

Serial no:

**Shahid Matangini Hazra Govt. General Degree college for Women Alumni  
Association**

**Membership Form (Annual/Life)**

**Chakshrikrishnapur, Kulberia, P.O.- Kulberia, Purba Medinipur-721649**

1. Name of the member:

(Block letter)

2. Father's name:

3. Date of birth:

4. Residential address: Vill/Word no. ....

P.O..... Dist. .... Pin.....

Mobile no: ..... email.....

5. Year of passing from this college:

a) Discipline –Science/Arts/Commerce b) Hons/Pass c) In case of Hons.

Mention subject:

6. Academic qualification:

7. Present Occupation:

a) If employee, please give your Designation.....

b) Nature of job: full time/part time

c) Name of the institution and address:

8. Paid membership fee Rs. , In cash/Cheque/DD No/online transfer ref.

no....., date:

Cheque/DD to payable to “Shahid Matangini Hazra Govt. General Degree college for  
Women Alumni Association”, A/C No. Branch:

Full signature

.....

1. Name of the member:

**Serial no:**

2. Residential address: Vill/Word no. ....

P.O.....

Dist. .... Pin.....

3. Received Rs.

Date:

Full signature of collector

Passport size  
photo