



Savitribai Phule Pune University



Examination Form Mar/Apr 2025

Form No :1113-00449

Course Name T.E.(2019 PAT.)(ELECTRONICS & TELECOM)

PRN.	72230539H	Eligibility No.	12022187565	Total Fee to be Paid:	1000
PUNCODE	CEGP011130	College	(22) Army 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		NEPAL SINGH	
Name of the Applicant's Mother		RAJ KANWAR	
Address for Communication		Plot no 4 k no 220/143 Roopnagar Digari Jodhpur	
Email-ID	nepalsss007@gmail.com	Contact Number	9381534195
Gender	Male	Category	OPEN
Divyang/Learning Disable	No	Medium of Instruction	English
ABCIId	308159409495		

2.Applied Subjects Information :

Sem	Sub Code	Subject Name	TW	INSEM	ONLINE	TH	PR	OR	GRD	TUT
6	304191DB	PRINCIPLES OF HUMAN RESOURCE MANAGEMENT 304191DB	-	-	-	-	-	-	Y	N
6	304192	CELLULAR NETWORKS	-	Y	-	Y	-	Y	-	N
6	304193	PROJECT MANAGEMENT	-	Y	-	Y	-	-	-	N
6	304194	POWER DEVICES & CIRCUITS	-	Y	-	Y	Y	-	-	N
6	304195E	NETWORK SECURITY	-	Y	-	Y	Y	-	-	N
6	304199	INTERNSHIP**	Y	-	-	-	-	-	-	N
6	304200	MINI PROJECT	Y	-	-	-	-	Y	-	N



Savitribai Phule Pune University



Examination Form Mar/Apr 2025

Form No :1113-00449

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