



H.&G.H. Mansukhani Institute of Management

ALUMNI REGISTRATION FORM

Name of the Alumni: _____

Gender: _____

Education Details at MIM

Degree* : _____

Specialization* : _____

Batch* : _____

Present Status of Employment:

Employment Type* : _____

Employment Details : _____

Present Employer Name : _____

Designation : _____

Work Location : _____

Country : _____

State : _____

City : _____

Special Achievements:

Special Achievements after MMS : _____

Present Residential Details:

Address: _____

Phone 1 (Office) : _____

Phone 2 (Residence) : _____

Mobile : _____

Email Id (Office) : _____

Email Id (Personal) : _____