



Savitribai Phule Pune University



Examination Form Oct/Nov 2024

Form No :1427-00940

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

| | | | | | |
|---------|------------|-----------------|---|-----------------------|------|
| PRN. | 72233153D | Eligibility No. | 12022230722 | Total Fee to be Paid: | 1000 |
| PUNCODE | CEGP014270 | College | (24) Dr.D.Y.Patil 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 | | RENAKALE PARTH RAMESH | |
| Name of the Applicant's Mother | | ALKA | |
| Address for Communication | | M-18/210, MHADA Colony, near baba petrol pump, Aurangabad | |
| Email-ID | prenakale@gmail.com | Contact Number | 7385111218 |
| Gender | Male | Category | OPEN |
| Divyang/Learning Disable | No | Medium of Instruction | English |
| ABCId | 281868465567 | | |

2.Applied Subjects Information :

| Sem | Sub Code | Subject Name | TW | INSEM | ONLINE | TH | PR | OR | GRD | TUT |
|-----|----------|---|----|-------|--------|----|----|----|-----|-----|
| 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 | 310245B | HUMAN COMPUTER INTERFACE | - | 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 | 310250B | PROFESSIONAL ETHICS AND ETIQUETTES 3 | - | - | - | - | - | - | 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