Alumni Contact Form

Full Name:			
Years in College (from yyyy to yyyy): Department/Subject During Your Time at JRC: Contact Number (Mobile/WhatsApp):			
		Email ID:	
			ect During Your Time at JRC: (Mobile/WhatsApp): Postal Address: Education After Passing Out From JRC:
Details of Higher Education After Passing Out From JRC:			
Present Status (Tick mark):	2.1		
'	_		
Any additional remarks sugge	estions atc:		
Any additional remarks, suggi			

Date: Signature