

Savitribai Phule Pune University



Form No:1309-01631

Examination Form Mar/Apr 2025

Course Name T.E. Artificial Intelligence and Data Science (2019)

PRN. 72246875L Eligibility No. 12022283864 Total Fee to be Paid: 1000

PUNCODE CEGP013090 College (53) Zeal College of Engineering and Research

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 | ame of the Applicant | | ZADE PRASAD VILAS | | |
| Name of the Applicant's Mo | other | JAYSHREE | | | |
| Address for Communication | | Near Maa Bhagavati Mangal Karyalaya Lic Colony Ward No 5 Nalwadi Wardha 442001 | | | |
| Email-ID | zadeprasad246@gmail.com | Contact Number | 7972455933 | | |
| Gender | Male | Category | OBC | | |
| Divyang/Learning Disable | No | Medium of Instruction | English | | |
| ABCId | 348704203497 | | | | |

| 2.App | lied Subjec | ed Subjects Information : | | | | | | | | |
|-------|-------------|-----------------------------------|----|-------|------------|----|----|----|-----|-----|
| Sem | Sub Code | Subject Name | TW | INSEM | ONLIN E | TH | PR | OR | GRD | TUT |
| 6 | 310270 | ARTIFICIAL INTELLIGENCE (MINOR) | - | Y | - | Υ | - | - | - | N |
| 6 | 317529 | DATA SCIENCE | - | Y | - | Υ | - | - | - | N |
| 6 | 317530 | CYBER SECURITY | - | Y | - | Υ | - | - | - | N |
| 6 | 317531 | ARTIFICIAL NEURAL NETWORK | - | Y | - | Υ | - | - | - | N |
| 6 | 317532B | NATURAL LANGUAGE PROCESSING | - | Y | - | Υ | - | - | - | N |
| 6 | 317533 | SOFTWARE LAB II | Y | - | - | - | Υ | - | - | N |
| 6 | 317534 | SOFTWARE LAB III | Y | - | - | - | Υ | - | - | N |
| 6 | 317535 | INTERNSHIP | Y | - | - | - | - | Υ | - | N |
| 6 | 317536 | MINI PROJECT (CS AND ELECTIVE-II) | Y | - | - | - | - | Υ | - | N |
| 6 | 317537E | MOOC- LEARN NEW SKILLS 317537E | - | - | - | - | - | - | 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 : |