

Recognized By NCTE, Jaipur & Affiliated to Panjab University, Chandigarh

VPO Karaiwala, Tehsil Gidderbaha, Distt. Sri Muktsar Sahib, State Punjab- 152107 Ph No. 01637-277428, 01637-277007, 9915044295 Fax No. 01637-277428

ALUMNI ASSOCIATION

			nbership Forr		
		IVICII	ibersinp i on		
Please enroll me as a	life/ordi	nary member of t	he Associatio	n	
	•	,			Please affix
Name of the Candida	ate: -				your latest
-		Uni R	Uni Roll No		snap
Father's Name: -					S
Mother's Name: -					
Date of Birth: -					
Permanent Address: -			Corresponde	ence Address: -	
Association with Shr	ee Satya	Sai B.Ed. College			
		Degree	Yeaı	r	
Contact No's	Resi.	(With STD Code):			
	Mobil	le			
E-mail Address (if an	y) :-	1)			
		2)			
Membership Fee: -					
Ordinary Me	mbership	(1 Year) = Rs. 10	0/-		
Life Member	ship	= Rs. 50	0/-	Signa	ture of the Student
	·			_	
Cash/Cheque/Draft No:Dated:					
Amount:Drawn On:					
In Favor of Principal,					
•		•			
		FOI	R OFFICE USE		
Form received throug	gh:				
Receipt No:		Book No.		Dated:	
Entered in Roster of	Alumni at	: Number:			