

RYA College of Pharmacy

(Affiliated to RUHS, Jaipur • Approved by PCI, AICTE, New Delhi)

• S.P.- 40, Kukas Industrial Area (RIICO) Jaipur - 302028

· Website: www.aryapharmacyjpr.com

• Ph.: 0141-5148801, 5148802, 5148803

• Fax: 01426-510040

ALUMNI DETAILS FORM

Alumni Name							
Father's Name							
Date of Birth			Contect no.				
Batch		Branch					
Permanent Address							
Email ID							
Present Organization							
Position			Present Location	on			
Package							
Current Working Status (Tick whichever applicable)							
O Business	O Gover	nment Job	O Private Sector		○ Entrepreneur		
O Pursuing higher education	_	certificate ourse	○ Unemployed		O Preparing for Govt job		
Remark About Current Status					-		
Connected with Arya College Facebook Page					YES/NO		
	Fee	dback and Remar	k About College				
Date: Signature: FOR TRAINING AND PLACEMENT OFFICE USE ONLY							
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O Mark sheet/Provision	onal	○ Deg	roo		Caution Money		

ALUMNI ASSOCIATION

Arya College of Pharmacy, Jaipur

REGISTRATION FORM

Name	:					
Father's Name	·					
Date of Birth	:					
Address	:					
Course:		Branch:				
Passing out Year:.		Email:				
Contact Details: 1)	2)				
PRESENT EMPLOYMENT DETAILS:						
Organizatio	n Name	Address	Designation			
Any Suggestions fo	or college:					
my suggestions for conege.						
Your Achievemen	ts which we can sh	are with your juniors:				
How would you like carry forward your association with Arya family:						
Place:		Date:	Signature			