

**Address** 

State

Tehsil

**Pincode** 

## REENA MEHTA COLLEGE OF ARTS, SCIENCE, COMMERCE AND MANAGEMENT STUDIES

PLOT NO. 574, 5, 150 FEET RD, OPP. MAXUS MALL, BHAYANDAR WEST,

Maharashtra

THANE

401107

Application for Admission to SY BSC IT SEMESTER III Session 2024-2025 Application No.:



#### **Applicant's Personal Details**

Name of the Student	Surname	First name	Father's name	
	YUSUF ZAI	SALMAN	SAEED AHMED	
Mother's Name	SHEHNAZ	SHEHNAZ		
Student Name(HINDI)	युसूफ जै सलमान सईद a	hmed		
Date of Birth	26/08/2004	Place Of Birth	VALSAD	
Birth State	gujarat	Birth District		
Birth Tehsil		Voter Id		
Marital Status	UNMARRIED	Blood Group	A+	
Religion	MUSLIM	Gender	MALE	
Nationality	INDIAN	Aadhaar card Number	343174827034	
Mother Tongue	HINDI	Employment Status	Unemployed	
NCC/NSS	NO	Sub Caste	Muslim	
Caste Category	Open/General	PRN Number	2023016400014631	
Enrollment Number		Is Orphan	NO	
Handicap		Udise No.		
Father's/Husband's Name	SAEED AHMED			
Occupation	EMPLOYEE Gross Annual Income 500,000		me 500,000	
Mobile	8976163135	<u> </u>		
Office Address				
Address of Correspondence				
Address	404, Asmita ascon ac	404, Asmita ascon acres-1, near station road, Opp.asmita house, Mira road east		
State	Maharashtra	District	Thane	
	THANE	City/Town/Village	MUMBAI	
Tehsil	1177.11			

404, Asmita ascon acres-1, near station road, Opp.asmita house, Mira road east

**District** 

City/Town/Village

Thane

MUMBAI

Contact Details			
Student Phone	7738597185	Parent's Phone	
Mobile	8976202167		
Email Id	salmanyusufzai009@gmail.com		
Payment mode	Online		

Transaction ID	Amount	Resp. no.	Transaction Date
7193606	350.00	FGUPIUF2556C5829F	16/05/2024

#### **Last Exam Details**

Lust Exam Details			
Exam Name			
Name of Board/ University			
Month		Year	
Roll Number		Division	
Marks Obtained		Maximum Marks	
Percentage		Result	

### **Exam Details**

	Sr.No.	Course Name	SGPA	CGPA
	1	FY BSC IT SEMESTER I	8.30	8.30
ſ	2	FY BSC IT SEMESTER II	9.20	8.75

Sr.No.	Subject Name	Subject Type			
Group N	Group Name :				
1	PYTHON PROGRAMMING	COMPULSORY			
2	PYTHON PROGRAMMING PRACTICAL	COMPULSORY			
3	DATA STRUCTURES	COMPULSORY			
4	DATA STRUCTURES PRACTICAL	COMPULSORY			
5	COMPUTER NETWORKS	COMPULSORY			
6	COMPUTER NETWORKS PRACTICAL	COMPULSORY			
7	APPLIED MATHEMATICS	COMPULSORY			
8	MOBILE PROGRAMMING PRACTICAL	COMPULSORY			

Decl	aratio	n hv	Stu	lent
	ai ativi	1 22	JLUI	a Ciliu

Date: 16/05/2024

I hereby declare that, I have read the rules related to admission and the information filled in by me in this form is accurate and true to the best of my knowledge. I will be responsible for any discrepancy, arising out of the form signed by me and I undertake that, in absence of any document the final admission will not be granted and / or admission will stand cancel.



Signature of the Student

# Declaration by Guardian / Parent

I have permitted my son / daughter / ward to join your college. The information supplied by him / her is correct to the best of my knowledge. I have acquainted myself with the rules and fees, dues to my son / daughter / ward and see that he / she observes.

Date: 16/05/2024 Signature of the Guardian/Parent

For College / Institute Use Only

Designation	Remarks / Particulars /Recommendations	Signature and Date
Admission Clerk		
Admission Committee		
Accountant / cashier		
Registrar/Office superintendent		

REMARK OF THE ADMISSION COMMITTEE			
May be admitted to Class	Section		
May be Rejected			
Last date of payment of fees			
Admission may be cancelled if the fees are not paid by this da	ie.		
Principal	Signature of Admission Committee		
Other Details			