



Savitribai Phule Pune University



Examination Form Mar/Apr 2022

Form No :1427-02273

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

PRN.	72145274E	Eligibility No.	12020227316	Total Fee to be Paid:	1000
PUNCODE	CEGP014270	College	(0024) 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	SONAWANE SIDDHESH SACHIN				
Name of the Applicant's Mother	SHEETAL				
Address for Communication	Flat No. 6, A - Wing, Shyama Heritage, Keshavnagar, Chinchwad.				
Email-ID	siddheshsonawane07@gmail.com	Contact Number	7447664132		
Gender	Male	Category	SC		
Divyang/Learning Disable	No	Medium of Instruction	English		

Applied Subjects Information :

Sem	Sub Code	Subject Name	TW	INSEM	ONLINE	TH	PR	OR	GRD
4	207003	Engineering Mathematics III	Y	Y	-	Y	-	-	-
4	210252	Data Structures and Algorithms	-	Y	-	Y	-	-	-
4	210253	Software Engineering	-	Y	-	Y	-	-	-
4	210254	Microprocessor	-	Y	-	Y	-	-	-
4	210255	Principles of Programming Languages	-	Y	-	Y	-	-	-
4	210256	Data Structures and Algorithms Laboratory	Y	-	-	-	Y	-	-
4	210257	Microprocessor Laboratory	Y	-	-	-	-	Y	-
4	210258	Project Based Learning II	Y	-	-	-	-	-	-
4	210259	Code of Conduct	Y	-	-	-	-	-	-
4	210260A	Water Management 210260A	-	Y	-	-	-	-	-



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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