



PERIYAR UNIVERSITY ALUMNI ASSOCIATION

PERIYAR UNIVERSITY

SALEM-636011, TAMILNADU, INDIA.

Alumni Registration / Updating form

PHOTO

Alumni Roll No:		Office Use only	
University Reg No:			
PERSONAL DETAILS			
1	NAME	:	
2	NAME OF THE FATHER / GUARDIAN /HU	:	
3	DATE OF BIRTH AND AGE	:	
4	SEX	:	Male <input type="checkbox"/> Female <input type="checkbox"/>
5	YEAR OF STUDY	:	FROM TO
6	COURSE / BRANCH	:	
7	ADDRESS DETAILS		
	PRESENT ADDRESS		PERMANENT ADDRESS
	Pin		Pin
	Phone		Phone
	Email		Mobile:
8	HAVE YOU APPEARED FOR ANY COMPETITIVE EXAMINATION Yes <input type="checkbox"/> No <input type="checkbox"/>		
9	QUALIFICATIONS ACQUIRED AFTER LEAVING PERIYAR UNIVERSITY.		
	Course	Name of the department	Year of passing % of marks

10	EMPLOYMENT DETAILS							
	Have you got placement through	On Campus	<input type="checkbox"/>	Off Campus	<input type="checkbox"/>	Others	<input type="checkbox"/>	To be employed <input type="checkbox"/>
	S.No	Designation and Company Address					Remarks	
11	ENTREPRENEUR DETAILS							
	Have you become an Entrepreneur,			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
	Name and Address of the Organization		Nature of work /Product		Annual turn over	No. of employees working		
12	MARITAL STATUS							
	MARRIED ON	SPOUSE NAME & QUALIFICATION				CHILDREN		
	SINGLE							
13	EXTRA CURRICULAR ACTIVITIES							
14	ANY OTHER RELEVANT INFORMATION							
15	PLEASE FURNISH FEW ALUMNI DETAILS THAT YOU KNOW							
	Name	Degree	Batch	E-Mail		Phone / Mobil No.		

Date:

SIGNATURE OF THE ALUMNI