



KONKAN GYANPEETH COLLEGE OF ENGINEERING, KARJAT

Konkan Gyanpeeth Shaishkshnik Sankul, At. Vengaon Road, Dahivali / Parade, Post: Tiware, Tal: Karjat, Dist: Raigad, MS 410201

Application Form For Session And Course Artificial Intelligence & Data Science TE Semester - VI

To
The Principal
Konkan Gyanpeeth
College of Engineering
Karjat, Raigad - 410201



Student Id
900

Sir,
I, the undersigned hereby apply for the admission above said exam. I also further undertake that the information filled in the form is correct to best of my belief.

STUDENT DETAILS:

| | | | |
|--|--|----------------------|--------------------------|
| PRN No. : | 2022016402460616 | | |
| Full Name : | SUTAR SURNAME | NIKHIL FIRST NAME | MANGESH FATHER'S NAME |
| Gender : | Male | | |
| Castecategory : | Open (MGT) | | |
| Mother's Name : | MANALI | | |
| Address : | 301,VASANT SMRUTI,BEHIND INDRA HIGHTS,UMESH NAGAR,DOMBIVLI WEST,421202 | | |
| Contact : | (Mobile Self) : 7738544966 (Mobile Parent) : 9221718063 | | |
| E-Mail ID : | nikhilsutar621@gmail.com | | |
| I am/was a regular student of Artificial Intelligence & Data Science TE Semester - VI in the academic year 2024-2025 | | | |

| Sr. No. | Name of the Course | Marks Obtained | | | |
|---------|---|-----------------------|-----------------------|-------------------|---------------------------|
| | | IA (Internal Ass.) | ESE (End Sem Exam) | TW (Term Work) | OR/PR (Oral/Practical) |
| 1 | Data Analytics and Visualization | | | | |
| 2 | Cryptography & System Security | | | | |
| 3 | Software Engineering and Project Management | | | | |
| 4 | Machine Learning | | | | |
| 5 | Distributed Computing | | | | |
| 6 | Data Analytics and Visualization Lab | | | | |
| 7 | Cryptography & System Security lab | | | | |
| 8 | Software Engineering and Project Management Lab | | | | |
| 9 | Machine Learning Lab | | | | |
| 10 | Skill base LAb Course : Cloud Computing | | | | |
| 11 | Mini Project Lab :2B | | | | |

Repeater Subject Details

| Sr. No. | Stream | Semester | Subject | Sub-Subject |
|---------|--------|----------|---------|-------------|
|---------|--------|----------|---------|-------------|

I agree that my application for appearing in the above said exam will be considered only when my attendance at lectures as well as practical in the term under ordinance of University of Mumbai.

Place:

Date :22 Mar 2025

Checked by

Signature of Student

I certify that Shri/Kum/Smt SUTAR NIKHIL MANGESH

he/she has the no. of days specified below attended during there terms the course of lectures delivered in the college for the above said examinations.

College Seal

Principal Signature

Encl :-

- i) Photocopies of all previous year Mark sheet
- ii) Photocopies of current year admission fee receipt