



# Savitribai Phule Pune University



Examination Form Oct/Nov 2017

Form No :1303-01062

**Course Name** M.Sc.[Computer Science](Rev.2013)

PRN.	Fresh	Eligibility No.		Total Fee to be Paid:	1685
PUNCODE	CAAP013030	College	() Arihant College of Arts Commerce and Science		

## 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.

To,

**The Controller of Examinations, Savitribai Phule Pune University, Pune-411 007.**

Madam/Sir, I request permission to present myself at the examination courses, mentioned below

## 1.Personal Details:

Name of the Applicant		RANA RUPALI LALITKUMAR	
Name of the Applicant's Mother		ANITA LALITKUMAR RANA	
Address for Communication		C5, PURUSHOTTAM VIHAR, NEAR KUNDAN GARDEN, BANER ROAD, BANER PUNE - 411045	
Aadhaar Number		942475464159	
Email-ID	rupali.mycareer@gmail.com	Contact Number	9021378215
Gender	Female	Category	OPEN
Is Physically Disabled	No	Medium of Instruction	English

## Applied Subjects Information :

Year/ Sem	Sub Code	Subject Name	Internal	External/ Theory	Grade / Online	Practical / Session al	Project	Oral
1	101	(CS-101) PRINCIPLES OF PROGRAMMING LANGUAGES	Y	Y	N	N	N	N
1	102	(CS-102) ADVANCED NETWORKING	Y	Y	N	N	N	N
1	103	(CS-103) DISTRIBUTED DATABASE CONCEPTS	Y	Y	N	N	N	N
1	104	(CS-104) DESIGN & ANALYSIS OF ALGORITHMS	Y	Y	N	N	N	N
1	105	(CS-105) NETWORK PROGRAMMING	Y	Y	N	N	N	N
1	191	HUMAN RIGHTS - I	Y	N	N	N	N	N
1	192	INTRODUCTION TO CYBER SECURITY - I	Y	N	N	N	N	N



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3. Fee Details		
Fee Type	Fee Amount	Remarks
Form Fee	30	
Exam Fee	1280	
Passing Certificate Fee	0	
CAP Fee	135	
Statement Of Marks Fee	135	
Project Fee/Dissertation	0	
EVS Fee	0	
Internal Marks Fee	105	
Departmental Fee	0	
Late Fee	0	
Fine Fee	0	
<b>Total Fee to Be Paid:</b>	<b>1685</b>	

## 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