

Alumni Registration Form

Dear All,

Greetings from the Training & Placement Department.

*** Required**

1. Full Name (First Name/Middle Name /Last Name) *

2. Email ID *

3. Mobile Number *

4. Alternate Number *

5. Permanent Address *

6. Career Options Chosen after B.E (Higher Entrepreneurship/Job)

Mark only one oval.

Higher Education

Entrepreneurship

JOB

Other: _____

7. Job - Placed in Company *

8. Job -Current Working Company *

9. Higher Studies MBA/ME/MTECH/MS *

Mark only one oval.

MBA

ME

M.Tech

MS

Other: _____

10. Mention name of Competitive Exam given (Gate/CAT/MAT/GRE/TOFFEL/Any other)

*

Mark only one oval.

GATE

CAT

GRE

TOFFEL

Other: _____

11. Date / YEAR of Appeared for Competitive Exam Appeared

12. Date of admission (year on admit card)

Example: January 7, 2019

13. Entrepreneurship Name of Startup

14. Year of Registration (if any)

15. Date of birth *

Example: January 7, 2019

16. Gender *

Mark only one oval.

Female

Male

17. 12th percentage *

18. 10th percentage *

19. Degree percentage *

20. PG percentage

21. Branch *

Mark only one oval.

CSE

ETC/EC/EXTC/EN

EE

ME

MBA

M.Tech

22. Year *

Mark only one oval.

2021

2020

2019

2018

2017

2016

2015

This content is neither created nor endorsed by Google.

Google Forms