

OLD STUDENT ASSOCIATION



THAKUR SEN NEGI GOVT COLLEGE RECKONGPEO, DISTT. KINNAUR H.P

ALUMNI REGISTRATION FORM

Name of the Alumni:.....

Father's Name :.....

Mother's Name

Enrollment No.:.....Batch:.....

Programme Studied – **B.A/B.Sc./B.Com./BCA/PGDCA**

Date of Birth :.....

Year of Passing from the college.....

Permanent Address:.....

.....

Contact Details :-

Mobile No.(Self).....E-Mail ID.....

Mobile No.(Father/Mother).....

Enroll me as a members of Old student Association of this college

Date :-

Place :-

Signature of the Alumni

