

Savitribai Phule Pune University



Form No :1213-00214

Examination Form Oct/Nov 2023

Course Name B.E.(2019 PAT.)(INFORMATION TECHNOLOGY)

PRN. 72150134G Eligibility No. 12020181279 Total Fee to be Paid: 1000

PUNCODE CEGP012130 College (0042) Sinhgad 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		KHANDEBHARAD OMKAR SANTOSH		
Name of the Applicant's Mother		SUSHMA SANTOSH KHANDEBHARAD		
Address for Communication		Varsoli, Ionavala		
Email-ID	omkarkhandebharad@gmail. com	Contact Number	8010802911	
Gender	Male	Category		
Divyang/Learning Disable	No	Medium of Instruction	English	
ABCId				

2.App	oplied Subjects Information :									
Sem	Sub Code	Subject Name	TW	INSEM	ONLIN E	TH	PR	OR	GRD	TUT
7	414441	INFORMATION AND STORAGE RETRIEVAL	-	Y	-	Y	-	-	-	N
7	414442	SOF TWARE PROJEC T MANAGEMENT	-	Y	-	Y	-	-	-	N
7	414443	DEEP LEARNING	-	Y	-	Y	-	-	-	N
7	414444C	MULTIMEDIA TECHNOLOGY	-	Y	-	Y	-	-	-	N
7	414445B	INTRODUCTION TO DEVOPS	-	Y	-	Y	-	-	-	N
7	414446	LAB PRACTICE III	Y	-	-	-	-	Υ	-	N
7	414447	LAB PRACTICE IV	Y	-	-	-	Y	-	-	N
7	414448	PROJECT STAGE-I	Y	-	-	-	-	-	-	N
7	414449A	COPYRIGHTS AND PATENTS	-	-	-	-	-	-	Υ	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.

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