

**ALUMNI ASSOCIATION
ATRIA INSTITUTE OF TECHNOLOGY
ASKB CAMPUS
MEMBER REGISTRATION FORM**

NOTE : FILL IN BOLD CAPITAL LETTERS WITH BLACK BALL POINT PEN.

| | | | | |
|--|--|--------------------|-------------------------------------|--|
| NAME: | FIRST | MIDDLE | LAST | |
| ADDRESS: | FLAT NO/BUILDING NO/NAME: | | | |
| | STREET NAME/STREET NO: | | | |
| | AREA NAME: | | | |
| | CITY: POST OFFICE: STATE: | | | |
| | PIN CODE: | | | |
| MAIL ID: | | | | |
| PHONE NO: | LANDLINE: | | | |
| | MOBILE: | | | |
| YEAR OF PASSING: | | | | |
| SPECIALIZATION: | | | | |
| PRESENT EMPLOYMENT DETAILS | ORGANIZATION NAME | DESIGNATION | OFFICE ADDRESS | |
| | | | | |
| NOTE : TICK YOUR PREFERENCES (√) | | | | |
| HOW WOULD YOU LIKE TO CONTRIBUTE TO ATRIA | | | | |
| GIVE BACK YOUR TIME: | JUDGE FOR TECHNICAL AND NON TECHNICAL EVENTS | | | |
| | VOLUNTEER FOR LOCAL OR REGIONAL EVENTS LIKE NSS, NATURE CLUB | | | |
| | OTHERS IF ANY | | | |
| GIVE BACK YOUR TALENT: | INNOVATION LAB(ABIC) | | | |
| | OPEN LECTURE | | | |
| | GUEST SPEAKER | | | |
| | OTHERS IF ANY | | | |
| GIVE BACK YOUR TREASURE: | ENDOWED SCHOLARSHIPS | | | |
| | DONATION FOR EVENTS | | | |
| | CLASS PROJECT OPPORTUNITIES | | | |
| | ALUMNI MENTOR[CAREER GUIDANCE/PROJECT GUIDANCE] | | | |
| | HELPING STUDENTS TO GET INTERNSHIPS/PLACEMENTS/PROJECT GUIDANCE | | | |
| | HELPING TO ARRANGE INDUSTRIAL VISITS | | | |
| | OTHERS IF ANY | | | |
| SPECIAL ACHIEVEMENTS | | | | |
| ANY OTHER DETAILS | | | | |
| PLACE | DATE | | SIGNATURE | |
| | | | | |
| RECEIVED DATE: | | | ALUMNI COORDINATOR SIGNATURE | |