CHHATRAPATI SHIVAJI MAHARAJ UNIVERSITY

APPLICATION FORM FOR THE EXAMINATION -

Register No :	210000000024		Batch : 2021-2022

Current eMail :		Current Phone No :	

Name of the Candidate :	SUMIT SAMBHAJI KADAM

Institution :	CHHATRAPATI SHIVAJI MAHARAJ UNIVERSITY

Exam Centre Name :	-

Name of the Degree :	BACHELOR OF COMPUTER APPLICATIONS - Dept. of CS & IT

Regulation Name :	R-2018

Semester/Year/Part	Subject Code	Subject Name
BCA Bachelor of Computer Application - SEM6	CSAB6010	IT INFRASTRUCTURE MANAGEMENT [THEORY]
	CSAB6023	PROJECT WORK [PROJECT]
	CSAB6610	DATA ANALYTICS [THEORY]

Fee Particulars	Fee Amount	I hereby declare that the particulars furnished are correct.
Total		**Signature of the Candidate with Date**

DD Details

DD No	DD Date	Bank	Branch	Amount

Certificates to be recorded by the head of the Institution :

Certified that the particulars given by the candidate have been verified and found correct.

Date :	HOD (Sign & Seal)	Signature of the Head of the Institution with Seal