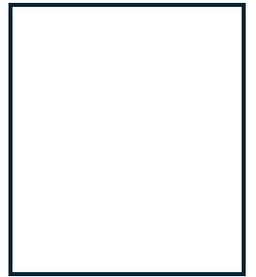


**Alumni Form Deogiri College, (Autonomous)
Chhatrapati Sambhajnagar.**



1) Name of the student: - _____

2) Educational Qualification: _____

3) Class and Year of passing (From Deogiri College) _____

4) Your current job position: _____

5) Contact Number: _____

6) E-mail: _____

7) Your Current designation and Working Organization/Company.

8) Are you willing to guide students in college activities/events?

Yes

No

9) Would you like to share this form to your batchmates?

Yes

No

10) If yes, please mention name and contact no. of Batchmate

11) Your Stream-

Science

Arts

Commerce

MCVC

12) Home Address - _____

13) WhatsApp contact no. - _____

14) Alternate Contact no. - _____