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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