

SRINIVAS COLLEGE OF PHARMACY

VALACHIL, MANGALORE – 574143

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ALUMNI PERSONAL DATA FORM

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| 01 | Name | PRATHEEKSHA.K M |
| 02 | Sex | FEMALE |
| 03 | Date of Birth | 30 TH MARCH 1993 |
| 04 | Year of Admission | 2011 |
| 05 | Year of Passing | 2016 |
| 06 | Degree Obtained | BACHELOR OF PHARMACY |
| 07 | Branch/ Specialization | PHARMACY |
| 08 | Qualification Obtained After Passing Out | PHARMACIST |
| 09 | Permanent Address with Telephone Number | SHREE KRISHNA KRUPA HOUSE,PERLAMPADY POST,PUTTUR TQ,DAKSHINA KANNADA- 574212 |
| 10 | Communication Address Telephone Number | - |
| 11 | Mobile Number | 9480569918 |
| 12 | Fax | - |
| 13 | Email | Pratheekshakm30@gmail.com |
| 14 | Current Occupation | Working |
| 15 | Current Organization | JUSTICE K S HEGEDE CHARITABLE HOSPITAL |
| 16 | Any Other Details | - |