



Savitribai Phule Pune University



Examination Form Winter Session 2025

Form No :1427-03693

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

PRN.	72309446C	Eligibility No.	12023254737	Total Fee Paid:	₹.1360
PUNCODE	CEGP014270	College	(24) Dr.D.Y.Patil Institute of Technology		

Instructions to the Candidate:

- 1.This Exam form along with the payment receipt 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 as valid, **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		VETAL GAURAV APPARAO	
Name of the Applicant's Mother		VETAL MEENA APPARAO	
Address for Communication		sant tukaram nagar , pimpri , pune.	
Email-ID	<i>gauravvetal7@gmail.com</i>	Contact Number	9834158658
Gender	Male	Category	EWS
Divyang/Learning Disable	No	Medium of Instruction	English
ABCId	999816094700		

2.Applied Subjects Information :

Sem	Sub Code	Subject Name	TW	INSE M	ONLI NE	TH	PR	OR	GRD	TUT
5	304181	DIGITAL COMMUNICATION	-	Y	-	Y	-	-	-	N
5	304182	ELECTROMAGNETIC FIELD THEORY	Y	Y	-	Y	-	-	-	N
5	304183	DATABASE MANAGEMENT	-	Y	-	Y	-	-	-	N
5	304184	MICROCONTROLLERS	-	Y	-	Y	-	-	-	N
5	304185D	COMPUTER NETWORKS (ELECTIVE - I)	-	Y	-	Y	-	-	-	N
5	304186	DIGITAL COMMUNICATION LAB	-	-	-	-	Y	-	-	N
5	304187	DATABASE MANAGEMENT LAB	-	-	-	-	-	Y	-	N
5	304188	MICROCONTROLLER LAB	-	-	-	-	Y	-	-	N
5	304189D	COMPUTER NETWORKS	-	-	-	-	Y	-	-	N
5	304190	SKILL DEVELOPMENT	Y	-	-	-	-	-	-	N
5	304191A	DEVELOPING SOFT SKILLS AND PERSONALITY	-	-	-	-	-	-	Y	N
5	310269	COMPUTATIONAL STATISTICS (HONOURS)	-	Y	-	Y	Y	-	-	N



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3. Fee Details

Fee Type	Fee Amount
Form Fee	40
Exam Fee	820
Passing Certificate Fee	0
CAP Fee	175
Statement Of Marks Fee	175
Project Fee/Dissertation	0
EVS Fee	0
Internal Marks Fee	150
Departmental Fee	0
Transcript Fee	0
Late Fee	0
Fine Fee	0
Total Fee to Be Paid:	1360

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