



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN:

2017016400844697

Eligibility Status:

Eligible

Examination form No.:

055458



Division/Section:

Roll No.:

*Panigrahi*

Instruction Medium:

Nationality:

India

### Student's Personal Information

Student's Name: **LIZALIN BIRANCHI PANIGRAHI**

Mother's Name: REWATI

Gender: Female

Name in Vernacular Language: लिजलीन बिरंछि पाणिग्रही

Address: R.No.11 Ravi Patil Chawl Ganesh nagar Agason Road Vikas Mhatre Gate

City: MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400612

Telephone no.:

Mobile no: 918097280492

Email : lizalingrahi@gmail.com

DOB: Feb 10, 1999

Category: Open

Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16)

Exam Event: Nov-2019

Seat No: 7423018 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee

Exam Form Fee

Exam Form Late Fee

Exam Form Super Late Fee

Examination Fees

Mark Statement Fee

Total:

**Payment Details:**

Amount Received:

College Receipt No. and Date:

DD No:

MICR No:

DD Date:

Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

**Declaration by Principal/HOD/Chairperson**

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:

Date:

College Staff Signature

Seal and Signature of  
Principal/HOD/Chairperson



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PRN: 2018016402137203	Eligibility Status: Eligible	Examination form No.: 055459 	Division/Section: 2	Roll No.: 102	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH KHUSHI MANISH</b>	Mother's Name: RAKHI	Gender: Female
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Name in Vernacular Language: शाह खुशी मनिष

Address: ROOM NO 25 RAJ GANGA BUILDING KOPAR ROAD NEAR AISHWARYA BAR

City: DOMBIVALI WEST, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202

Telephone no.:	Mobile no: 918657209944	Email : khushshah0907@gmail.com
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DOB: Jul 10, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423787 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Apmujumdar*

PRN: 2018016402137211	Eligibility Status: Provisional	Examination form No.: 055460 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: <b>APOORVA MUJUMDAR</b>	Mother's Name: LAKSHMI	Gender: Female

Name in Vernacular Language: अपूर्वा प मुजुमदार

Address: PRAKASHS MUJUMDAR C2-204 , SHUBHARAMBH PHASE -3 MANPADA , THANE - WEST

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400610

Telephone no.: Mobile no: 919820460842 Email : psmujumdar@yahoo.com

DOB: Apr 20, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7424036 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

**Declaration by Principal/HOD/Chairperson**

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Pratik*

PRN: 2018016402137273	Eligibility Status: Eligible	Examination form No.: 055461 	Division/Section: 2	Roll No.: 106
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>SHAH PRATIK MOHISH</b>	Mother's Name: MANISHA	Gender: Male
Name in Vernacular Language: SHAH PRATIK MOHISH		
Address: 16 VITHAL MATRE BUILDING KOPAR RD OPP. AMBA BHAVANI MANDIR DOMBIVLI WEST		
City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202		
Telephone no.:	Mobile no: 917208182506	Email : shah02pratik@gmail.com
DOB: Jun 02, 2001	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)		Exam Event: Nov-2019
		Seat No: 7423788 (Status: Pass)
Exam form appearance type: Fresher		

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

**Declaration by Principal/HOD/Chairperson**

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Rakesh*

PRN: 2018016402137281	Eligibility Status: Eligible	Examination form No.: 055462 	Division/Section: 1	Roll No.: 45
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>JHA RAKESHKUMAR SANJAY</b>	Mother's Name: ASHADEVI	Gender: Male
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Name in Vernacular Language: ज्ञा रकेशकुमार संजय

Address: NEAR GAYATRI VIDYA MANDIR 10 DESAI CHAWL, PIPELINE TULSHETPADA, GAONDEVI ROAD

City: BHANDUP W, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078

Telephone no.:	Mobile no: 917045886962	Email : rakeshsanj4@gmail.com
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DOB: Aug 04, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423785 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402137346	Eligibility Status: Eligible	Examination form No.: 055463 	Division/Section: 2	Roll No.: 119
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SYED BUSHRABEGUM ISMAIL</b>	Mother's Name: SHAMEEM	Gender: Female
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Name in Vernacular Language: सईद बुशराबेगम इस्माईल

Address: SHER KHAN COMPOUND NITYANAND NAGAR ABDUL LATIF CHAWL ROOM NO. 1 GHATKOPAR WEST

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086

Telephone no.: Mobile no: 918879530625 Email : sbushra4488@gmail.com

DOB: Oct 11, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423790 (Status: ATKT)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

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Place: **Vidyavihar**  
Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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P.M.S.

PRN: 2018016402137354	Eligibility Status: Eligible	Examination form No.: 055464 	Division/Section: 2	Roll No.: 95
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAVLA PARSHVA MANSUKH</b>	Mother's Name: VANITA	Gender: Male
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Name in Vernacular Language: श्रीमान सावला पार्श्व मनसुख वनिता

Address: 5/2, BILVA KUNJ CHS, M.G.ROAD, OPP. RAILWAY STATION, DOMBIVLI ( WEST )-421202.

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202

Telephone no.: 2484022 Mobile no: 918879588784 Email : parshvasavla2014@gmail.com

DOB: May 04, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423786 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:

Student's Signature

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402137427	Eligibility Status: Eligible	Examination form No.: 055465 	Division/Section: 2	Roll No.: 132	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>VISHARIA PARTH DILIP</b>	Mother's Name: NEHA	Gender: Male
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Name in Vernacular Language: पार्थ

Address: A-2 SHEETAL APT J M ROAD BHANDUP WEST

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078

Telephone no.:	Mobile no: 919870222000	Email : parthvisharia@gmail.com
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DOB: Apr 08, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423792 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402137482	Eligibility Status: Eligible	Examination form No.: 055466 	Division/Section: 1	Roll No.: 12
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>CHHADVA VANSH BHARAT</b>	Mother's Name: KARUNA	Gender: Male
Name in Vernacular Language: छडवा वंश भारत		
Address: 3/33, station view building chembur		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071		
Telephone no.:	Mobile no: 917977080546	Email : vanshchhadva9495@gmail.com
DOB: Sep 19, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422752 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: 2018016402137547	Eligibility Status: Eligible	Examination form No.: 055467 	Division/Section: 1	Roll No.: 03	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>BHAGAT PRIYANSH MUKESH</b>	Mother's Name: URMILA	Gender: Male
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Name in Vernacular Language: प्रियांश

Address: B-1104, SUNDEW SWASTIK PARK, NAHUR VILLAGE ROAD BHANDUP WEST, MUMBAI-400078

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078

Telephone no.: Mobile no: 919930648687 Email : priyanshbhagat987@gmail.com

DOB: Mar 20, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7422742 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Handwritten signature*

PRN: 2018016402137571	Eligibility Status: Eligible	Examination form No.: 055468 	Division/Section: 1	Roll No.: 38
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>JAIN FALGUNI RAMESH</b>	Mother's Name: ANITA	Gender: Female
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Name in Vernacular Language: जैन फाल्गुनी RAMESH

Address: PLOT NO 8 SURYODAYA BLDG ROOM NO 22 SION ROAD NO 1 SION WEST

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400022

Telephone no.: 24073867	Mobile no: 919819169145	Email : hjain1180@gmail.com
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DOB: Nov 29, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423784 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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Application Form for Examination of Summer Session 2021 event.

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*Gandhi*

PRN: 2018016402137605	Eligibility Status: Eligible	Examination form No.: 055469 	Division/Section: 1	Roll No.: 23
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GANDHI HETVI DINESH</b>	Mother's Name: URVI	Gender: Female
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Name in Vernacular Language: हेतवी

Address: C/417 Rajlegacy, L.B.S Marg, Opp Suryanagar, Vikhroli West Maharashtra, 400083

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083

Telephone no.:	Mobile no: 919757281260	Email : hetvigandhi5@gmail.com
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DOB: Feb 19, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422763 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ; Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ; Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ; Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ; Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ; Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ; Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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Prathvi

PRN: 2018016402137652	Eligibility Status: Eligible	Examination form No.: 055470 	Division/Section: 2	Roll No.: 114
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHETTY PRATHVI VASANTHA</b>	Mother's Name: PRATIBHA	Gender: Female
--	-------------------------	----------------

Name in Vernacular Language: शेटी पृथ्वी वसंथा

Address: 12/2, DEVI CHAYA BLDG. KISAN NAGAR NO. 2, ROAD NO 16 WAGLE ESTATE, THANE WEST

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604

Telephone no.:	Mobile no: 918425031403	Email : shettyprathvi38@gmail.com
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DOB: Jun 06, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423789 (Status: ATKT)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

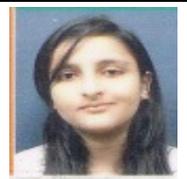
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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: 2018016402137725	Eligibility Status: Eligible	Examination form No.: 055471 	Division/Section: 2	Roll No.: 125
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>TIWARI SONAM PRADEEPKUMAR</b>	Mother's Name: SAVITA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: तिवारी सोनम प्रदीपकुमार

Address: 295/6027 SAMTA COLONY NEAR BHAKTI DHAM MANDIR PANTNAGAR

City: MUMBAI SUBURBAN, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075

Telephone no.:	Mobile no: 917710907389	Email : vivektiwari12121@gmail.com
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DOB: Jul 04, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423791 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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Shivani

PRN: 2018016402137733	Eligibility Status: Eligible	Examination form No.: 055472 	Division/Section: 2	Roll No.: 127
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>TUKLIA SHIVANI RAKESH</b>	Mother's Name: KANCHAN TUKLIA	Gender: Female
Name in Vernacular Language: तुकलीया शिवानी राकेश		
Address: 3, MISHRA CHAWL, KAJUPADA PIPE LINE KURLA		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072		
Telephone no.:	Mobile no: 917045245544	Email : SHIVANITUKLIA@GMAIL.COM
DOB: Aug 16, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423866 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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PRN: 2018016402137764	Eligibility Status: Eligible	Examination form No.: 055473 	Division/Section: 2	Roll No.: 129	
Instruction Medium:			Nationality: India		

### Student's Personal Information

Student's Name: <b>VARIA NIRALI HARESH</b>	Mother's Name: RANJAN	Gender: Female
Name in Vernacular Language:वरिया निराळी हरेश		
Address: ROOM NO.6636, BLDG. NO.285 SAMTA COLONY PANT NAGAR		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075		
Telephone no.:	Mobile no: 919869924902	Email : niralivaria9@gmail.com
DOB: Oct 02, 2000	Category: Reserved (OBC)	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)		Exam Event: Nov-2019
		Seat No: 7423868 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		





# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: 2018016402137845	Eligibility Status: Eligible	Examination form No.: 055475 	Division/Section: 1	Roll No.: 43
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>JAIN VIDHI DILIP</b>	Mother's Name: REKHA	Gender: Female
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Name in Vernacular Language: विधी
-----------------------------------

Address: 14 pawshe building kopar cross road
--

City: MUMBAI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202
--

Telephone no.:	Mobile no: 919619085745	Email : rockingvidhi39@yahoo.com
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DOB: Mar 02, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423802 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN:  
2018016402137861

Eligibility Status:  
Eligible

Examination form No.:  
055476

Division/Section:  
2

Roll No.:  
110

Instruction Medium: \_\_\_\_\_ Nationality: India

### Student's Personal Information

Student's Name: **SHAIKH FIZA ABDUL** Mother's Name: FARIDA Gender: Female

Name in Vernacular Language: शेख फिजा अब्दुल

Address: ROOM NO-1, USMAN CHAWL SNEHA VIKAS SOCEITY PARK SITE, VIKHROLI WEST

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400079

Telephone no.: \_\_\_\_\_ Mobile no: 919833816807 Email : shaikhfiza1413@gmai.com

DOB: Jul 14, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423853 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: \_\_\_\_\_ College Receipt No. and Date: \_\_\_\_\_

DD No: \_\_\_\_\_ MICR No: \_\_\_\_\_ DD Date: \_\_\_\_\_ Bank: \_\_\_\_\_

Center Preference (Code/Name): \_\_\_\_\_

Venue Preference (Code/Name): \_\_\_\_\_

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date: \_\_\_\_\_  
Student's Signature

**Declaration by Principal/HOD/Chairperson**  
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402137876	Eligibility Status: Eligible	Examination form No.: 055477 	Division/Section: 2	Roll No.: 117
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SONAWARIYA JUGAL RAJESHKUMAR</b>	Mother's Name: HARSHA	Gender: Male
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Name in Vernacular Language: सोनावरिया जुगल राजेशकुमार

Address: BK NO 1320 R NO 11 STATION ROAD NEAR SWAGAT MEDICAL STORE SECTION 32

City: ULHASNAGAR, Taluka: Ulhasnagar, District: Thane, State: Maharashtra, PIN: 421004

Telephone no.:	Mobile no: 919503802011	Email : jugalsonawariya2000@gmail.com
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DOB: Aug 15, 2000	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423859 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Bhakti*

PRN: 2018016402137903	Eligibility Status: Eligible	Examination form No.: 055478 	Division/Section: 1	Roll No.: 13
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>CHHEDA BHAKTI KAILESH</b>	Mother's Name: JIGNA	Gender: Female
--	----------------------	----------------

Name in Vernacular Language: छेद भक्ती कैलाश

Address: J-11, ROOM NO 7, BHATTWADI, BARVE NAGAR GHATKOPAR WEST, MUMBAI

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084

Telephone no.: 22	Mobile no: 919594604200	Email : 1082000chheda@gmail.com
-------------------	-------------------------	---------------------------------

DOB: Aug 10, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422753 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Prachi*

PRN: 2018016402137934	Eligibility Status: Eligible	Examination form No.: 055479 	Division/Section: 1	Roll No.: 21
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: <b>DOSHI PRACHI LALIT</b>	Mother's Name: MEENA	Gender: Female
Name in Vernacular Language: Prachi		
Address: B/4, Nav Trilok bldg Sangitawadi Laxmi Nerurkar Road, DOMBIVLI EAST		
City: Dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201		
Telephone no.:	Mobile no: 918425051408	Email : prachidoshi015@gmail.com
DOB: May 15, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422761 (Status: Pass)
Exam form appearance type: Fresher		

<b>Paper Details:</b> Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )			
SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
Center Preference (Code/Name):		Bank:
Venue Preference (Code/Name):		

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

<b>Declaration by Principal/HOD/Chairperson</b>		
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.		
Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402137965	Eligibility Status: Eligible	Examination form No.: 055480 	Division/Section: 2	Roll No.: 83	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PATHARE SIDDHESH ANIL</b>	Mother's Name: AMITA	Gender: Male
--	----------------------	--------------

Name in Vernacular Language: पाठारे सिद्धेश अनिल
--

Address: PATHARE COMP. NEAR POST OFFICE, BHIWANDI
---

City: BHIWANDI, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421302
--

Telephone no.:	Mobile no: 917507790700	Email : siddheshpathare2652000@gmail.com
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DOB: May 26, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423830 (Status: Pass)
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Exam form appearance type: Fresher
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<b>Paper Details:</b> Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )
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SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

Student's Signature
---------------------

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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*Anmol*

PRN: 2018016402137973	Eligibility Status: Eligible	Examination form No.: 055481 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: <b>BHINDE ANMOL MANOJ</b>	Mother's Name: HANSA	Gender: Female
Name in Vernacular Language: Anmol		
Address: Block 1/5 backside , Jai Bhavani Marg Mulund colony ,Mulund West ,Mumbai 400080		
City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080		
Telephone no.:	Mobile no: 919167498865	Email : anmol.thakkar218@gmail.com
DOB: Aug 21, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422747 (Status: Pass)
Exam form appearance type: Fresher		

Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )			
SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
Center Preference (Code/Name):		Bank:
Venue Preference (Code/Name):		

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

<b>Declaration by Principal/HOD/Chairperson</b>		
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.		
Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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US-ARMY



PRN: 2018016402137981	Eligibility Status: Eligible	Examination form No.: 055482 	Division/Section: 1	Roll No.: 40
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>JAIN NIDHIKA DIGVIJAY</b>	Mother's Name: NIRMALA	Gender: Female
Name in Vernacular Language: जैन निधिका दिग्विजय		
Address: 14/498 WADIA ESTATE BAIL BAZAR		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070		
Telephone no.:	Mobile no: 918454033665	Email : nidhu2702@gmail.com
DOB: Feb 27, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423799 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Naziya*

PRN: 2018016402138013	Eligibility Status: Eligible	Examination form No.: 055483 	Division/Section: 1	Roll No.: 49
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>KHAN NAZIYA ASHRAF</b>	Mother's Name: JAHANARA	Gender: Female
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Name in Vernacular Language: खान नाझिया अश्रफ

Address: NANI BAI ABDUL AZIZ CHAWL R NO 2 NAUPADA KURLA W

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070

Telephone no.:	Mobile no: 919322519472	Email : naziya0902@gmail.com
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DOB: Feb 09, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423807 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402138036	Eligibility Status: Eligible	Examination form No.: 055484 	Division/Section: 1	Roll No.: 52
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>KUNDER SANDEKSHA JAYANT</b>	Mother's Name: SUJATA	Gender: Female
Name in Vernacular Language: संदीक्षा जयंत कुंडीत		
Address: SHANESHWAR MANDIR 7 CHAWL NO 2 AMINABAI CHAWL MAULANA COMPOUND GAMDEVI ROAD GHATKOPAR WEST MUMBAI		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086		
Telephone no.:	Mobile no: 917738261404	Email : sandeeksha.kunder65@gmail.com
DOB: Dec 04, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423810 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Amish*

PRN: 2018016402138044	Eligibility Status: Eligible	Examination form No.: 055485 	Division/Section: 2	Roll No.: 123
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>THAKKER AMISH NILESH</b>	Mother's Name: MEENA	Gender: Male
Name in Vernacular Language: amish		
Address: A-301 sanskar jyoat gupte road opp vailankanni school dombivli(west)		
City: mumbai, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202		
Telephone no.:	Mobile no: 919321119999	Email : amishthakker666@gmail.com
DOB: Nov 10, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423863 (Status: Pass)
Exam form appearance type: Fresher		

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Harshali*

PRN: 2018016402138052	Eligibility Status: Eligible	Examination form No.: 055486 	Division/Section: 2	Roll No.: 84
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PAWAR HARSHALI GANESH</b>	Mother's Name: SUNITA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: पवार हर्षली गणेश

Address: D/09 MAHALAXMI CHS NO 2 ,SHIVAJI NAGAR ASALPHA VILLAGE GHATKOPAR WEST

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084

Telephone no.:	Mobile no: 919322781077	Email : ganesh_s1432@rediffmail.com
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DOB: Jan 16, 2001	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423831 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402138083	Eligibility Status: Provisional	Examination form No.: 055487 	Division/Section: 2	Roll No.: 116
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SOMAIYA NEEL RAJESH</b>	Mother's Name: HINA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: Somaiya Neel Rajesh
--

Address: 602, Sunrise Building, Yogi hills, Mulund (west)
---

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080
--

Telephone no.: 240335	Mobile no: 919974690343	Email : neelrajsomaiya@gmail.com
-----------------------	-------------------------	----------------------------------

DOB: Aug 08, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423858 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	<p>Student's Signature</p>

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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#asti

PRN: 2018016402138125	Eligibility Status: Eligible	Examination form No.: 055488 	Division/Section: 1	Roll No.: 06
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>BHANUSHALI HASTI KANTIBHAI</b>	Mother's Name: ALPA	Gender: Female
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Name in Vernacular Language: हस्ती

Address: 101, Shiv Ashish M.G. Road Mulund West

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080

Telephone no.:	Mobile no: 918291680062	Email : hasti.bhanushali.2409@gmail.com
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DOB: Sep 24, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422745 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402138156	Eligibility Status: Eligible	Examination form No.: 055489 	Division/Section: 2	Roll No.: 97	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAWANT VAISHNAVI RAJENDRA</b>	Mother's Name: RACHITA	Gender: Female
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Name in Vernacular Language: सावंत वैष्णवी राजेंद्र

Address: C-11, Room No 6 S.G.Barve nagar Ghatkopar west Bhatwadi

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400084

Telephone no.:	Mobile no: 918652511654	Email : siddheshsawant509@gmail.com
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DOB: Aug 27, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423843 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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Dharini

PRN: 2018016402138172	Eligibility Status: Eligible	Examination form No.: 055490 	Division/Section: 2	Roll No.: 118
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>SONI DHARINI LAHERCHAND</b>	Mother's Name: VANITA	Gender: Female
Name in Vernacular Language: सोनी धारीनी लहेरचंद		
Address: A/304, Jay Shreenath Krupa Bldg., Mahatma Phule Road.		
City: Dombivali, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202		
Telephone no.:	Mobile no: 919594128993	Email: dharinisoni123@gmail.com
DOB: Jun 17, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423860 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ];Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ];Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ];Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ];Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ];Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ];Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402138187	Eligibility Status: Eligible	Examination form No.: 055491 	Division/Section: 1	Roll No.: 02
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>BHADRA TRISHLA VINESH</b>	Mother's Name: HEENA	Gender: Female
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Name in Vernacular Language: त्रिशला विनेश भद्रा
--

Address: A / 1004, mukti chs, mhada colony road mulund east
---

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400081
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Telephone no.:	Mobile no: 919322284638	Email : trishlabhadra123@gmail.com
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DOB: Apr 19, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422741 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

<b>Declaration by Principal/HOD/Chairperson</b> This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.
---

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Author*

PRN: 2018016402138253	Eligibility Status: Eligible	Examination form No.: 055492 	Division/Section: 1	Roll No.: 11
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>CHETTUR CONJITHA SANTHOSH</b>	Mother's Name: OMANA	Gender: Female
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Name in Vernacular Language: conjitha
---------------------------------------

Address: A-304, 3rd floor, Allan Villa, Kalina Church Rd, Santacruz (E), Mumbai. 29 Kalina Church Road, Santacruz (E),
--

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400029
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Telephone no.: 26655375	Mobile no: 918291505530	Email : conjithasanthosh@gmail.com
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DOB: Mar 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422751 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

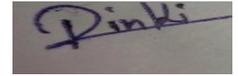
<http://mum.digitaluniversity.ac/>

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PRN: 2018016402138276	Eligibility Status: Eligible	Examination form No.: 055493 	Division/Section: 1	Roll No.: 56
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: MAURYA RINKI PARASNATH	Mother's Name: GEETA	Gender: Female
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Name in Vernacular Language: RINKI
------------------------------------

Address: MANKHURD MANDALA INDRA NAGAR 30 FEET ROAD MUMBAI 400043
--

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400043
---

Telephone no.:	Mobile no: 918850840867	Email : anjani.9819maurya@gmail.com
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DOB: Jun 01, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423814 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	<p>Student's Signature</p>

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402138326	Eligibility Status: Eligible	Examination form No.: 055494 	Division/Section: 2	Roll No.: 128
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>VARGHESE ANN MARIA SABU</b>	Mother's Name: AGNES	Gender: Female
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Name in Vernacular Language: VARGHESE ANN MARIA SABU
--

Address: BLDG NO 9, FLAT NO. 10, ARVIND NAGAR, KALINA santacruz east mumbai
---

City: Mumbai, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400029
---

Telephone no.:	Mobile no: 919821598194	Email : annvarg@yahoo.com
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DOB: Jul 31, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423867 (Status: Pass)
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Exam form appearance type: Fresher
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**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: 2018016402138373	Eligibility Status: Eligible	Examination form No.: 055495 	Division/Section: 1	Roll No.: 39
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>JAIN HARSHIT DHARMENDRA</b>	Mother's Name: ANITA	Gender: Male
Name in Vernacular Language: जैन हर्षित धर्मेंद्र		
Address: A-202, DAMALE APARTMENT TEMBHI NAKA V.S. ROAD, THANE WEST		
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601		
Telephone no.:	Mobile no: 919920983222	Email : harshjain.1816@gmail.com
DOB: Oct 18, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423798 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402138415	Eligibility Status: Eligible	Examination form No.: 055496 	Division/Section: 2	Roll No.: 92
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAKRANI SAURABH SUDHIR</b>	Mother's Name: DARSHANA	Gender: Male
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Name in Vernacular Language: सकरानी सौरभ सुधिर

Address: BLOCK NO 122/123B NEAR MUNCIPAL GARDEN HINDUSTAN CHOWK MULUND COLONY

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400082

Telephone no.:	Mobile no: 919699212626	Email : saurabsakrani06@gmail.com
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DOB: Feb 06, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423839 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Patel*

PRN: 2018016402138423	Eligibility Status: Eligible	Examination form No.: 055497 	Division/Section: 2	Roll No.: 82
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: <b>PATEL SHEETAL PREMJI</b>	Mother's Name: MANJULA	Gender: Female

Name in Vernacular Language: शीतल प्रेमजी पटेल

Address: Flat no. 1001, B-wing Ganaraj Heights Behind vikas complex

City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601

Telephone no.: Mobile no: 918976949493 Email : mittal.1999.mp@gmail.com

DOB: Dec 31, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423829 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:  
Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Hiral-G*

PRN: 2018016402138454	Eligibility Status: Eligible	Examination form No.: 055498 	Division/Section: 1	Roll No.: 28
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GORI HIRAL RAMESH</b>	Mother's Name: HEMLATA	Gender: Female
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Name in Vernacular Language: गौरी हिरल रमेश

Address: ROOM NO.2 ANJANI KUMAR CHAWL NO.1, PARSIWADI GHATKOPAR WEST

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086

Telephone no.:	Mobile no: 919322624862	Email : hiralbhanushali666@gmail.com
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DOB: Apr 13, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422768 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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Satyam

PRN: 2018016402138527	Eligibility Status: Eligible	Examination form No.: 055499 	Division/Section: 1	Roll No.: 33
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GUPTA SATYAM SUNIL</b>	Mother's Name: REKHA	Gender: Male
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Name in Vernacular Language: गुप्ता सत्यम सुनील
---

Address: OPP. MUNICIPAL SCHOOL SHREE KRISHNA NAGAR R.H.B. ROAD P.K. ROAD
--

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080
--

Telephone no.:	Mobile no: 918108686568	Email : satyamgta201@gmail.com
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DOB: Aug 26, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422773 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*(Signature)*

PRN: 2018016402138535	Eligibility Status: Eligible	Examination form No.: 055500 	Division/Section: 1	Roll No.: 59
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>MEHTA VRUSHALI NIRAV</b>	Mother's Name: JALPA	Gender: Female
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Name in Vernacular Language: MEHTA VRUSHALI NIRAV
---

Address: 1C -191/192, Kalpataru Aura, LBS Marg, Ghatkopar West, Mumbai
--

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400086
--

Telephone no.:	Mobile no: 918108551545	Email : vrushalinmehta@gmail.com
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DOB: Jul 28, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423817 (Status: Pass)
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Exam form appearance type: Fresher
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**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	<p>Student's Signature</p>

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402138632	Eligibility Status: Eligible	Examination form No.: 055501 	Division/Section: 1	Roll No.: 07
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>BHANUSHALI VANSHIKA ARJUN</b>	Mother's Name: MAMATA	Gender: Female
Name in Vernacular Language: BHANUSHALI VANSHIKA ARJUN		
Address: 2/15 JANGLESHWAR SOC., ASALFHA, KULKARNI WADI, GHATKOPAR WEST		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084		
Telephone no.:	Mobile no: 918879289338	Email : VANSHIKABHANUSHALI@GMAIL.COM
DOB: Oct 16, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422746 (Status: Pass)
Exam form appearance type: Fresher		

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

**Declaration by Principal/HOD/Chairperson**

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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Payal.R.

PRN: 2018016402138655	Eligibility Status: Eligible	Examination form No.: 055502 	Division/Section: 2	Roll No.: 76
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PANCHAL PAYAL RAMAN</b>	Mother's Name: SHOBHANA	Gender: Female
--	-------------------------	----------------

Name in Vernacular Language: पंचाल पायल रमण
---

Address: A-4,103 ASHAR ESTATE SHREE NAGAR WAGLE ESTATE,THANE-400604
---

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604
--

Telephone no.:	Mobile no: 918452999782	Email : payalrpanchal01@gmail.com
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DOB: Jun 01, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423825 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*PR*

PRN: 2018016402138671	Eligibility Status: Eligible	Examination form No.: 055503 	Division/Section: 2	Roll No.: 138
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PRATIK HARIHAR</b>	Mother's Name: BHAGYALAKSHMI	Gender: Male
---------------------------------------	------------------------------	--------------

Name in Vernacular Language: प्रतीक हरिहर

Address: BUILDING NO. 4, FLAT NO. 7, ARVIND NAGAR, KALINA-KURLA ROAD, KALINA, SANTACRUZ (EAST), MUMBAI-400029

City: MUMBAI, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400029

Telephone no.: 26662101	Mobile no: 918080143588	Email : pratikh2001@gmail.com
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DOB: Jan 26, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423794 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*[Handwritten Signature]*

PRN: 2018016402138713	Eligibility Status: Eligible	Examination form No.: 055504 	Division/Section: 1	Roll No.: 58
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>MEHTA UTSAV JAWAHAR</b>	Mother's Name: DIMPLE	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: उत्सव

Address: 303/b apollo bld,pride enclave vishnu nagar naupada thane (west) 303/b apollo bld,pride enclave vishnu nagar naupada thane (west)

City: thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400602

Telephone no.:	Mobile no: 919870469914	Email : utsavmehta2001@gmail.com
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DOB: Mar 30, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423816 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Signature*

PRN: 2018016402138825	Eligibility Status: Eligible	Examination form No.: 055505 	Division/Section: 2	Roll No.: 94
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAMNANI KARIM KAMRUDDIN</b>	Mother's Name: RASHIDA	Gender: Male
--	------------------------	--------------

Name in Vernacular Language:समनानी करीम कमरुद्दीन

Address: ROOM NO 402 4TH FLOOR C WING MAHAVIR BUILDING MUMBRA

City: MUMBRA, Taluka: , District: Thane, State: Maharashtra, PIN: 400612

Telephone no.: Mobile no: 918999800096 Email : samnanikarim20@gmail.com

DOB: Jul 21, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423841 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402138841	Eligibility Status: Eligible	Examination form No.: 055506 	Division/Section: 1	Roll No.: 08	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>CHANDRA MANSI KANTILAL</b>	Mother's Name: KALPANA	Gender: Female
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Name in Vernacular Language: चंद्रा मानसी कांतीलाल

Address: 103, GANESHALAY CHS, PATHARLI ROAD, GOGRASWADI, DOMBIVLI EAST

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201

Telephone no.:	Mobile no: 917045060142	Email : bhanushalimansi3005@gmail.com
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DOB: May 30, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422748 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Govani*

PRN: 2018016402138864	Eligibility Status: Eligible	Examination form No.: 055507 	Division/Section: 1	Roll No.: 31
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GOVANI ALIASGAR ABBAS</b>	Mother's Name: RUKSANA	Gender: Male
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Name in Vernacular Language: गोवानी अलीअसगर अब्बास

Address: ROOM NO 03 FIRST FLOOR SHAILESH NAGAR MUMBRA

City: MUMBRA, Taluka: , District: Thane, State: Maharashtra, PIN: 400612

Telephone no.:	Mobile no: 919930526649	Email : aliasgargovani48@gmail.com
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DOB: Jul 08, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422771 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402138937	Eligibility Status: Eligible	Examination form No.: 055508 	Division/Section: 1	Roll No.: 30	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GOTHI RITIKA PRAVIN</b>	Mother's Name: RITA	Gender: Female
--	---------------------	----------------

Name in Vernacular Language: RITIKA
-------------------------------------

Address: A-502, TULSI CHS PLOT NO. 133-134 SEC- 28, VASHI, NAVI MUMBAI
--

City: NAVI MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400703
--

Telephone no.:	Mobile no: 918097686188	Email : gothiritika28@gmail.com
----------------	-------------------------	---------------------------------

DOB: Jan 28, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422770 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	<p>Student's Signature</p>

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402138953	Eligibility Status: Eligible	Examination form No.: 055509 	Division/Section: 1	Roll No.: 46
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>JOSHI ANJALI PARESH</b>	Mother's Name: ASHA	Gender: Female
Name in Vernacular Language: जौशी अंजली परेश		
Address: 1/11 BABY JAGE BUILDING KOPAR ROAD , DOMBIVALI WEST		
City: DOMBIVALI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202		
Telephone no.:	Mobile no: 918879302135	Email : pandya.deepa@gmail.com
DOB: Apr 07, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423804 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Nimisha*

PRN: 2018016402138976	Eligibility Status: Eligible	Examination form No.: 055510 	Division/Section: 2	Roll No.: 81
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>PATEL NIMISHA SHAILESH</b>	Mother's Name: RAGINI	Gender: Female
Name in Vernacular Language: NIMISHA		
Address: 4/7 ,Fuggawala Compound Behind Mangatram Petrol Pump Quarry Road		
City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400078		
Telephone no.:	Mobile no: 918291400966	Email : 24nimipatel@gmail.com
DOB: Dec 24, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423828 (Status: ATKT)
Exam form appearance type: Fresher		

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
Center Preference (Code/Name):		Bank:
Venue Preference (Code/Name):		

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

**Declaration by Principal/HOD/Chairperson**  
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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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Nit

PRN: 2018016402139047	Eligibility Status: Eligible	Examination form No.: 055511 	Division/Section: 1	Roll No.: 27
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GOKHRUNITIASHISH</b>	Mother's Name: SUDHA	Gender: Female
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Name in Vernacular Language: नीती

Address: Flat No-603,A-Wing, Kailash Jyothi No-2 Derasar Lane, Ghatkopar East

City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400077

Telephone no.:	Mobile no: 919820454181	Email : nitigokhru0109@gmail.com
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DOB: Feb 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422767 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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PRN: 2018016402139063	Eligibility Status: Eligible	Examination form No.: 055512 	Division/Section: 1	Roll No.: 20
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DOSHI NIYATI ASHISH</b>	Mother's Name: AMI	Gender: Female
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Name in Vernacular Language: दोशी नियती आशिष

Address: 60-A, 1ST FLOOR, SINDHU WADI, M.G. ROAD, GHATKOPAR (EAST)

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077

Telephone no.: 21026745	Mobile no: 919930404498	Email : niyati.doshi2000@gmail.com
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DOB: Aug 08, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422760 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Anshu*

PRN: 2018016402139086	Eligibility Status: Eligible	Examination form No.: 055513 	Division/Section: 2	Roll No.: 137
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>ANASWARA DEEPAK</b>	Mother's Name: LEENA	Gender: Female
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Name in Vernacular Language:अनश्वरा दीपक

Address: 41/A-301,SWAPNASHILP C.H.S, TILAK NAGAR, CHEMBUR, MUMBAI

City: MUMBAI , Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400089

Telephone no.: Mobile no: 918097353505 Email : anshudeepak25245@gmail.com

DOB: Oct 14, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423793 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:  
  
Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Abhishek*

PRN: 2018016402139105	Eligibility Status: Eligible	Examination form No.: 055514 	Division/Section: 1	Roll No.: 53
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>KURMI ABHISHEK INDRAJEET</b>	Mother's Name: SHIVKUMARE	Gender: Male
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Name in Vernacular Language: KURMI ABHISHEK INDRAJEET
---

Address: 1605, mohan srishiti, 2nd jeevan kachoregoan, pataripool, kalyan east
--

City: kalyan, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306
--

Telephone no.:	Mobile no: 918652045884	Email : abhishekkurmi248@gmail.com
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DOB: Apr 19, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423811 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	<p>Student's Signature</p>

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN:  
2018016402139136

Eligibility Status:  
Eligible

Examination form No.:  
055515

Division/Section:  
2

Roll No.:  
79

Instruction Medium:

Nationality: India

## Student's Personal Information

Student's Name: **PRIYA PARAMESWARAN**

Mother's Name: PARVATHI

Gender: Female

Name in Vernacular Language: प्रिया परमेश्वरानं

Address: A-604, AMBAJI DARSHAN, NATIONAL SCHOOL MARG, BHANDUP (WEST), MUMBAI-400078 OPPOSITE NATIONAL SCHOOL

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078

Telephone no.: 022

Mobile no: 919619601131

Email : PRIYAPARAMESWARAN@HOTMAIL.COM

DOB: Oct 19, 2000

Category: Open

Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16)

Exam Event: Nov-2019

Seat No: 7423795 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee

Exam Form Fee

Exam Form Late Fee

Exam Form Super Late Fee

Examination Fees

Mark Statement Fee

Total:

**Payment Details:**

Amount Received:

College Receipt No. and Date:

DD No:

MICR No:

DD Date:

Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

**Declaration by Principal/HOD/Chairperson**

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:

Date:

College Staff Signature

Seal and Signature of  
Principal/HOD/Chairperson



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D. A. Bhaigade

PRN: 2018016402139202	Eligibility Status: Eligible	Examination form No.: 055516 	Division/Section: 1	Roll No.: 04	
Instruction Medium:			Nationality: India		

### Student's Personal Information

Student's Name: <b>BHAIGADE DHANASHREE ANANDA</b>	Mother's Name: SUMAN	Gender: Female
Name in Vernacular Language: Bhaigade Dhanashree Ananda		
Address: 2/13, giroba CHS. shivkrupa nagar		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042		
Telephone no.:	Mobile no: 917021541325	Email : dhanashreechalake@gmail.com
DOB: Dec 03, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422743 (Status: Pass)
Exam form appearance type: Fresher		

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
Center Preference (Code/Name):		Bank:
Venue Preference (Code/Name):		

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

**Declaration by Principal/HOD/Chairperson**  
 This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139241	Eligibility Status: Eligible	Examination form No.: 055517 	Division/Section: 2	Roll No.: 98	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAYED MOHAMMED ASAD TARIQUE</b>	Mother's Name: SALEHA	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: MOHAMMED ASAD
--

Address: Dion Shelter CHS 306 B-Wing S.G. Barve Marg Nehru Nagar, Near Railway Station, Kurla East Mumbai, Maharashtra 400024
---

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400024
---

Telephone no.: 25240258	Mobile no: 919167910849	Email : asadsayed1980@gmail.com
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DOB: Jul 29, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423844 (Status: Pass)
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Exam form appearance type: Fresher
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<b>Paper Details:</b> Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )
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SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRAR

PRN: 2018016402139256	Eligibility Status: Eligible	Examination form No.: 055518 	Division/Section: 2	Roll No.: 86
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PUNMIYA PRIYAL RAJESH</b>	Mother's Name: NEETA	Gender: Female
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Name in Vernacular Language: प्रियल

Address: A/22, RATNADEEP COLONY SHASHTRI NAGAR, VILLAGE ROAD BHANDUP WEST MUMBAI 78

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400078

Telephone no.: 022 Mobile no: 917710948279 Email : ppriyalpunmiya88@gmail.com

DOB: Feb 12, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423833 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139287	Eligibility Status: Eligible	Examination form No.: 055519 	Division/Section: 1	Roll No.: 50	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>KHILARI YASH VIKAS</b>	Mother's Name: SUJATA	Gender: Male
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Name in Vernacular Language: खिलारी यश विकास

Address: C/44, Vanita, vishwakarma nagar Nahur Road, Opp. Mehul Cinema Mulund (West), Mumbai-400080

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080

Telephone no.:	Mobile no: 919867827899	Email : yashkhilari@gmail.com
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DOB: Jun 08, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423808 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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*Bhavika*

PRN: 2018016402139295	Eligibility Status: Eligible	Examination form No.: 055520 	Division/Section: 2	Roll No.: 100
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH BHAVIKA JASWANT</b>	Mother's Name: KIRANBEN	Gender: Female
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Name in Vernacular Language: भाविका

Address: SHOP NO. 6, KANGAN IMITATION, GAVDEVI ROAD BHANDUP WEST MUMBAI 400078

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400078

Telephone no.: 022 Mobile no: 919967533376 Email : shahbhavika223@gmail.com

DOB: Jul 14, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423846 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:  
  
Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		





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PRN: 2018016402139322	Eligibility Status: Eligible	Examination form No.: 055522 	Division/Section: 2	Roll No.: 115
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>SHETTY SINI SADANAND</b>	Mother's Name: HEMA	Gender: Female
Name in Vernacular Language: शिनि		
Address: A/601, karma vihar, near fish market, station road Ghatkopar east, Mumbai-400077 MAHARASHTRA		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077		
Telephone no.: 21023637	Mobile no: 917045725959	Email : shetty.sini17@gmail.com
DOB: Dec 17, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423857 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139376	Eligibility Status: Eligible	Examination form No.: 055523 	Division/Section: 1	Roll No.: 14
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DAGLYA DHRUVI RAMESH</b>	Mother's Name: REKHA	Gender: Female
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Name in Vernacular Language: डगल्या धुवी रमेश
---

Address: bldg 79/701 B wing tilak nagar , chembur
---

City: mumbai , Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400089
---

Telephone no.:	Mobile no: 918433583724	Email : dhruvijain48@gmail.com
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DOB: Jan 23, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422754 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

<b>Declaration by Principal/HOD/Chairperson</b> This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.
---

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Milani*

PRN: 2018016402139384	Eligibility Status: Eligible	Examination form No.: 055524 	Division/Section: 2	Roll No.: 104
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH MILONI RAJESH</b>	Mother's Name: DHARMISTA	Gender: Female
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Name in Vernacular Language: शाह मिळोनि राजेश

Address: B/204 PATIL HERITAGE S N ROAD TAMBE NAGAR MULUND WEST

City: MULUND, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080

Telephone no.:	Mobile no: 918291676675	Email : Milonirs.2000@gmail.com
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DOB: Apr 15, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423849 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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V. R. Tiwari

PRN: 2018016402139392	Eligibility Status: Eligible	Examination form No.: 055525 	Division/Section: 2	Roll No.: 126
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>TIWARI VISHAKHA RAJESH</b>	Mother's Name: SUMAN	Gender: Female
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Name in Vernacular Language: विशाखा
-------------------------------------

Address: C/4 SAI NIWAS, JAGDISH NAGAR, OPP. SHRI RAM CLG, VILLAGE ROAD, BHANDUP WEST
--

City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400078
--

Telephone no.: 022	Mobile no: 919004466451	Email : tiwarivishakha@yahoo.com
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DOB: Jun 02, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423865 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ; Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ; Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ; Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ; Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ; Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ; Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		





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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Saini*

PRN: 2018016402139426	Eligibility Status: Eligible	Examination form No.: 055527 	Division/Section: 2	Roll No.: 91
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAINI TARANPREET KAUR BALJIT SINGH</b>	Mother's Name: AMARJIT KAUR	Gender: Female
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Name in Vernacular Language: सैनी तरांप्रीत कौर बलजीत सिंग
--

Address: 2/24,OPPOSITE KKV COLLEGE , JAGDISH NAGAR ,DATTAMANDIR ROAD ,BHANDUP (WEST),MUMBAI-400078 2/24,OPPOSITE KKV COLLEGE , JAGDISH NAGAR ,DATTAMANDIR ROAD ,BHANDUP (WEST),MUMBAI-400078
--

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078
---

Telephone no.: 022	Mobile no: 919987610738	Email : saini.taranpreet.kaur@gmail.com
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DOB: Nov 08, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423838 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b>	Place: <b>Vidyavihar</b>
I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Riya*

PRN: 2018016402139473	Eligibility Status: Eligible	Examination form No.: 055528 	Division/Section: 1	Roll No.: 01
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>BANGERA RIYA JAGANNATH</b>	Mother's Name: SHAMALA	Gender: Female
---	------------------------	----------------

Name in Vernacular Language: बंगेरा रिया जगन्नाथ

Address: 202, NILAM PALACE CHS LTD ,MANPADA ROAD ,NEAR GAVDEVI TEMPLE , AMBIKA NAGAR , DOMBIVLI (EAST)

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201

Telephone no.:	Mobile no: 918828477063	Email : riyabangera12@gmail.com
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DOB: Jun 12, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422740 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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Amrutha

PRN: 2018016402139496	Eligibility Status: Eligible	Examination form No.: 055529 	Division/Section: 1	Roll No.: 10
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>CHAZHIKULAM AMRUTHA RAJAN</b>	Mother's Name: ANITHA	Gender: Female
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Name in Vernacular Language: चाझीकुलम अमृता राजन

Address: Mamta nagar room no.204 D/4 Near datta mandir c/block road ulhasnagar 3

City: Ulhasnagar, Taluka: Ulhasnagar, District: Thane, State: Maharashtra, PIN: 421003

Telephone no.: Mobile no: 918149345026 Email : amrutharajan803@gmail.com

DOB: Feb 02, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7422750 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:  
  
Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139523	Eligibility Status: Eligible	Examination form No.: 055530 	Division/Section: 1	Roll No.: 41
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>JAIN PRIYANSHI DINESH</b>	Mother's Name: RUPALI	Gender: Female
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Name in Vernacular Language: प्रियांशी
--

Address: A/8, Pushpagandha opp. Shreemangalkaryalay Shreenagar, Wagle Estate, Thane
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City: thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604
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Telephone no.:	Mobile no: 919930897141	Email : jainpriyanshi47@gmail.com
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DOB: Aug 30, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423800 (Status: ATKT)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		





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*Yukti*

PRN: 2018016402139666	Eligibility Status: Eligible	Examination form No.: 055532 	Division/Section: 1	Roll No.: 64
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>NANDU YUKTI VINOD</b>	Mother's Name: NAYNA	Gender: Female
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Name in Vernacular Language: नंदू युक्ती विनोद

Address: 804,vallabh krupa tower tembhinaka,opp jain mandir thane west

City: MUMBAI, Taluka: , District: Thane, State: Maharashtra, PIN: 400601

Telephone no.:	Mobile no: 918080867077	Email : yuktin66.yn@gmail.com
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DOB: Oct 31, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423822 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139674	Eligibility Status: Eligible	Examination form No.: 055533 	Division/Section: 2	Roll No.: 90	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: SAID OMKAR RAMESH	Mother's Name: NIRMALA	Gender: Male
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Name in Vernacular Language: ओमकार

Address: 202,HIMALAYA F-3, GOLDEN PARK PHASE 2, BETURKARPADA,KALYAN(W).

City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421301

Telephone no.:	Mobile no: 918652564966	Email : omkarsaid123@gmail.com
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DOB: Sep 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423837 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: Vidyavihar
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Siddhi*

PRN: 2018016402139716	Eligibility Status: Eligible	Examination form No.: 055534 	Division/Section: 2	Roll No.: 108
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: <b>SHAH SIDDHI RAMESH</b>	Mother's Name: KALPANA	Gender: Female
Name in Vernacular Language: सिद्धी		
Address: 602, Meena Avenue, Sambhaji Path Vishnu Nagar, Naupada, Thane (W)		
City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400602		
Telephone no.:	Mobile no: 919833661447	Email : riddhishah745@gmail.com
DOB: Dec 05, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423875 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:

**Declaration by Principal/HOD/Chairperson**

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402139755	Eligibility Status: Eligible	Examination form No.: 055535 	Division/Section: 1	Roll No.: 05
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>BHANUSHALI DHARMIK GOVIND</b>	Mother's Name: HARSHA BHANUSHALI	Gender: Male
--	----------------------------------	--------------

Name in Vernacular Language: भानुशाली धर्मिक गोविंद

Address: A/1502,DAFFODIL,ANSALS WHISPERING MEADOWS, MODEL TOWN , AGARWAL ROAD, MULUND WEST MUMBAI- 400 080

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080

Telephone no.: 21641819	Mobile no: 919769027631	Email : DHARMIKB6@GMAIL.COM
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DOB: Nov 01, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422744 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:  Student's Signature
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### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Dubey*

PRN: 2018016402139763	Eligibility Status: Eligible	Examination form No.: 055536 	Division/Section: 1	Roll No.: 22
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DUBEY NEHA ANIL</b>	Mother's Name: ANURADHA	Gender: Female
--	-------------------------	----------------

Name in Vernacular Language: दुबे नेहा अनिल

Address: PLOT NUMBER;70, ROOM NUMBER 3, JAI MILIND SOCIETY SHIVAI NAGAR THANE WEST 400606 MUMBAI, MAHARASHTRA

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606

Telephone no.:	Mobile no: 919967707497	Email : nd8979127@gmail.com
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DOB: Jun 27, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422762 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		





# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402139852	Eligibility Status: Provisional	Examination form No.: 055538 	Division/Section: 1	Roll No.: 36
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>INAMDAR HEENA HAMID</b>	Mother's Name: SABIRA	Gender: Female
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Name in Vernacular Language: <b>हीना</b>
--

Address: 4/361/4300 tagore nagar, vikhroli east mumbai-83 4/361/4300 tagore nagar, vikhroli east mumbai-83
--

City: mumbai, Taluka: , District: Thane, State: Maharashtra, PIN: 400083
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Telephone no.:	Mobile no: 919819662081	Email : heenainamdar0786@gmail.com
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DOB: Jul 26, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423797 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

<b>Declaration by Principal/HOD/Chairperson</b> This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.
---

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139883	Eligibility Status: Eligible	Examination form No.: 055539 	Division/Section: 2	Roll No.: 112
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHARMA RUCHI PRABHUNATH</b>	Mother's Name: ASHA DEVI	Gender: Female
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Name in Vernacular Language: शर्मा रुची प्रभुनाथ
--

Address: ROOM NO. 20,BABA KHAN CHAWL, NETAJI SUBHASH NAGAR,J.M.M. ROAD, ASALFA,GHATKOPAR (WEST)
---

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084
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Telephone no.:	Mobile no: 918898894100	Email : vinaysharma893@gmail.com
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DOB: Jun 05, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423855 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

<b>Declaration by Principal/HOD/Chairperson</b> This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.
---

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Kiran*

PRN: 2018016402139964	Eligibility Status: Eligible	Examination form No.: 055540 	Division/Section: 2	Roll No.: 130
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>VERMA KIRAN SATYAPRAKASH</b>	Mother's Name: SUDHA VERMA	Gender: Female
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Name in Vernacular Language: वर्मा किरण सत्यप्रकाश

Address: ROOM NO 25 3RD FLOOR SHIVNATH BLDG NEAR HALL ROAD KURLA WEST

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070

Telephone no.:	Mobile no: 917039805358	Email : kiranverma20820@gmail.com
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DOB: Aug 20, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423869 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402139972	Eligibility Status: Eligible	Examination form No.: 055541 	Division/Section: 1	Roll No.: 18	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DEVKAR AKASH HANMANT</b>	Mother's Name: VIDYA	Gender: Male
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Name in Vernacular Language: देवकर आकाश हणमंत

Address: SHREE SAI SHRADDHA RAHIVASI SEVA SANGH NEAR H.PCOLONY, BHARAT NAGAR VASINAKA

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074

Telephone no.:	Mobile no: 917039291769	Email : surajdevkar6638@gmail.com
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DOB: Jul 15, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422758 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*[Handwritten signature]*

PRN: 2018016402139995	Eligibility Status: Eligible	Examination form No.: 055542 	Division/Section: 1	Roll No.: 32
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GUPTA SARIKA DINESH</b>	Mother's Name: ANITA	Gender: Female
--	----------------------	----------------

Name in Vernacular Language: सारिका

Address: B-54, Chandulal APT., Gold Field Enclave, Dharavi-17.

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400017

Telephone no.: Mobile no: 919920822182 Email : dineshkumar.b9876@gmail.com

DOB: Aug 08, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7422772 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Kodage*

PRN: 2018016402140101	Eligibility Status: Eligible	Examination form No.: 055543 	Division/Section: 2	Roll No.: 136
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>ZODAGE KAPIL VASANT</b>	Mother's Name: SUREKHA	Gender: Male
--	------------------------	--------------

Name in Vernacular Language: झोडगे कपिल वसंत

Address: SABLE NAGAR PATRA CHAWL RAILWAY COLONY, KURLA EAST, MUMBAI

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400024

Telephone no.: Mobile no: 917039478489 Email : aadi.pagare321@gmail.com

DOB: Jan 02, 2001 Category: Reserved (SC) Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423874 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Himanshi*

PRN: 2018016402140116	Eligibility Status: Eligible	Examination form No.: 055544 	Division/Section: 1	Roll No.: 55
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>MASRANI HIMANSHI VIMAL</b>	Mother's Name: CHHAYA	Gender: Female
Name in Vernacular Language: himanshi		
Address: 901, Balaji Geet Gunjan L.B.S Marg Mulund west		
City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080		
Telephone no.:	Mobile no: 917021305585	Email : masranihimanshi@gmail.com
DOB: Sep 23, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423813 (Status: Pass)
Exam form appearance type: Fresher		

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402140221	Eligibility Status: Eligible	Examination form No.: 055545 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GOSWAMI SANKET HARSHAD</b>	Mother's Name: TRIVENI	Gender: Male
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Name in Vernacular Language: गोस्वामी संकेत हर्षद

Address: 413, ZIPRU SADAN GUPTA ROAD, GAONDEVI, NEAR DON BOSCO SCHOOL,

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202

Telephone no.:	Mobile no: 919769455419	Email : sanketgoswami62@gmail.com
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DOB: Apr 28, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422769 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Panigrahi*

PRN: 2018016402140356	Eligibility Status: Eligible	Examination form No.: 055546 	Division/Section: 2	Roll No.: 77
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PANIGRAHI LISA SANKARA</b>	Mother's Name: SUBASINI	Gender: Female
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Name in Vernacular Language: पनीग्रही लिसा संकर

Address: SHREE KRUPA APARTMENT, B-WING, ROOM NO.207 NEAR ST. MARY SCHOOL MUMBRADEVI COLONY

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400612

Telephone no.:	Mobile no: 917678069273	Email : panilisa123@gmail.com
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DOB: Mar 12, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423826 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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PRN: 2018016402140364	Eligibility Status: Eligible	Examination form No.: 055547 	Division/Section: 1	Roll No.: 19	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DHURI MITALI RAGHUTTAM</b>	Mother's Name: RASHMI	Gender: Female
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Name in Vernacular Language: धुरी मिताली रघुत्तम
--

Address: 2/3, pushpa niwas, ganesh marg, hariyali village, vikroli (east)
---

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083
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Telephone no.:	Mobile no: 919869560151	Email : raghuttamdhuri@gmail.com
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DOB: May 03, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422759 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Raha*

PRN: 2018016402140406	Eligibility Status: Eligible	Examination form No.: 055548 	Division/Section: 2	Roll No.: 87
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>RAHA SAYANTANI SUROJIT</b>	Mother's Name: MANISHA	Gender: Female
Name in Vernacular Language: राहा सायंतानी सुरोजीत		
Address: 401, SUNDEW CO-OP HOUSING SOCIETY LTD, RAHEJA VIHAR, CHANDIVALI, ANDHERI (EAST) MUMBAI 400072		
City: MUMBAI, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400072		
Telephone no.:	Mobile no: 919820668380	Email : manisha.raha@gmail.com
DOB: Mar 24, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423834 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Ayush*

PRN: 2018016402140422	Eligibility Status: Eligible	Examination form No.: 055549 	Division/Section: 2	Roll No.: 133
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: <b>VORA AYUSH RAKESH</b>	Mother's Name: SEJAL	Gender: Male
Name in Vernacular Language: Ayush		
Address: 14, Datt Digambar CHS Sant Namdev Path Gograswadi Dombivil east		
City: Dombivil, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201		
Telephone no.:	Mobile no: 919768178399	Email : ayushvora37@gmail.com
DOB: May 04, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423871 (Status: Pass)
Exam form appearance type: Fresher		

Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )			
SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
Center Preference (Code/Name):		Bank:
Venue Preference (Code/Name):		

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

**Declaration by Principal/HOD/Chairperson**

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: 2018016402140453	Eligibility Status: Provisional	Examination form No.: 055550 	Division/Section: 2	Roll No.: 103	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH MAYURI MANOJ</b>	Mother's Name: PRATIHA	Gender: Female
--	------------------------	----------------

Name in Vernacular Language: शाह मयुरी मनोज

Address: MADHUNANDAN GEETA NAGAR BY PASS ROAD AKOLA

City: AKOLA, Taluka: Akola, District: Akola, State: Maharashtra, PIN: 444001

Telephone no.: Mobile no: 919405181022 Email : mayurishah2405@gmail.com

DOB: May 24, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423848 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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Tanvi

PRN: 2018016402140526	Eligibility Status: Eligible	Examination form No.: 055551 	Division/Section: 1	Roll No.: 42
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>JAIN TANVI BHARAT</b>	Mother's Name: CHANDRIKA	Gender: Female
--	--------------------------	----------------

Name in Vernacular Language: Tanvi

Address: 303, Roop plaza society Nxt to Jeevan Jyoti Jambli Naka Thane(w)

City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601

Telephone no.:	Mobile no: 917738612255	Email : tanvij844@gmail.com
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DOB: Nov 23, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423801 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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Mshah

PRN: 2018016402140565	Eligibility Status: Eligible	Examination form No.: 055552 	Division/Section: 2	Roll No.: 105
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH MOKSHA PARESH</b>	Mother's Name: JASMINA	Gender: Female
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Name in Vernacular Language: Shah moksha paresh

Address: 5/alpana rashmi bldg Chs, near mehul cinema Nahur road , Mulund West

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080

Telephone no.:	Mobile no: 919930601994	Email : mokshashah1920@gmail.com
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DOB: Dec 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423850 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

### To, Director, Board of Examination and Evaluations / The Controller Of Examination,

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

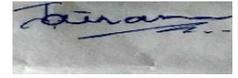
<http://mum.digitaluniversity.ac/>

S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402140573	Eligibility Status: Eligible	Examination form No.: 055553 	Division/Section: 1	Roll No.: 24
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GANDHI JAINAM KETAN</b>	Mother's Name: KOMAL	Gender: Male
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Name in Vernacular Language: जैनम गाँधी
---

Address: 601/602, Sambhav Apts, Sarvodaya Nagar, Mulund (West)
--

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080
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Telephone no.: 25619654	Mobile no: 919930393439	Email : jainam20gandhi@gmail.com
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DOB: Jun 20, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422764 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402140607	Eligibility Status: Eligible	Examination form No.: 055554 	Division/Section: 2	Roll No.: 88
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>RANE PRACHI ANIL</b>	Mother's Name: AKSHATA	Gender: Female
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Name in Vernacular Language: राने प्राची अनिल

Address: 1301/B Wing bldg 2, Ambika Nagar Soc., J.N.Road Mulund (West) 1301/B Wing bldg 2, Ambika Nagar Soc., J.N.Road Mulund (West)

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080

Telephone no.:	Mobile no: 918108644334	Email : prachirane612@gmail.com
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DOB: Dec 06, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423835 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Sakshi Shah*

PRN: 2018016402140654	Eligibility Status: Eligible	Examination form No.: 055555 	Division/Section: 2	Roll No.: 107
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH SAKSHI RAJEEVKUMAR</b>	Mother's Name: MINAL	Gender: Female
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Name in Vernacular Language:Hindi

Address: Rajeev Shah, Shahid Bhagatsingh Marg Balaji Plots,Shamlal road

City: Khamgaon, Taluka: Khamgaon, District: Buldhana, State: Maharashtra, PIN: 444303

Telephone no.: 252324	Mobile no: 919404033668	Email : shahsakshi256@gmail.com
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DOB: Jun 25, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423851 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

### To, Director, Board of Examination and Evaluations / The Controller Of Examination,

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Yash Jain*

PRN: 2018016402140693	Eligibility Status: Eligible	Examination form No.: 055556 	Division/Section: 1	Roll No.: 44
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: <b>JAIN YASHKUMAR NARESHKUMAR</b>	Mother's Name: BHAGWATI	Gender: Male

Name in Vernacular Language: जयंत

Address: 22 PAWSHESADAN KOPAR CROSS RD. NEAR S.I.A HIGHSCHOOL SHASTRINAGAR

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202

Telephone no.: Mobile no: 919892432875 Email : AKSHAYYJAINNN@GMAIL.COM

DOB: Sep 06, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423803 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:

**Declaration by Principal/HOD/Chairperson**

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Jalak*

PRN: 2018016402140801	Eligibility Status: Eligible	Examination form No.: 055557 	Division/Section: 1	Roll No.: 57
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>MEHTA JALAK JATIN</b>	Mother's Name: KAMINI	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: मेहता जालक जतिन

Address: 3/322,trimurti society,CHS LTD hingwalalane lane ,pantnagar ghatkopar east ,mumbai 400075

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400075

Telephone no.: 9820370222 Mobile no: 919167370222 Email : jalakmehta2005@gmail.com

DOB: Apr 28, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423815 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Sheetal*

PRN: 2018016402140847	Eligibility Status: Provisional	Examination form No.: 055558 	Division/Section: 1	Roll No.: 17
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Instruction Medium:	Nationality: India
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Student's Personal Information		
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Student's Name: <b>DEVALIYA SHEETAL BABUBHAI</b>	Mother's Name: GEETA	Gender: Female
--	----------------------	----------------

Name in Vernacular Language: शीतल
-----------------------------------

Address: 506,RAJIV GANDHI SOCIETY DHARAVI KUMBHARWADA 90 FEET ROAD
--

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400017
--

Telephone no.:	Mobile no: 917039219189	Email : sheetaldevaliya5@gmail.com
----------------	-------------------------	------------------------------------

DOB: May 25, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422757 (Status: Pass)
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Exam form appearance type: Fresher
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<b>Paper Details:</b> Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )
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SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:  Student's Signature
---	--

<b>Declaration by Principal/HOD/Chairperson</b>
---

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Ry*

PRN: 2018016402140855	Eligibility Status: Eligible	Examination form No.: 055559 	Division/Section: 1	Roll No.: 35
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GUTKA RITIK AJIT</b>	Mother's Name: BHARATI	Gender: Male
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Name in Vernacular Language: गुटका रितिक अजित

Address: B-7,HEMLEELA APARTMENT,4TH FLOOR, MAHATMA PHULE ROAD,MULUND

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400081

Telephone no.:	Mobile no: 917977719278	Email : ritikgutka16@gmail.com
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DOB: May 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422775 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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Manasi

PRN: 2018016402140863	Eligibility Status: Eligible	Examination form No.: 055560 	Division/Section: 2	Roll No.: 124
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>TIKEKAR MANASI DHANANJAY</b>	Mother's Name: NIRMALA	Gender: Female
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Name in Vernacular Language: टिकेकर मानसी

Address: dattashree co. housing society sahayak chawl, asalpa village ghatkopar (w) mumbai 400084

City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400084

Telephone no.:	Mobile no: 919082792161	Email : manasi.tikekar123@gmail.com
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DOB: May 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423864 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*V. N. Vyas*

PRN: 2018016402140871	Eligibility Status: Provisional	Examination form No.: 055561 	Division/Section: 2	Roll No.: 135
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>VYAS PAYAL NARENDRA</b>	Mother's Name: CHETNA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: व्यस पायल नरेंद्र

Address: 4/417 doshiwadi opp. sarvoday hospital ghatkopar

City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400086

Telephone no.: Mobile no: 919833138606 Email : payalvyas@gmail.com

DOB: Sep 01, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423873 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:  
  
Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

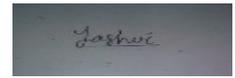
<http://mum.digitaluniversity.ac/>

S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: 2018016402140944	Eligibility Status: Eligible	Examination form No.: 055562 	Division/Section: 1	Roll No.: 61
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>NAGDA YASHVI HARISH</b>	Mother's Name: AVANI	Gender: Female
Name in Vernacular Language: यशवी		
Address: A-5 SAGAR SUDHA C H S, GOPAL NAGAR, LANE NO-2,		
City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201		
Telephone no.: 2447244	Mobile no: 919324937097	Email : yashvinagda@gmail.com
DOB: Oct 29, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423819 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Askaruse*

PRN: 2018016402141015	Eligibility Status: Eligible	Examination form No.: 055563 	Division/Section: 1	Roll No.: 48
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>KARVE ASHWIT SRIKANT</b>	Mother's Name: LOLAKSHI	Gender: Male
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Name in Vernacular Language: कर्वे अश्वित श्रीकांत

Address: A/502,SAMATA APPARTMENTS, AMAR NAGAR, MULUND (W), MUMBAI

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400082

Telephone no.: Mobile no: 919029903409 Email : karveleena@gmail.com

DOB: Apr 25, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423806 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Shetty*

PRN: 2018016402141054	Eligibility Status: Eligible	Examination form No.: 055564 	Division/Section: 2	Roll No.: 113
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHETTY POOJA DAMODAR</b>	Mother's Name: SUBASHINI	Gender: Female
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Name in Vernacular Language: शेटी पूजा दामोदर

Address: a/303 sudama sankalpCHS RH 217/218 phase-II MIDC dombivli east

City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201

Telephone no.: Mobile no: 919167655024 Email : anupama5599@yahoo.com

DOB: Dec 18, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423856 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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Chetna

PRN: 2018016402141062	Eligibility Status: Eligible	Examination form No.: 055565 	Division/Section: 2	Roll No.: 96
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAWANT CHETANA VIKAS</b>	Mother's Name: JAYASHREE	Gender: Female
---	--------------------------	----------------

Name in Vernacular Language: सावंत चेतना विकास

Address: UMIYA DARSHAN CHS PLOT NO 95 ROOM NO 501 SECTOR NEW 50 SEAWOODS NAVI MUMBAI

City: NAVI MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400706

Telephone no.: Mobile no: 918655357588 Email : chetnaswant033@gmail.com

DOB: Oct 14, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423842 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

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Place: **Vidyavihar**  
Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402141085	Eligibility Status: Eligible	Examination form No.: 055566 	Division/Section: 2	Roll No.: 101	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SHAH DHWANI JITENDRA</b>	Mother's Name: PRITI	Gender: Female
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Name in Vernacular Language: शाह ध्वनी जितेंद्र
---

Address: 2 shanti bldg gr.floor s.n road tambe nagar , mulund west
--

City: mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400080
---

Telephone no.:	Mobile no: 918976639844	Email : dhwanishah022@gmail.com
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DOB: Jun 17, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423847 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402141093	Eligibility Status: Eligible	Examination form No.: 055567 	Division/Section: 2	Roll No.: 139	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PALLISSERY ABHAYA SASI DEEPA</b>	Mother's Name: DEEPA	Gender: Female
---	----------------------	----------------

Name in Vernacular Language: पल्लिस्सेरी अभया शशी दीपा
--

Address: A-22 GANESH NIWAS NEAR ANAND ASHRAM LAXMI NARAYAN MANDIR ROAD SAKINAKA
---

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072
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Telephone no.:	Mobile no: 917303907006	Email : sasishyam22@gmail.com
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DOB: Jun 05, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423824 (Status: Pass)
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Exam form appearance type: Fresher
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<b>Paper Details:</b> Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )
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SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Preeti*

PRN: 201801640214112	Eligibility Status: Eligible	Examination form No.: 055568 	Division/Section: 1	Roll No.: 65
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>NEGI PREETI MAHENDRASINGH</b>	Mother's Name: SUNITA	Gender: Female
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Name in Vernacular Language: नेगी प्रीती महेंद्रसिंग

Address: 4/404 Sai Shakti Apt Shanti Nagar Wagle Estate Thane - 400604

City: MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604

Telephone no.: Mobile no: 919833766521 Email : sandeep.negi2911@gmail.com

DOB: Mar 01, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423823 (Status: ATKT)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Preeti*

PRN: 2018016402141255	Eligibility Status: Eligible	Examination form No.: 055569 	Division/Section: 2	Roll No.: 85
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>PERIWAL PREETI BABULAL</b>	Mother's Name: PUSHPA	Gender: Female
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Name in Vernacular Language:पेरीवाल प्रीती बाबुलाल

Address: 528 RAMDEV BHAWAN 3RD FLOOR ADARSH PARK ROAD

City: BHIWANDI, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421308

Telephone no.:	Mobile no: 919960749901	Email : rekhaperiwal06@gmail.com
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DOB: Oct 08, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423832 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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**Payment Details:** Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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*Kumbhar*

PRN: 2018016402141263	Eligibility Status: Eligible	Examination form No.: 055570 	Division/Section: 1	Roll No.: 51
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>KUMBHAR VAISHNAVI NARENDRA</b>	Mother's Name: ROHINI	Gender: Female
Name in Vernacular Language: कुंभार वैष्णवी नरेंद्र		
Address: 2/4,LAXMI NIWAS, ANAND NAGAR SAINATH NAGAR ROAD GHATKOPAR WEST		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086		
Telephone no.:	Mobile no: 919619229618	Email : kumbharvaishnavi08@gmail.com
DOB: Sep 08, 2000	Category: Reserved (OBC)	Physically Handicap: No
Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7405156 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402141271	Eligibility Status: Eligible	Examination form No.: 055571 	Division/Section: 1	Roll No.: 25	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GANGAR JINAL RAMESH</b>	Mother's Name: SARIKA	Gender: Female
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Name in Vernacular Language: गंगर जिनल रमेश

Address: 4/150, D wing, 1st floor, Mathura building, Ambedkar Nagar Society, Bhagoji Waghmare Marg, Opp BDD Chawl no. 67, Worli, Mumbai 400018

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400018

Telephone no.: 24935746	Mobile no: 919699169990	Email : jinugangar@gmail.com
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DOB: Apr 28, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422765 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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Vora

PRN: 2018016402141286	Eligibility Status: Eligible	Examination form No.: 055572 	Division/Section: 2	Roll No.: 134
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: VORA VIDHI MANOJ	Mother's Name: VARSHA	Gender: Female
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Name in Vernacular Language: विधी

Address: A/8,Santwani soc, Sant Namdeo Path Jijai Nagar,Dombivli(East)

City: DOMBIVALI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201

Telephone no.:	Mobile no: 919870759727	Email : voravidhi28@gmail.com
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DOB: Mar 28, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423872 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Vidyavihar
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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*Aditi*

PRN: 2018016402141305	Eligibility Status: Eligible	Examination form No.: 055573 	Division/Section: 2	Roll No.: 121
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>THAKKAR ADITI DILIP</b>	Mother's Name: DIPTI	Gender: Female
--	----------------------	----------------

Name in Vernacular Language: ठक्कर अदिती दिलीप

Address: 7, SACHIN DARSHAN ANAND NAGAR DIN DAYAL ROAD DOMBIVLI WEST

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202

Telephone no.: Mobile no: 917977330565 Email : aditi23189@gmail.com

DOB: Apr 23, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423862 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee Exam Form Fee Exam Form Late Fee Exam Form Super Late Fee

Examination Fees Mark Statement Fee Total:

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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Rupesh

PRN: 2018016402141313	Eligibility Status: Eligible	Examination form No.: 055574 	Division/Section: 1	Roll No.: 15
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DAKUA RUPESH KAILASH</b>	Mother's Name: MANJULA	Gender: Male
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Name in Vernacular Language: रुपेश कैलास डाकूया

Address: LANE NO11 SAVITRIBAI PLULE NAGAR PANT NAGAR GHATKOPAR (E)

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075

Telephone no.:	Mobile no: 918369787913	Email : rupeshdakua9820@gmail.com
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DOB: May 31, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422755 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

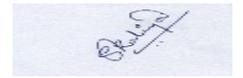
<http://mum.digitaluniversity.ac/>

S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402141336	Eligibility Status: Eligible	Examination form No.: 055575 	Division/Section: 2	Roll No.: 120
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SYED RABIYA BASRI SALEEM</b>	Mother's Name: SHABANA FIRDOSE	Gender: Female
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Name in Vernacular Language: सईद रबिया बासरी सलीम

Address: 404, A-WING, SUMBUL APARTMENT, SHARIFA ROAD, AMRUT NAGAR, MUMBRA THANE-400612

City: MUMBRA, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400612

Telephone no.: Mobile no: 919664554230 Email : rabirock731@gmail.com

DOB: Dec 01, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7423861 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: College Receipt No. and Date:

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**  
Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Sakshi*

PRN: 2018016402141352	Eligibility Status: Provisional	Examination form No.: 055576 	Division/Section: 1	Roll No.: 09
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>CHAVDA SAKSHI DEEPAK</b>	Mother's Name: MANISHA	Gender: Female
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Name in Vernacular Language: चवडा साक्षी DEEPAK

Address: A/1 Mahavir Darshan, Mahavir Nagar, Near ICON Hospital, Manpada Road, Dombivli (EAST) A/1 Mahavir Darshan, Mahavir Nagar, Near ICON Hospital, Manpada Road, Dombivli (EAST)

City: Dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201

Telephone no.:	Mobile no: 919987308110	Email : sakshichavda1007@gmail.com
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DOB: Jul 10, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422749 (Status: Pass)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

### Payment Details:

Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402141367	Eligibility Status: Eligible	Examination form No.: 055577 	Division/Section: 1	Roll No.: 37	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>JAIN DEEPKUMAR VINOD</b>	Mother's Name: LEELA	Gender: Male
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Name in Vernacular Language: जैन दीपकुमार विनोद

Address: 201, prince tower, l.b.s. marg ghatkopar west

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400086

Telephone no.:	Mobile no: 919769334584	Email : deip967@gmail.com
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DOB: Apr 20, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7424035 (Status: ATKT)
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Exam form appearance type: Fresher

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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56 Sairam 17

PRN: 2018016402141375	Eligibility Status: Eligible	Examination form No.: 055578 	Division/Section: 2	Roll No.: 111
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SUBRAMANIAN SHANKAR</b>	Mother's Name: UMA	Gender: Male
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Name in Vernacular Language: सुब्रमणि शंकर

Address: 1/2, JAI SHUBHAM CHS, MUMBRA DEVI MANDIR ROAD, DEVI CHOWK, DOMBIVLI WEST

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202

Telephone no.:	Mobile no: 919820667678	Email : SAIRAMSANKAR2001@GMAIL.COM
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DOB: Jan 02, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423796 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
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Examination Fees	Mark Statement Fee	Total:
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Payment Details: Amount Received: College Receipt No. and Date:

DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.

Place: **Vidyavihar**

Date:

Student's Signature

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402141383	Eligibility Status: Eligible	Examination form No.: 055579 	Division/Section: 2	Roll No.: 99
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>SAYYED SALIKA MOHD RAIS</b>	Mother's Name: SAIRA	Gender: Female
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Name in Vernacular Language: शय्येद

Address: ROOM NO. 104, ABIDA MANZIL MAULANA BUILDING NEAR SANIYA HALL CHAND NAGAR KAUSA

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400612

Telephone no.:	Mobile no: 917045149196	Email : salikasayyed2627@gmail.com
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DOB: Jul 04, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423845 (Status: Pass)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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*Samnani*

PRN: 2018016402141402	Eligibility Status: Eligible	Examination form No.: 055580 	Division/Section: 2	Roll No.: 93
Instruction Medium:			Nationality: India	

### Student's Personal Information

Student's Name: <b>SAMNANI FIYAZ MOHAMMED</b>	Mother's Name: SHEHNAZ	Gender: Male
Name in Vernacular Language: Shehnaz		
Address: 42,Vishaka apartment ,akashganga complex Rabodi ,Thane (W)		
City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601		
Telephone no.:	Mobile no: 918850209941	Email : fiyusamnani@gmail.com
DOB: Jan 27, 2001	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423840 (Status: ATKT)
Exam form appearance type: Fresher		

### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment,CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<p><b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b></p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	<p>Place: <b>Vidyavihar</b></p> <p>Date:</p>
	Student's Signature

**Declaration by Principal/HOD/Chairperson**

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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PRN: 2018016402141417	Eligibility Status: Eligible	Examination form No.: 055581 	Division/Section: 1	Roll No.: 47
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>KARIA MILONI KHUSHAL</b>	Mother's Name: JAVER	Gender: Female
Name in Vernacular Language: मिलोनी खुशल करीया		
Address: 103/1 Atul Apt. Opp. Civil Hospital, Dhobi Ali Tembinaka, Thane (W)		
City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601		
Telephone no.:	Mobile no: 919167904339	Email : milonikaria12@gmail.com
DOB: Nov 30, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423805 (Status: ATKT)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

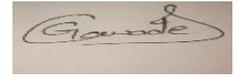
<http://mum.digitaluniversity.ac/>

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PRN:  
2018016402141425

Eligibility Status:  
Eligible

Examination form No.:  
055582

Division/Section:  
1

Roll No.:  
26

Instruction Medium: \_\_\_\_\_ Nationality: India

### Student's Personal Information

Student's Name: **GAWADE GIRISH ANANT** Mother's Name: ANJALI Gender: Male

Name in Vernacular Language: गिरीश अनंत गावडे

Address: VIRANGULA CO OP HOUSING SOCIETY PLOT NO 52 ROOM NO B/21 SAVAKAR NAGAR THANE (W)

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606

Telephone no.: \_\_\_\_\_ Mobile no: 919987527272 Email : girishgawade8@gmail.com

DOB: May 15, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7422766 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

**Payment Details:** Amount Received: \_\_\_\_\_ College Receipt No. and Date: \_\_\_\_\_  
DD No: \_\_\_\_\_ MICR No: \_\_\_\_\_ DD Date: \_\_\_\_\_ Bank: \_\_\_\_\_

Center Preference (Code/Name): \_\_\_\_\_

Venue Preference (Code/Name): \_\_\_\_\_

**To, Director, Board of Examination and Evaluations / The Controller Of Examination,**

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Place: **Vidyavihar**  
Date: \_\_\_\_\_  
Student's Signature

**Declaration by Principal/HOD/Chairperson**  
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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



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Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402141456	Eligibility Status: Eligible	Examination form No.: 055583 	Division/Section: 1	Roll No.: 16
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>DANDIA HETAL YOGESH</b>	Mother's Name: DIVYA	Gender: Female
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Name in Vernacular Language: दांडीया हेतल योगेश
---

Address: 16/4, Shewanti Chhaya Bldg, Umesh Nagar Reti Bunder Rd Opp. Swastik Park Tower
---

City: Dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202
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Telephone no.:	Mobile no: 917303020039	Email : bena.dandia@gmail.com
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DOB: Mar 17, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422756 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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*Shikha*

PRN: 2018016402141537	Eligibility Status: Eligible	Examination form No.: 055584 	Division/Section: 2	Roll No.: 131
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>VISARIA SHIKHA MANISH</b>	Mother's Name: NISHA	Gender: Female
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Name in Vernacular Language: शिखा

Address: 4, New Chandrodaya Bhaweshwar Lane Ghatkopar east

City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400077

Telephone no.:	Mobile no: 917666199505	Email : shikhavisaria@gmail.com
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DOB: May 12, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423870 (Status: ATKT)
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Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:
Student's Signature	

### Declaration by Principal/HOD/Chairperson

This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.

Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402141561	Eligibility Status: Eligible	Examination form No.: 055585 	Division/Section: 1	Roll No.: 34	
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>GUPTA TISA RAJENDRA</b>	Mother's Name: MANJUDEVI	Gender: Female
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Name in Vernacular Language: गुप्ता तीस राजेंद्र
--

Address: PANCHASHILA CHAWL, SURYA NGAR,
---

City: VIKHROLI WEST, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083
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Telephone no.:	Mobile no: 918450924219	Email : tisagupta0@gmail.com
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DOB: Jun 20, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7422774 (Status: Pass)
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Exam form appearance type: Fresher
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<b>Paper Details:</b> Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )
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SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:  Student's Signature
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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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Priyamali

PRN: 2018016402141611	Eligibility Status: Provisional	Examination form No.: 055586 	Division/Section: 1	Roll No.: 54
Instruction Medium:			Nationality:	India

### Student's Personal Information

Student's Name: <b>MALI PRIYA CHUNNALAL</b>	Mother's Name: KANCHAN	Gender: Female
Name in Vernacular Language: प्रिया		
Address: VIGHNAHARTA CHAWL NO.10, ROOM NO.16 JANKI NAGAR , MANISHA NAGAR KALWA ,THANE		
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605		
Telephone no.:	Mobile no: 917666432292	Email : mali_priya99@yahoo.com
DOB: Nov 11, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7423812 (Status: Pass)

Exam form appearance type: Fresher

**Paper Details:** Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

<b>Payment Details:</b>	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b> Date:
	Student's Signature

### Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		



# University of Mumbai, Mumbai

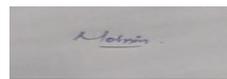
<http://mum.digitaluniversity.ac/>

S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]

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PRN: 2018016402633675	Eligibility Status: Provisional	Examination form No.: 055587 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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### Student's Personal Information

Student's Name: <b>MOHSIN MUNEER</b>	Mother's Name: MAYMOONA	Gender: Male
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Name in Vernacular Language: मोहसीन मुनीर
---

Address: chadoora distt budgam JAMMU AND KASHMIR
--

City: SRINAGAR, Taluka: chadoora, District: Badgam, State: Jammu and Kashmir, PIN: 191113
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Telephone no.:	Mobile no: 917006140945	Email : yatoomohsin2@gmail.com
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DOB: Mar 07, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 7405157 (Status: Pass)
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Exam form appearance type: Fresher
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### Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )

SN	Paper Code	Paper Name	AM - AT
1	85601	Financial Accounting VII	Th-UA [ ] ;Th-CA [ ]
2	85602	Cost Accounting IV	Th-UA [ ] ;Th-CA [ ]
3	85603	Financial Management III	Th-UA [ ] ;Th-CA [ ]
4	85604	Taxation V (Indirect Taxes III)	Th-UA [ ] ;Th-CA [ ]
5	85607	Economics Paper III (Indian Economy)	Th-UA [ ] ;Th-CA [ ]
6	UA_FFSVI.8	Project Work II	Pw-UA [ ] ;Pw-CA [ ]

Convocation Fee	Exam Form Fee	Exam Form Late Fee	Exam Form Super Late Fee
Examination Fees	Mark Statement Fee	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):
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Venue Preference (Code/Name):
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<b>To, Director, Board of Examination and Evaluations / The Controller Of Examination,</b> I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: <b>Vidyavihar</b>
	Date:

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
Date:		