

Savitribai Phule Pune University



Form No:1169-00081

Examination Form Oct/Nov 2018

Course Name B.Sc. Computer Science(Rev.2013)

PRN. 1101704725 Eligibility No. 12016022662 Total Fee to be Paid: 920

PUNCODE CAAP011690 College (0654) P.V.Gs College of Science

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.

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		KULKARNI DIVYA ASHUTOSH		
Name of the Applicant's Mother		MADHURA		
Address for Communication		1, 'ANUPAM', BANK OF INDIA COLONY, WALVEKARNAGAR		
Aadhaar Number		492375581957		
Email-ID	divyak98@gmail.com	Contact Number	8308768607	
Gender	Female	Category	OPEN	
Is Physically Disabled	No	Medium of Instruction	English	

Applied Subjects Information :								
Year/ Sem	Sub Code	Subject Name	Internal	External/ Theory	Grade/ Online	Practical/ Sessional	Project	Oral
3	31121	CS -331 SYSTEM PROGRAMMING	Υ	Y	N	N	N	N
3	31122	CS -332 THEORETICAL COMPUTER SCIENCE	Y	Y	N	N	N	N
3	31123	CS -333 COMPUTER NETWORKS - I	Υ	Y	N	N	N	N
3	31124	CS -334 INTERNET PROGRAMMING - I	Y	Y	N	N	N	N
3	31125	CS -335 PROGRAMMING IN JAVA - I	Υ	Y	N	N	N	N
3	31126	CS -336 OBJECT ORIENTED SOFTWARE ENGINEERING	Υ	Y	N	N	N	N



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3. Fee Details				
Fee Type	Fee Amount	Remarks		
Form Fee	30			
Exam Fee	510			
Passing Certificate Fee	0			
CAP Fee	145			
Statement Of Marks Fee	145			
Project Fee/Dissertation	0			
EVS Fee	0			
Internal Marks Fee	90			
Departmental Fee	0			
Late Fee	0			
Fine Fee	0			
Total Fee to Be Paid:	920			

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		