



Savitribai Phule Pune University



Examination Form Oct/Nov 2022

Form No :1387-01047

Course Name T.E.(2019 PAT.)(COMPUTER)

PRN.	72153770H	Eligibility No.	12020220895	Total Fee to be Paid:	1000
PUNCODE	CEGP013870	College	(0059) Marathwada Mitra Mandals Institute of Technology		

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		DESAI SUYASH ULHAS	
Name of the Applicant's Mother		CHHAYA	
Address for Communication		A/P Wathar, Tal. Karad, Dist. Satara	
Email-ID	suyash.desai@mmit.edu.in	Contact Number	9370545715
Gender	Male	Category	EWS
Divyang/Learning Disable	No	Medium of Instruction	English
ABCId	140460378376		

2.Applied Subjects Information :

Sem	Sub Code	Subject Name	TW	INSEM	ONLINE	TH	PR	OR	GRD	TUT
5	1234	NOT APPLICABLE(HONOURS/MINOR)	-	-	-	-	-	-	-	N
5	310241	DATABASE MANAGEMENT SYSTEMS	-	Y	-	Y	-	-	-	N
5	310242	THEORY OF COMPUTATION	-	Y	-	Y	-	-	-	N
5	310243	SYSTEMS PROGRAMMING AND OPERATING SYSTEM	-	Y	-	Y	-	-	-	N
5	310244	COMPUTER NETWORKS AND SECURITY	-	Y	-	Y	-	-	-	N
5	310245D	SOFTWARE PROJECT MANAGEMENT	-	Y	-	Y	-	-	-	N
5	310246	DATABASE MANAGEMENT SYSTEMS LABORATORY	Y	-	-	-	Y	-	-	N
5	310247	COMPUTER NETWORKS AND SECURITY LABORATORY	Y	-	-	-	-	Y	-	N
5	310248	LABORATORY PRACTICE I	Y	-	-	-	Y	-	-	N
5	310249	SEMINAR AND TECHNICAL COMMUNICATION	Y	-	-	-	-	-	-	N
5	310250A	CYBER SECURITY	-	-	-	-	-	-	Y	N



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3. Fee Details		
Fee Type	Fee Amount	Remarks
Form Fee	30	
Exam Fee	680	
Passing Certificate Fee	0	
CAP Fee	145	
Statement Of Marks Fee	145	
Project Fee/Dissertation	0	
EVS Fee	0	
Internal Marks Fee	0	
Departmental Fee	0	
Transcript Fee	0	
Late Fee	0	
Fine Fee	0	
Total Fee to Be Paid:	1000	

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.

Place : _____ Date : _____

Signature of the Candidate

Place : _____ Date : _____

Stamp & Signature of the Principal