

Savitribai Phule Pune University



Form No :1462-01629

Examination Form Mar/Apr 2022

Course Name B.E.(2015 PAT.)(INFORMATION TECHNOLOGY)

PRN. 71917725B Eligibility No. 12018312542 Total Fee to be Paid: 1655

PUNCODE CEGP014620 College (0065) TRINITY COLL.OF ENGG.& RESEARCHPISOLIPUNE

Instructions to the Candidate:

- 1. This Exam form along with fee amount should be submitted to the concerned college.
- 2.Repeater students should attach attested true copy of the latest mark sheet alongwith this form.
- 3. This form will be considered **ONLY AFTER APPROVAL** from the concern College Login.

To,

Director,

Board of Examination & Evaluation, Savitribai Phule Pune University, Pune-411 007.

Sir/Madam,

I request permission to present myself at the examination courses, mentioned below .

1.Personal Details:					
Name of the Applicant	Name of the Applicant				
Name of the Applicant's Mo	ther	SHELKE SAVITA SANDIP			
Address for Communication	1	A/P WADEGAVHAN TAL.PARNER DIST.AHMADNAGAR			
Email-ID	prajwalshelke2222@gmail.co m	Contact Number	9112801145		
Gender	Female	Category	OBC		
Divyang/Learning Disable	No	Medium of Instruction	English		

Applie	d Subjects I	nformation :							
Sem	Sub Code	Subject Name	TW	INSEM	ONLINE	TH	PR	OR	GRD
8	414462	Distributed Computing System	-	Y	-	Υ	-	-	-
8	414463	Ubiquitous Computing	-	Y	-	Υ	-	-	-
8	414464A	Internet of Things (IoT)	Y	Y	-	Υ	-	Υ	-
8	414465D	Social Media Analytics	-	Y	-	Υ	-	-	-
8	414466	Computer Laboratory-IX	Y	-	-	-	Υ	-	-
8	414467	Computer Laboratory-X	Y	-	-	-	-	Υ	-
8	414468	Project Work	Y	-	-	-	-	Υ	-
8	414469D	AI AND ROBOTICS 414469D	-	Y	-	-	-	-	-



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3. Fee Details			
Fee Type	Fee Amount	Remarks	
Form Fee	30		
Exam Fee	680		
Passing Certificate Fee	145		
CAP Fee	145		
Statement Of Marks Fee	145		
Project Fee/Dissertation	510		
EVS Fee	0		
Internal Marks Fee	0		
Departmental Fee	0		
Transcript Fee	0		
Late Fee	0		
Fine Fee	0		
Total Fee to Be Paid:	1655		

DECLARATION:

I hereby declare that I have gone through the Syllabus and the list of books prescribed for the examination for which I am appearing. I SHALL BE RESPONSIBLE for any errors and wrong or incomplete entries made by me in the Examination form.

I shall not request for special concession such as change in the time and/or day fixed for the University examination etc. on religious or any other grounds.

Yours faithfully.

Note:Special Subject(s) should be verified by the subject teacher & signed.

Please, Select Optional Subject(s) carefully, because Optional Subject(s) are not editable.

Signature of the Candidate	Date :	Place :
Stamp & Signature of the Principal	Date :	Place :