SRINIVAS COLLEGE OF PHARMACY

VALACHIL, MANGALORE – 574143

E. Mail: scpprincipal@srinivasgroup.com, Phone: (0824) 2274722, Fax: (0824) 2423302 ALUMNI PERSONAL DATA FORM

| 01 | Name | Shilpa Shetty |
|----|--|-------------------------------|
| 02 | Sex | Female |
| 03 | Date of Birth | 30-07-1994 |
| 04 | Year of Admission | 2012 |
| 05 | Year of Passing | 2016 |
| 06 | Degree Obtained | B. Pharma |
| 07 | Branch/ Specialization | - |
| 08 | Qualification Obtained After Passing Out | B.Pharm |
| 09 | Permanent Address with Telephone Number | Shri Sannidhi,Guttu House, |
| | | Ajjibettu PO and Village, |
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| 10 | Communication Address Telephone Number | Shri Sannidhi,Guttu House, |
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| 14 | Current Occupation | Student(M.Pharm) |
| 15 | Current Organization | Srinivas college of pharmacy, |
| | | Valachil, Mangalore |
| 16 | Any Other Details | |