

Savitribai Phule Pune University



Form No :1044-01567

Examination Form Mar/Apr 2021

Course Name B.E.(2015 PAT)(ELECTRONICS & TELECOMMU.)

 PRN.
 71828949J
 Eligibility No.
 12017007714
 Total Fee to be Paid:
 1655

PUNCODE | CEGP010440 | College | (5) PUNE INSTITUTE OF COMPUTER TECHNOLOGY PUNE.

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		MALWADKAR PRASAD DEVENDRA		
Name of the Applicant's Mother		SARIKA		
Address for Communication		J2/62,mourya vihar ,kothrud,pune		
Email-ID	prasadmalwadkar84@gmail. com	Contact Number	8485810672	
Gender	Male	Category	OBC	
Divyang/Learning Disable	No	Medium of Instruction	English	

Applied Subjects Information :									
Sem	Sub Code	Subject Name	TW	INSEM	ONLINE	TH	PR	OR	GRD
7	404186	LAB PRACTICE -I (CNS+ RMT)	Y	-	-	-	-	Υ	-
7	404187	LAB PRACTII (VLSI + ELE. I)	Y	-	-	-	Υ	-	-
7	404188	PROJECT STAGE I	-	-	-	-	-	Υ	-
8	404189	Mobile Communication	-	Y	-	Υ	-	-	-
8	404190	Broadband Communication Systems	-	Y	-	Υ	-	-	-
8	404191E	Audio Video Engineering	-	Y	-	Υ	-	-	-
8	404192C	Wireless Sensor Networks	-	Y	-	Υ	-	-	-
8	404193	Lab Practice –III (MC+BCS)	Y	-	-	-	Y	-	-
8	404194	Lab Practice –IV (Elective III)	-	-	-	-	-	Υ	-
8	404195	Project Stage II	Y	-	-	-	-	Υ	-



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3. Fee Details		
Fee Type	Fee Amount	Remarks
Form Fee	30	
Exam Fee	680	
Passing Certificate Fee	145	
CAP Fee	145	
Statement Of Marks Fee	145	
Project Fee/Dissertation	510	
EVS Fee	0	
Internal Marks Fee	0	
Departmental Fee	0	
Transcript Fee	0	
Late Fee	0	
Fine Fee	0	
Total Fee to Be Paid:	1655	

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 Candidat	Date :	Place :
Stamp & Signature of the Principa	Date :	Place :