



VIDYAVARDHAKASANGHA®
VIDYAVARDHAKA LAW COLLEGE
SHESHADRI IYER ROAD, MYSURU- 1

ALUMNI REGISTRATION FORM

*Paste Passport Size
Photo here*

Name of the Alumni:

Batch:

Date of Birth:

Present Designation & full address of the organisation/firm:

Present Residential Address:

Email (Personal):

Email (official):

Mobile No:

Date:

Signature of the Alumni

Place