

**St.PETER'S ENGINEERING COLLEGE  
AVADI, CHENNAI – 600 054.**

**Alumni Registration**

**Personal Information (\*)**

First Name :  
Register Number :  
Department :  
Year of Passing :

**Employment Information**

Organization :  
Designation :  
Address :  
  
City :  
State :  
Zip Code :  
Country :

**Contact Information (\*)**

Address :  
  
City :  
State :  
Zip Code :  
Country :  
Email Id :  
Phone – Off :  
Phone- Home :  
Mobile :

**Signature**

Note: Kindly fill up the following Performa and mail it to [murali\\_281974@yahoo.co.in](mailto:murali_281974@yahoo.co.in)