

SRI VENKATESWARA INSTITUTE OF TECHNOLOGY
ALUMNI ASSOCIATION
(SVITAA)

(Society Registration No: 153 of 2024)

ALUMNI MEMBERSHIP APPLICATION FORM

Roll Number : _____
Name : _____
Father Name : _____
Mather Name : _____
Date of Birth : _____
Year of Graduation : _____
Course : M.Tech/ B.Tech
Branch : _____
Specialization (M.E. / M.Tech): _____
Contact Address :

Present Address	Permanent Address
Phone No:	Phone No:
Mail Id:	

Career Profile :

I have worked with the following organizations:

Name of Organization & Address	Year	Job/Designation

Membership Fees : Free

Applicant Signature

FOR OFFICIAL RECORD

Verification by (Administrative Officer / Date)

Approved by (Secretary / Date)