

## The Maharaja Sayajirao University of Baroda, Vadodara

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Faculty of Science (33810)

Application Form for Examination of October-2019 event.

B.C.A.-Regular-FoS [BCA] CBCS 2012-No Branch-BCA-III-FSBCA-III

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PRN:		Eligibility Status:	Examination form No.: 001490		Division/Section:	Roll No.	:	22.00	
2017033800106382		Eligible						- O'VE	
Instruction Medium: English		N		Nationality:	ionality: India				
Student's Personal Information									
Stude	ent's Name: SHAIV	A DHRUVA VIJAY		Mother's Name: VA		NDANA	(	Gender: Male	
Name in Vernacular Language:શૈવ ધ્રુવ વિજય									
Address: A/1,JAY JALARAM NAGAR 2 OPP. INDRAPRASTH SOC. GORWA,VADODARA									
City: VADODARA, Taluka: Vadodara, District: Vadodara, State: Gujarat, PIN: 390016									
Telephone no.: 2393723         Mobile no: 919427353146         Email : dhunchi1999@gmail.com								nil.com	
DOB: Sep 19, 1999 Category: Open			Physically Handicap: No						
Previ	ous Latest Examinatio	n Details: SSBCA-II(Regular-Fo	[BCA] CBCS 2012) Exam Event: Apr-2019			Seat No: 422090 (Status: Pass)			
Exam form appearance type: Fresher									
Course Details: Please select Course details which you want to appear (UA-University Assessment, IA-Internal Assessment)									
SN	Course Code Course Name					AM - AT			
1	BCA1501	Software Engineering-II					TH-UA [];TH-IA []		
2	BCA1502	XML Technology					TH-UA [];TH-IA []		
3	BCA1503	XML Technology Lab					PR-UA[]		
4	BCA1504	Mini Project					PJ-IA []		
5	BCA1521L	Artificial Intelligence Lab					PR-UA[]		
6	BCA1523L	Mobile Computing Lab					PR-UA[]		
7	BCA1521						-UA [];TH-IA []		
8	BCA1523	Mobile Computing					TH-UA [] ;TH-IA []		
9	BCA1016	Project Management					TH-UA [] ;TH-IA []		
10 BCA1019 Human Resource Management				TH-UA [];TH-IA []					
Total:									
Payment Details: Amount Received: Faculty/College/Institution Receipt No. and Date:									
DD No: MICR No:				DD Date:			Bank:		
Center Preference (Code/Name):									
Venue Preference (Code/Name):									
To, The Deputy Registrar (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 statement made in this application are true, complete and correct to the best of my knowledge and belief. I Date: 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. Student's Signa								udent's Signature	
Declaration by Dean/Principal									
This form is carefully scrutinized by the Faculty/College/Institution 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 regular student of this Faculty/College/Institution and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place:									
			_						
Date:									
			Faculty/Co	Faculty/College/Institution Staff Signature			Seal and Signature of Dean/Principal		