Government College Aharwala (Bilaspur)

Alumni Information

Registration No.:

(To be filled by the office)

| Name of the Alumna /Alumnus: | |
|-------------------------------------|--|
| Last Exam Passed from this College: | |
| Academic Session: | |
| College Roll No.: | |
| Present Qualification: | |
| Present Profession: | |
| Office Address: | |
| Home Address: | |
| Father's Name: | |
| Father's Occupation: | |
| Mother's Name: | |
| Mother's Occupation: | |
| Date of Birth: | |
| Category (Gen/SC/BC/Others): | |
| Mobile Number(s) : | |
| E-Mail Id: | |

(Signature of the Alumna /Alumnus)

Note:- An alumni should fill this proforma, sign it, scan it and email to gcbilaspurinformation@gmail.com