



OmDayal Group of Institutions
ENGINEERING & ARCHITECTURE COLLEGE

Alumni Registration Form

Dear Student,

You are going to become alumnus of OmDayal Group of Institutions. We would like to be in touch with you as you move on to career. Please fill in the form to help us update our database.

Thank you,

Coordinator

Alumni Coordination Cell

1. NAME (IN BLOCK LETTERS):

2. Permanent address:

.....
.....
.....
.....

PIN.....

State.....

Contact Number.....

Email ID:.....

3(a) Service:

(i) Designation

(ii) Address

(iii) Special contribution

(b) Self-employed / Entrepreneur

(i) Nature of business

(ii) Name of farm/institute/business house

(iii) Address

©Higher Education:

(i) Course Name

(ii) University/Institute

(d) Others, if any

4. Your period of Stay in OMDAYALGROUP OF INSTITUTIONS:

Year of Joining..... Year of Graduation.....

5. Course of study: (Please Tick) B.TECH-CE / ME / / , B.ARCH

6. Your last visit to your college was in the year.....

Signature of the alumnus

Place:

Date: