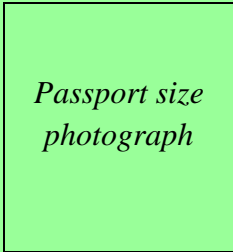




# **RKDF UNIVERSITY, RANCHI**

## **ALUMNI REGISTRATION FORM**



Name of the Alumni.....

Enrollment No: ..... Session..... Branch.....

Date of Birth.....

Present Designation & Full Address of the Organization:

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.....  
.....  
.....

Contact Mailing Address (Residence):

.....  
.....  
.....  
.....

E-mail Personal: ..... E-mail Official.....

Mobile..... Whatsapp No: .....

*Date and Place*

*Signature of the Alumni*