

Savitribai Phule Pune University



Form No :1060-03965

Examination Form Mar/Apr 2024

Course Name T.E.(2019 PAT.)(INFORMATION TECHNOLOGY)

PRN. 72279427E Eligibility No. 12021243786 Total Fee to be Paid: 1000

PUNCODE CEGP010600 College (0007) Pune Vidyarthi Grihas College of Engineering and 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		GAIKWAD HARSHAVARDHAN SANJEEV						
Name of the Applicant's Mo	other	GAIKWAD VAISHALI SANJEEV						
Address for Communication		Pune Vidhyarthi Grihas College Of Engineering And Technology, 44, Shiv Darshan Rd, Parvati, Vidya Nagari, Parvati Paytha, Pune, Maharashtra 411009						
Email-ID	21113028@pvgcoet.ac.in	Contact Number	8805197840					
Gender	Male	Category	SC					
Divyang/Learning Disable	No	Medium of Instruction	English					
ABCId	953809722117							

2.Applied Subjects Information :										
Sem	Sub Code	Subject Name	TW	INSEM	ONLIN E	TH	PR	OR	GRD	TUT
6	314451	COMPUTER NETWORKS& SECURITY	Y	Y	-	Y	-	Υ	-	N
6	314452	DATA SCIENCE AND BIG DATA ANALYTICS	Y	Y	-	Υ	Υ	-	-	N
6	314453	WEB APPLICATION DEVELOPMENT	-	Y	-	Υ	-	-	-	N
6	314454C	CLOUD COMPUTING	-	Y	-	Υ	-	-	-	N
6	314455	INTERNSHIP	Υ	-	-	-	-	-	-	N
6	314459B	LEADERSHIP AND PERSONALITY DEVELOPMENT 314459B	-	-	-	-	-	-	Y	N
6	314460	LABORATORY PRACTICE-II	Y	-	-	-	Υ	-	-	N



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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