

K.S.RANGASAMY COLLEGE OF TECHNOLOGY, TIRUCHENGODE 637 215

TWELTH CONVOCATION FUNCTION

13.03.2010, Saturday, 3.00 PM

REGISTRATION FORM

1.	Name	
2.	Registration Number	
3.	Year of Study	
4.	Course / Branch	
5.	E-mail ID	
6.	Contact Number	
7.	Present Position	Employed/ Higher Education / Entrepreneur /Yet to be Employed
8.	Employment Details (if employed) Designation & Company Address	
9.	Entrepreneur Détails (if an Entrepreneur) Name & Address of the organization	
10.	Higher Education Details (if studying) Course & Name of the College / Institution	
11.	Are you participating in the Convocation	Yes / No
12.	Lunch	Veg / Non Veg
13.	Number of persons accompanied	
14.	Any Other relevant information	

Place :

Date :

SIGNATURE

Kindly send the filled Registration form to the **Secretary, Alumni Cell, K.S.Rangasamy College of Technology, Tiruchengode – 637 215.** (or) send the same details through mail to **almaksrct@gmail.com**