

SRINIVAS COLLEGE OF PHARMACY

VALACHIL, MANGALORE – 574143

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ALUMNI PERSONAL DATA FORM

01	Name	SHIVARANJAN.S
02	Sex	MALE
03	Date of Birth	03-07-1993
04	Year of Admission	2010
05	Year of Passing	2016
06	Degree Obtained	B.PHARM, M.PHARM
07	Branch/ Specialization	PHARMACEUTICS
08	Qualification Obtained After Passing Out	
09	Permanent Address with Telephone Number	Akshaya, Agalpady, PO Kumbdaje, Kasaragod, 671551
10	Communication Address Telephone Number	8722555272
11	Mobile Number	8722555272
12	Fax	
13	Email	ranjanagalpady@gmail.com
14	Current Occupation	Drug Safety Associate
15	Current Organization	Synowledge India Pvt. Ltd.
16	Any Other Details	