ALUMNI MEET - 2020

REGISTRATION FORM

I Wish to Participate in Alumni Meet 2020 to be held on Sunday, 05th January 2020

| Name: - | |
|--|--|
| Degree/Course Passed: - | |
| Year of Passing: - | |
| Email Address: - | |
| Mobile No. (Whatsapp):- | |
| Present Organization With Address: - | |
| Designation: - | |
| Employment Type: - | Private / Govt. / Semi Govt. / Self Business/ Other |
| | |
| | |
| Date: - | Signature |
| Note: - 1. Registration form of | can be filled and email scanned copy to bualumnimeet@gmail.com |
| 2. Registration form will be posted to Er. Vinay Patel, Coordinator, Alumni Meet- 2020, Bhagwant University, Sikar Road, Ajmer, Rajasthan-305004 | |