

MARCHING
TOWARDS 25
GLORIOUS
YEARS
1991-2016

SILVER JUBILEE CELEBRATION

SAHEED ANURUP CHANDRA MAHAVIDYALAYA



16TH November, 2015 - 15TH November, 2016

ALUMNI REGISTRATION FORM (free of cost)

NAME _____

CONTACT NUMBER _____

ADDRESS _____

PIN CODE _____

YEAR OF OBTAINING GRADUATE DEGREE FROM OUR COLLEGE _____

NAME OF THE COURSE _____ (i.e. BA, BSC, BCOM, GENERAL/HONOURS)

NAME OF THE HONOURS SUBJECT _____

WHETHER ADMITTED FOR POST-GRADUATION COURSE _____ (i.e. MA, MCOM, MSC)

YEAR OF OBTAINING POST-GRADUATE DEGREE _____

PRESENT OCCUPATION _____ (i.e. employment, business, profession etc.)

Signature _____ Date _____