

For Office Use only CPS&B No.____

Center for Plant Sciences & Biodiversity

UNIVERSITY OF SWAT

Alumni Membership Form

(Only passed out students/graduates of CPS &B are eligible)

Photo Here

PERSONA	AL DETA	AILS		
Name:				Course studied/ Degree Title:
Father's Name				Campus/Div/Department
Date of Birth:	<u>Date</u>	/_Month_/_Yes	ar	
Gender:	Male	Female		Terminal Degree
Nationality:				
Address:				Year started
Ph: Res.				
WhatsApp No:				Year ended
Mobile No.				
Email Address:				Job Title
CARE	ER DET	AILS		
Current Employer / Organization:				What was your first salary
Address				What is your current salary
Ph.				
Please attach two l, passport-sized p		s with your name cle	early writ	ten on the back or request exemption of Photograph.
Alumni for which	h I am eli	gible. My particul	ars are g	Plant Sciences & Biodiversity, University of Swat, iven above. In case of any change, I shall intimate and agree to abide by it.
Singed:				dated
	•	ompleted appl		
Office of Center for Plant Sciences & Biodiversity, University of Swat or email on: directorcpsb@uswat.edu.pk				
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Alumni Fee of Rs.2000/- (Two Thousand only) may be submitted to the following A/C No: Account No. 4045003250 Branch Code: 1330 NBP Saidu Sharif, Swat Note: Original/Scan Copy of the submitted fee must be submitted with application form.