Pakistan Institute of Development Economics
ALUMNI REGISTRATION FORM

Please use Block Letters. Sections marked in bold must be completed.
Copies can be downloaded from www.pide.org.pk/alumni
The Registrar, PIDE, Islamabad
Tel: 051-9248049, 051-9248051, Fax: 051-9248065, E-mail: placement@pide.org.pk

PERSONAL INFORMATION:

Full name__________________________________________________________

Father’s name ____________________________________________________

Date of Birth _____/_____/_______ Gender (Male/Female) ____________________________

CNIC Number _____________________________________________________

Home address ______________________________________________________________________

____________________________________________________________________________________

City_________________________ Province ____________________

Country _____________________ E-mail_______________________________________________

Phone __________________________ Mobile Phone _________________________________

Preferred Mailing Address:  □ Home Address /  □ Office Address

PIDE INFORMATION

PIDE Registration Number _____________________
(If registration number is not known, please attach your DMC or any documents showing you have studied at PIDE. If you have neither of the two, please contact the Academic Office)

Starting year at PIDE ________________ Completion year at PIDE _________________

Which Degree(s) did you Complete at PIDE?

□ Masters  □ MBA  □ MPhil  □ PhD

OTHER EDUCATION-RELATED INFORMATION

Highest degree earned __________________________ From which institutions? _______________________

If you are still a student, name of present institution _____________________________________________________________________________

Current field of study ________________________________________________________
EMPLOYMENT INFORMATION
Are you currently ☐ working / ☐ not working / ☐ Retired

If working: Name of Organization _______________________________________________________
Position in organization ________________________________________________________________
Office address ______________________________________________________________
City ________________________________ Province/State___________________ Post Code________________________
Country ________________________________ Office e-mail____________________________________
Office Phone _________________________________

PROFESSION
☐ Accounting/Insurance ☐ Energy ☐ Media
☐ Agriculture ☐ Engineering ☐ Medicine
☐ Architecture ☐ Government ☐ NGO
☐ Armed Forces ☐ Health care ☐ Police
☐ Banking/Finance ☐ IT/Telecom ☐ Politics
☐ Business ☐ Law ☐ Trading

HOBBIES AND INTERESTS
☐ Horticulture ☐ Photography Other_______________
☐ Literature ☐ Politics Other_______________
☐ Music ☐ Sports Other_______________

Awards ________________________________________________________________________________________________
___________________________________________________________________

Membership of Clubs/organization ________________________________________________________________
________________________________________________________________________________________________________

ALUMNI CONTACTS
If you have relatives / friends / acquaintances who are PIDEAN, please give their name/contact numbers so that we can add them to the Alumni database. Please give them copies of this form or download it from our website.

1. __________________________________________ Contact Tel No. ________ Relationship ________
2. __________________________________________ __________________________ ________
3. __________________________________________ __________________________ ________
4. __________________________________________ __________________________ ________
5. __________________________________________ __________________________ ________

Please use extra sheet for additional name:

Signature ____________________________________________________________

Submitted by: ☐ Self ☐ Other__________________________