

## Shri Balasaheb Mane Shikshan Prasarak Mandal, Ambap Ashokrao Mane Institute of Diploma In Pharmacy, Peth-Vadgaon



Al	LUMNI REGISTRATION FO	RM
Name:		Photograph
Qualification:  Residential Address:	Admission Year:	Pass out Year: Date of Birth:
Current Designation: Job Location Address:	Employer:	Experience:
Email Id:		Mobile Number:
Marital Status:	Accompanying Persons	
College Achievements:	<b>'</b>	
Achievements (Professional/ Social & Personal):		
Entertainment Programme Entry details:		