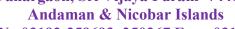
DBRAIT ALUMNI

DR.B.R.AMBEDKAR INSTITUTE OF TECHNOLOGY Pahargaon, Sri Vijaya Puram- 744103







POLY ALLUMNI MEMBERSHIP

1.	Name	:	
2.	S/o, D/o, W/o	:	
3.	Age & Date of Birth	: DOB	
4.	Sex	: 🗀 🗀	
5.	Blood Group	; M	
6.	Discipline	:	
7.	Year of Passing	:	
8.	Occupation	:	
9.	Date of Joining Job	: Date Year	
10.	Address for Communication	:	
11.	Permanent Address	:	
12.	Contact No.		
	Off. :		
	Res. :		
13.	E-mail ID :		
		<u>DECLARATION</u>	
	ī	S/o,D/o,W/o	
	Declare that I sl	nall abide by the rules and regulations of the Alumni	
from tin	me to time.		
Date.			Signature
For Off	fice use only		
registrat		(Rupeesdt.	only) as
			G: 4

Signature

Note: Membership Registration fees Rs. 100/-