Replacement of Library book.

I _____ Student/ Faculty member of Dayananda Sagar University studying/ Working in the Dept. of _____ and my USN/ Biometric No. is _____. Now I am replacing the book which was borrowed from library and lost.

BOOK DETAILS:-

Accession No. : _____

Author : _____

Title : _____

Yours faithfully

(Signature of the user)