



INFLIBNET CENTRE

NLIST APPLICATION FORM
<http://nlist.inflibnet.ac.in>

I. GENERAL INFORMATION

1. Name of the College: _____

2. Name of Principal: _____

3. Complete Address: _____

3.1. Telephone (L): _____ Phone : (M) _____

3.2. E-Mail: _____

3.3. Fax: _____ 3.4. Web Site _____

4. University Affiliated to _____

5. Does Your College Comes Under Section 2F / 12B: Yes / No

6. No. of Depts. and No. of Faculty in each Department / Centre (Attach Sheet)

7. Courses offered and annual intake of students (Branch wise for example History (60), Pol. Science (60), etc., (Attach separate, if required)

Undergraduate Level: _____

Integrated Degree Level: _____

Postgraduate Level: _____ M.Phil. Level: _____

Any Other _____

8. No. of Ph.D. awarded Every Year _____

9. NAAC approval number, date and validity period: _____

10. NAAC accreditation: (A+) (A) _____

II. INTRANET AND INTERNET INFRASTRUCTURE

1. Does your college have a Campus LAN ? Yes / No

2. Speed of Campus LAN: How spread out is your Campus LAN ? (Please ✓)

1.1 Restrict to Computer Centre.

1.2 Restrict to Computer Centre and Library.

1.3 Limited Number of connections in Departments / Centers / Labs./Units

1.4 All Departments / Centers / Labs./ Units are well connected

1.5 Besides Institutes, the LAN reaches out to hostels and residences also.

3. Whether your library is part of your Campus Network ? Yes / No

4. Is your Campus Network/Library Network connected in INTERNET? Yes / No

5. Internet connection

Speed: _____

Type of Internet connection (please ✓)

5.1. Dial-up

5.2. Leased Line

5.3. V-SAT

5.4. Radio Link

5.5. DSL

5.6. Any other

Is the Internet Connectivity on Static IP Address, if Yes, Mentioned IP Address:

(We prefer Static IP for our service) : Please refer to Annexure I to know more about IP address.

IP Address: _____

Name of Internet Service Provider _____

6. Number of PCs having Internet connection:

6.1 In the Library: _____

6.2 In the Computer centre: _____

6.3 Total number of Internet-enabled PCs in the institution: _____

7. Does you Institute have a Website ? Yes / No

III Library Automation

1. Is your Library Using an Integrated Library Software for its Computerization ? Yes /No

2. If the answer to Question 1 above is Yes, which is the Library Software used ?

3. Whether the Library Software is a Network version? Yes / No

4. Whether the Library Software has online help for Users? Yes / No

5. Level of Library computerization (please ✓)

Acquisition Cataloguing OPAC Serials

Circulation Stock Verification Article indexing Any Other (Specify)

6. Whether your library has introduced barcode technology? Yes / No

7. If yes, mention the functions activated using barcode technology (please ✓)

Annual Stock Verification Circulation Any other

8. Do you use any other technology like RFID, smart card, magnetic strips (theft detection, etc) _____

9. Contact Address for Obtaining Further Details

Administrative Contact:

Name:

Address:

E-Mail:

Tele:

Fax:

Technical Contact:

Name:

Address:

E-Mail:

Tele:

Fax:

(Signature of Head of Institution)

Name:

Date:

Application Form, duly filled-in, may please be sent to:

Dr. Jagdish Arora

Director, INFLIBNET Centre, (An IUC of UGC)

Post Box No. 4, Infocity Gandhinagar

, Gujarat - 382007

Tel: +91 79 23268201

Fax: +91 79 23261111

E-mail: jarora@inflibnet.ac.in; director@inflibnet.ac.in
