



VAAGDEVI ENGINEERING COLLEGE ALUMNI ASSOCIATION

(VECAA) Registration Form (alumni@vecw.edu.in)

Latest
Photo

1. Personal Details

Name: _____ Gender: M F

DOB: _____ Mobile: _____ Email: _____

2. Academic Details

Branch: _____ Roll No: _____

Year of Passing: _____ CGPA/Percentage: _____

3. Present Status

Employed Higher Studies Entrepreneur Exams Other

Org/Course: _____ Designation/Institution: _____

Location: _____

4. Contact Details

Permanent Address: _____

Current Address: _____

5. Your Alumni contribution for upcoming students

Mentoring Placement Internship Guest Lecture

Projects Financial Support Other _____

6. Achievements / Feedback

Achievements: _____

Feedback: _____

7. Additional Details

LinkedIn: _____ Instagram: _____

Join Alumni Network: Yes No

Registration Link: <https://www.vecw.edu.in/alumni/>

8. Payment Details (Pay Alumni amount Rs.100 to maintain VECAA)

RTGS PhonePe G Pay Deposit A/C Cash Other

Declaration: I confirm the above details are correct. Sign: _____ Date: _____

Verified By: _____ Data Entered: Yes No

Note: Kindly provide proof for 3, 6, and 8 to be attached while submitting the form.

