

Punyashlok Ahilyadevi Holkar Solapur University, Solapur Shankarrao Mohite-Patil Institute of Technology and Research, Shankarnagar, Akluj

Application Form For Examination Of Oct 2024 Event



Bachelor of Technology (with Credits) [Computer Science and Engineering] - CBCS Pattern 2020 - Sem - VII

SID 202101035017129			Eligibility Status Pending			Exa	Examination Form No. 7580050				ADM	gdone
Instruction	Medium: Engli	sh		Nationality: -				ABC ID: -				
Student's Name: Madane Akshay Rajendr				ndra			Mother's Name: -			G	Gender: MALE	
Address: Akluj												
City: Akluj												
Tel. No: -				Mob. No: 8070215060				Email: am9551150@gmail.com				
DOB: 2002-02-14				Category: NTC				Physical Handicap: NO				
Important: You will be allowed to appear for only those Paper which you have marked. Please mark carefully. NA: Not Applicable, NS: Not Scheduled for this event, M. Excluded from appearing in this event.												
Sem - VII (FRESH - CBCS Pattern 2020)				College Roll Number: - Exam Appearan						ce Type: REGULAR		
Paper Details: Please select paper details which you want to appear.												
SN Paper Code				Paper Name AM - AT								т
1	BTN03701		Softw	Software Testing and Quality Assurance					TH_ESE, PR_ICA, TH_ISE			
2	BTN03702		Compiler Construction							PR_ICA, TH_ESE, TH_ISE		
3	BTN03703		DevOps					F			PR_ICA, TH_ISE, PR_POE	
4	BTN03704		Project Phase-I					PR_ICA, PR_POE			_POE	
5	BTN03705			Vocational Training					PR_ICA			
6				Data Mining					TH_ESE, PR_ICA, TH_ISE			
7				Big Data Analytics					TH_ESE, TH_ISE, PR_ICA			
				Software Licenses and Practices					TH_ESE			
Sem - V (REPEATER - CBCS Pattern 2020) College Roll Number: - Exam Appearance Type: REGUI									pe: REGULA	R		
Paper Details: Please select paper details which you want to appear.												
SN	Paper Co		Paper Name				AM - AT				.T	
1 BTN03501			Artificial Intelligence					TH_ESE				
Sem - VI (REPEATER - CBCS Pattern 2020)				College Roll Number: -				Exam	Appearance	Тур	pe: REGULA	R
Paper Detai	ils: Please sele	ct paper	details	which you	want to app	ear.						
SN Paper Code				Paper Name				AM - AT				
Fee Head		1	2	3	4		5	6		7	8	
Exam Fee											3820	
Practical Fee												1000
Exam Form Fee												5
Exam Late Fee												0
Super Late	Exam Fee											0
Provisional + Degree Certificate Fee												0
Sub Total												4825
Payment Details												
Amount Received: College Receipt No. and Date:												
DD No.: MICR No.:			No.:	DD Date:				Bank:				
To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statements made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.								Place Date Student's Signature				
Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/She is a regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.												
Place												
Date				Co	ollege Staff S	Signature	Seal a	and Si	gnature of Pr	inci	pal/HOD/Ch	nairperson