



Rawalpindi Women University

ALUMNI REGISTRATION FORM

For Official Use:

RWU - _____

RWU(C) - _____

Recent
Photograph
Here

PERSONAL DETAILS

Name:	
Father Name:	
CNIC No:	
Date of Birth:	
Correspondence Address:	
Tel:	
Cell:	
Email:	

EDUCATIONAL DETAILS

Post Graduate College RWP

RWU

Registration No: (RWU)	
Program:	
Department:	
Year of Passing:	

EMPLOYER DETAILS (If any)

Occupation: Self Employed / Employed / Higher Studies	
Name of the Firm / Employer:	
Designation (If applicable)	

Alumni Card Required: Yes: _____ No: _____

Charges: Rs.500/- (attach payment receipt)

Note: Kindly get update your record upon any change

Signatures: _____

- Note:**
1. All columns are to be filled.
 2. Provide Copy of CNIC
 3. Provide copy of Degree/Transcript.
 4. Feel free to provide your Feedback and Suggestions at alumni@rwu.edu.pk
 5. Please fill the online form by following link <https://rwu.edu.pk/alumni/>