



Examination Form Application
WINTER-2024

SPPU Institute Code : 4013	PUNCODE : CEGN018940	Form No : 24143O-02787
Programme Name : MCA(2022 Pattern)	Class :	Branch : MASTER IN COMPUTER APPLICATIONS.
Roll No :	Division : SYE-MCA	CRN : 3723096029
Eligibility No : 12023132429	PRN : 123609003M	ABC ID:
Group :		

Instructions:

- Regular students should submit exam form to the concerned departmental Class-Coordinator.
- This form will be considered VALID ONLY AFTER APPROVAL from the Examination Cell.
- Repeater/Year drop students should submit exam form to the examination students section directly.

To,
The Controller of Examinations, K.K.Wagh IEER, Nashik-3

I request permission to present myself for the examination of following courses, mentioned below;

Personal Details:					
Name of Applicant:	AHER DHIRAJ BHAUSAHEB				
Name of Applicant's Mother:	MANGAL				
Address:	UTTAM NAGAR,CIDCO				
Contact Number:	9607774918	Email ID :	dhirajaherher@gmail.com		
Gender	Male	Category	OBC		
Learning Disable/ Physically Handicapped : NONE			Medium of Instruction : ENGLISH		

Details of Courses Applied :

Course Code	Title of Course	CCE	PR	TW	INSEM	ENDSEM
SEMESTER III (REGULAR)						
MCA223003	Cloud Computing	Y	NA	NA	Y	Y
MCA223001	Data Science	Y	NA	Y	Y	Y
PGC223001	Introduction to Constitution	Y	NA	NA	NA	Y
MCA223004A	Elective II: A: Information and Network Security	Y	NA	NA	Y	Y
MCA223002	Machine Learning	Y	Y	Y	Y	Y
MCA223007	Mini Project	NA	NA	Y	NA	NA
MCA223005	Software Project Management and Testing	Y	Y	Y	Y	Y

Fee Details:

Fee Type	Fee Amount Rs.
STATEMENT OF MARKS	145
CAP FEE	400
EXAM FEES	2555
Total Fee to be paid:	3100



DECLARATION:

I hereby declare that I have gone through the course curriculum 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 day, date and/or time fixed for the examination etc. on religious or any other grounds.

- Note:** 1. Optional / Elective / Group / Audit / Honor/ Special Course(s) (if applicable), should be selected carefully.
2. The exam form should be verified and signed by the concerned departmental Class Coordinator.
3. No supplement will be provided for all type of examinations.

Date : 18/10/2024 01:40

Place: Nashik

Name & Sign of Student

Name & Sign of Class Coordinator

Sign of Controller of Examinations