

## COMSATS Institute of Information Technology, Sahiwal ALUMNI PERFORMA ASSOCIATION



		PERSONAL I	NFORMAT	<u>ION</u>		
NAME OF ALUMNI						
FATHER'S NAME						
CNIC NO				GENDER		
DATE OF BIRTH				EMAIL ADDRESS		
TELEPHONE # (MOB)				TELEPHON (RES)	NE#	
HOME ADDRESS				•		
		ACADEMIC I	INFORMAT	<u> ION</u>		
CERTIFICATE/DEGREE	SUBJECTS	PASSING YEAR	BOARD/UI	NIVERSITY	OBTAINED MARKS	MAXIMUM MARKS
MATRIC/ O-LEVEL/						
EQUIVALENT						
HSSC/ A-LEVEL/						
EQUIVALENT						
BA/BSc/B.Com/						
EQUIVALENT						
MASTER/						
EQUIVALENT						
		CIIT ACADEMI	C INFORM	<u>ATION</u>		
REGISTRATION #				SESSION		
PROGRAM				MEDAL/PI RECIEVED		
YEAR OF PASSING		CGPA		CAMPUS		
		CURRENT	JOB STATU	JS	·	
JOB   INTER	NSHIP□					
ORGANIZATION				CITY		
DESIGNATION				DURATION	N	
		SKILLS 8	k INTEREST	-		
		ACCOUNT I	NFORMAT	<u>ION</u>		
LOGIN						
PASSWORD						

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