

**Learning Resource Centre
Jaypee Institute of Information Technology Noida**



BOOK RECOMMENDATION FORM

Name:

Employee ID & Department:

Field of Interest:

S No	ISBN	Title	Author/Editor	Publisher	Price	Existing copies	Req. copies
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Signature:

Date:

Approved by:

➤ Head of Department

➤ Vice Chancellor

OFFICE USE – LRC

Signature:

LRC Staff Name:

Received on Date: