

COETA'S ALUMNI ASSOCIATION
Registration Form

*Name: _____

*Gender: Male _____ Female _____

*Date of Birth: _____

Branch: _____

*Batch(Year of Passing): _____

*Occupation: _____

Highest Qualification: _____

*Marital Status: _____

*Present Residential
Address: _____

*Presently working in: _____

Permanent Address: _____

Telephone No.: _____

*Email: _____

General Information/Feedback: _____

*** Fields are mandatory**

Signature with date

Completed Registration form with Registration fees to be sent:

To,
Prof. S. J. Morey,
Alumni Co-ordinator,
College of Engineering & Technology,
N.H. No. 6, Babhulgaon (Jh.)
Akola-444104.
Contact: raghu_morey@yahoo.com
Cell No. +919960590250