GOKHALE MEMORIAL GIRLS’ COLLEGE
ALUMNI ASSOCIATION
1/1, HARISH MUKHERJEE ROAD, KOLKATA - 700 020

PERSONAL DATA SHEET

Member Type:
a) Life Member
b) Ordinary Member
c) Associate Member
d) Teacher Member

Gender: Male/Female

1. Name:

2. Date of Birth:

3. Present Address:

4. Permanent Address:

5. Present Occupation:

6. Office Address:

7. Email Address:

8. Year of Passing:

   Degree Obtained
   Subject BA BSC (Hons/Major/General) Year in College

   From: To:

9. Present Interests:

   Interest Areas:
   9.1.
   9.2.
   9.3.
10. Membership in other Organisations:
   Name of the Organisation and nature of membership:
   10.1
   10.2
   10.3

11. Marital Status: Married Single
12. Name of Spouse
13. Name of Children:
   Name: Age: Sex:
   13.1
   13.2
   13.3
   13.4

14. Qualifications earned after leaving College:
   Degree/Diploma: Institution: Year:
   14.1
   14.2
   14.3

15. Award/honour/membership earned:
   15.1
   15.2
   15.3

16. Special interest areas you would like to be involved in (please tick):
   16.1 Sports
   16.2 Cultural Activities
   16.3 Social Work
   16.4 Academic Advancement
   16.5 Fund Raising
   16.6 Media
(Please elaborate if you feel)

__________________________________________
Signature with date

For Office use Only:
Received by ____________________________
Amount Rs. ____________________________
Receipt No. & Date ______________________
FEEDBACK FORM

Name:
Address:
Year of Passing                              Contact No.
Department:
Degree Obtained
Present Occupation:

1. Your feedback on the department, College infrastructure, campus life.

2. How has the College influenced your Social Outwork?

3. How has the College contributed to your career development?

4. How do you think the Alumni can contribute individually and as part of the Association towards the growth and development of the College.