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| D:\logo\LOGO.jpeg | | **Vallal P.T.Lee CHENGALVARAYA NAICKER**  **ARTS & SCIENCE COLLEGE**  (Affiliated to University of Madras)  No.5/1, General Collins Road, Choolai, Chennai- 600 112.  (Vepery CNT Campus) | |  | |
| Form Serial No. Form No. IQAC/8  **ALUMNI INFORMATION FORM**  **Academic Year:**  **Date: /\_ /20** | | | | | |
| **S.**  **No.** | **Particulars** | | **Details** | |  |
| 1 | Full Name of Ex-Student: | |  | |
| 2 | Year of Passing (B.E/M.E.): | |  | |
| 3 | Mobile/Phone Number: | |  | |
| 4 | Whats-app Number: | |  | |
| 5 | Email ID: | |  | |
| 6 | Permanent Address: | |  | |
| 7 | Have you qualified GATE/GRE/TOEFL/IELTS? | | Yes/No | |
| Qualified Exam: | |
| 8 | Pursuing any higher Education  (If yes please mention the name of degree) | | Yes/No | |
| Higher Education Degree: | |
| 9 | Have you qualified any competitive exam? (If yes please mention the name of degree) | | Yes/No | |
| Qualified Competitive Exam: | |
| 10 | Are you doing any Business? | | Yes/No | |
| Nature of Business: Manufacturing/ Service | |
| 11 | Are you doing any Job?  If yes, name of the Current Company:- Company Location/ City:-  Current Designation:-  Total Work Experience in years:- | | Yes / No | |
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| 17 | Feedback About Institute | |  | |

Signature