

Prof. Amit Choudhury Director

NOTICE

Date: 27.05.2019

Sub: Registration of GUIDOL Alumni

It has become necessary to register Gauhati University IDOL alumni. For this purpose a form has been designed and the same has been attached.

All alumni are requested to submit a filled up 'Alumni Registration Form' attached herewith and submit the same either to GUIDOL or any of its study centers.

Alumni applying for course completion certificate are also requested to submit a filled up 'Alumni Registration Form' along with the course completion certificate.

In order to ensure that GUIDOL can communicate with the alumni, it is requested that the 'Alumni Registration Form' is filled up and the mandatory fields (marked by *) contain current active bonafide data/information. In future arrangement will also be made for alumni to update their information as and when they feel it necessary.

Sd/-Director, GUIDOL

Copy to:

- 1) Principal of all colleges of GUIDOL study centers
- 2) Coordinators of all colleges of GUIDOL study centers
- 3) Assistant Director, GUIDOL
- 4) System Analyst, GUIDOL
- 5) OS (GS & M), GUIDOL
- 6) Examination Section, GUIDOL
- 7) GUIDOL website and Face book page
- 8) Front Desk, GUIDOL

Director, GUIDOL

Tel: 0361-2573887, Mobile: 88110-92694, E-mail: director_idol@gauhati.ac.in Toll Free No: 1800-345-3614



GAUHATI UNIVERSITY INSTITUTE OF DISTANCE AND OPEN LEARNING

SL No:		
--------	--	--

ALUMNI REGISTRATION FORM	Colour		
1. *Name (in Block letters):	Passport Size Photo		
2. *Name of degree passed from IDOL (along with name of the subject):			
3. *Roll No:			
4. *DOB: D D M M Y Y Y Y 5. *Place of Permanent Residence: Urban Rural			
6.*Category: GEN ST SC OBC MOBC MINORITY (please tick appropriate category)			
7. *Gender: Male Female Other (please tick appropriate Gender)			
8. *Calendar year of passing GUIDOL Programme:			
10. *Mobile No: Alternative Mobile No			
11. *Email Id: Alternative Email id			
12. * Occupation :			
Presently working at: *Homemaker (if yes please to			
Present Designation: OR * Self Employed (if yes please to the provide details of self employed (if yes please to the please provide details of self employed (if yes please to the please provide details of self employed (if yes please to the please provide details of self employed (if yes please to the please to the please provide details of self employed (if yes please to the pleas			
Tresent Designation.			
13. * How has the degree from GUIDOL helped you? (You can tick more than one)			
A. To get a Job B. Promotion in Job C. Helped me to get self employed			
D. For Higher Education E. Achieve my desired academic goals F. Building self confidence			
G. The degree has helped me to broaden my mental horizon			
H. Any other			
14. Remarks (Optional):			
Signature of the Ex-learner/Alumni	& Date		
N.B.: * denotes the mandatory fields			
FOR OFFICE USE ONLY			
Details checked by: Date of upload:			