



# ST. XAVIER'S COLLEGE (AUTONOMOUS)

30 MOTHER TERESA SARANI  
KOLKATA-700016

## Alumni/ae Input Form

Session: 2026-27

Recent Colour  
Photograph of  
the Alumni  
Member

Form No.:

Name :			
Gender :		Age:	
SXCAA Membership No :		Year of membership:	
Address (Residence):		Address (Office):	
		Designation:	
Phone (Residence):	Phone: (Office):	Mobile:	
e-mail ID:			
As an alumnus / alumna what is your involvement in and service to St. Xavier's College:			
1.			
2.			
3.			
4.			
5.			
What is your involvement in and service to the Alumni Association:			
1.			
2.			
3.			
4.			
5.			
Name of your Son/Daughter:			
Online Application Code/s :			

Signature :

Date:

Submit the documents to Fr. Principal's Office (in person) arranged in the following order:

1. An appeal letter addressed to Fr. Principal
2. Filled in Alumni/ae Input Form
3. Copy of the online application acknowledgement sheet(s)
4. Copy of Class XII Board/Council Marksheet
5. A photocopy of your Alumni Membership Card