For Office Use only	
Ref. No:	



Two
Photograph

## Alumni Association Membership Form

(Only regular students/graduates of University of Swat are eligible)

PERSONAL DETAILS		
Name:	Course studied/ Degree Title:	
Father's Name	Faculty/Department	
Date of Birth:		
Gender: Male Female	Terminal Degree:	
Nationality:		
Address:		
Ph: Res. Off.		
Mobile No.	Year started: Year ended:	
Email Address:		
CAREER DETAILS		
Current Employer / Organization / Business	Job / Business Title:	
Address	What was your first salary at job?	
	What is your current salary at job?	
Ph. Fax.	What was your first income from Business?	
	What is your current income from Business?	
please attach two identical, passport-sized photographs with your name clearly written on the back		
I hereby apply for the Membership of the University of Swat Alumni Association for which I am eligible. My particulars are given above. In case of any change, I shall intimate the same. I have read the constitution of the Association and agree to abide by it.		
Signature:	Date:	
Please Return dully Completed Application Form To:		
Dry north Droycost Office Main Administration Plack Hair-with of Court Clarks de		
By post: Provost Office, Main Administration Block, University of Swat, Charbagh.  alumni@uswat.edu.pk		
arumme uswaticuu.px		