



Walchand College of Engineering, Sangli

(Government-Aided Autonomous Institute)

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ALUMNI CONTRIBUTION TO ACTIVITIES

Activity Name: **Scholarships**

Name of the Alumnus Willing to Contribute _____

Passout Year _____ Program UG/PG _____

Branch _____

Name of the Company/Organization/Institute presently working for _____

Designation _____

Area of Expertise _____

City Location _____ Mobile No _____

Email ID _____

Brief your idea about Conduction/Implementation of the Activity _____

Sign _____

Date _____