



Savitribai Phule Pune University



Examination Form Oct/Nov 2020

Form No :1044-00766

Course Name B.E.(2015 PAT.)(INFORMATION TECHNOLOGY)

PRN.	71828691L	Eligibility No.	12017008028	Total Fee to be Paid:	1000
PUNCODE	CEGP010440	College	(5) PUNE INSTITUTE OF COMPUTER TECHNOLOGY PUNE.		

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		DHOPAVKAR AMOD MAKARAND	
Name of the Applicant's Mother		APARNA	
Address for Communication		PICT COLLEGE BEHIND BHARTI VIDYAPEETH DHANKAWADI	
Email-ID	amoddhopavkar2@gmail.com	Contact Number	9881497495
Gender	Male	Category	OPEN
Divyang/Learning Disable	No	Medium of Instruction	English

Applied Subjects Information :

Sem	Sub Code	Subject Name	TW	INSEM	ONLINE	TH	PR	OR	GRD
7	414453	INFORMATION AND CYBER SECURITY	-	Y	-	Y	-	-	-
7	414454	MACHINE LEARNING AND APPLICATIONS	-	Y	-	Y	-	-	-
7	414455	SOFTWARE DESIGN AND MODELING	-	Y	-	Y	-	-	-
7	414456E	BUSINESS ANALYTICS AND INTELLIGENCE	-	Y	-	Y	-	-	-
7	414457B	SOFT COMPUTING	-	Y	-	Y	-	-	-
7	414458	COMPUTER LABORATORY-VII	Y	-	-	-	Y	-	-
7	414459	COMPUTER LABORATORY-VIII	Y	-	-	-	-	Y	-
7	414460	PROJECT PHASE-I	-	-	-	-	-	Y	-
7	414461D	STATISTICAL LEARNING MODEL USING R.	-	Y	-	-	-	-	Y



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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