

# Savitribai Phule Pune University



Form No :1113-01665

## Examination Form Oct/Nov 2024

Course Name M.E.(Rev.2017)

 PRN.
 Fresh
 Eligibility No.
 Total Fee to be Paid:
 2510

 PUNCODE
 CEGP011130
 College
 () Army 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		AKSHAY LAVHAJI PATIL		
Name of the Applicant's Mother		VAISHALI LAVHAJI PATIL		
Address for Communication		Sr. No. 307, Lane No. 3, Kuber Park, D. Y. Patil Road Lohegaon, Pune - 411047		
Email-ID	akshay.lpatil25@gmail.com	Contact Number	9673834415	
Gender	Male	Category	OPEN	
Divyang/Learning Disable	No	Medium of Instruction	English	
ABCId	633062167535			

2.Applied Subjects Information :									
Sem	Sub Code	Subject Name	TW	INSEM	ONLIN E	TH	PR	OR	GRD
1	510301	MATHEMATICAL FOUNDATIONS FOR DATA SCIENCE	-	Y	-	Y	-	-	-
1	510302	DATA SCIENCE	-	Υ	-	Υ	-	-	-
1	510303	BIG DATA ANALYTICS	-	Υ	-	Y	-	-	-
1	510304	RESEARCH METHODOLOGY	-	Υ	-	Y	-	-	-
1	510305C	DATA PREPARATION AND ANALYSIS	-	Υ	-	Y	-	-	-
1	510306	LABORATORY PROFICIENCY-I	Y	-	-	-	-	Y	-
1	510307	NON-CREDIT COURSE	-	-	-	-	-	-	Y



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3. Fee Details			
Fee Type	Fee Amount	Remarks	
Form Fee	30		
Exam Fee	2040		
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	150		
Fine Fee	0		
Total Fee to Be Paid:	2510		

### **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 :