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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2015016401880814	Eligibility Status: Eligible	Examination form No.: 126600 	Division/Section: A	Roll No.: 118
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JAISWAL ABHISHEK BISHWANATH	Mother's Name: ARUNA	Gender: Male
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Name in Vernacular Language: जयस्वाल अभिषेक बिस्वनाथ

Address: 202 RUKMINI APARTMENT PLOT 36A OPPOSITE MAZIDUN HIGH SCHOOL AIROLI SECTOR 8A

City: NAVI MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708

Telephone no.: Mobile no: 918898555023 Email : abhishekrocks1997@gmail.com

DOB: Jun 15, 1997 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-C7525) Exam Event: Mar-2016 Seat No: 2015016401880814 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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Pachakar

PRN: 2016016402052741	Eligibility Status: Eligible	Examination form No.: 126601 	Division/Section: A	Roll No.: 59
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: PACHAKAR PRASHANT GUNGA	Mother's Name: KALPANA	Gender: Male
Name in Vernacular Language: प्रशांत गुंगा पचकर		
Address: ROOM NO 402, BLD NO 27. MAHATMA JYOTIBA FULE SOCIETY MAHARASTRA NAGAR, MANKHURD (MUMBAI)		
City: MANKHURD, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400088		
Telephone no.:	Mobile no: 918692959283	Email : prashantpachakar@gmail.com
DOB: Sep 05, 1998	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330544 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ; Th-CA []
2	87003	Cyber Forensics	Th-UA [] ; Th-CA []
3	87005	Digital Image Processing	Th-UA [] ; Th-CA []
4	87006	Data Science	Th-UA [] ; Th-CA []
5	87007	Ethical Hacking	Th-UA [] ; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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: 2016016402052903	Eligibility Status: Eligible	Examination form No.: 126602 	Division/Section: A	Roll No.: 11	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: DEOLEKAR AMEYA KIRTIKUMAR	Mother's Name: MANISHA	Gender: Male
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Name in Vernacular Language: अमेय कीर्तिकुमार देवळेकर

Address: B-9/103, BRAHMAND PHASE 3, AZADNAGAR, G.B ROAD

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400607
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Telephone no.:	Mobile no: 918286429286	Email : ameyakd06@gmail.com
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DOB: Jun 06, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Nov-2018	Seat No: 7000551 (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)
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SN	Paper Code	Paper Name	AM - AT
1	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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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Vaibhav

PRN: 2016016402052957	Eligibility Status: Eligible	Examination form No.: 126603 	Division/Section: A	Roll No.: 26
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: HIRE VAIBHAV ANANDA	Mother's Name: SANGEETA	Gender: Male
Name in Vernacular Language: हिरे वैभव आनंदा		
Address: SUKESHANI GALLI MEHRA PLOT P.L. LOKHANDE MARG CHEMBUR		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400089		
Telephone no.:	Mobile no: 918692079897	Email : VAIBHAVHIRE99@GMAIL.COM
DOB: Aug 16, 1998	Category: Reserved (SC)	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)		Exam Event: Apr-2019
Seat No: 3320970 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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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Vivek Shah

PRN: 2016016402053052	Eligibility Status: Eligible	Examination form No.: 126604 	Division/Section: A	Roll No.: 93
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHAH VIVEK VINOD	Mother's Name: ANJU	Gender: Male
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Name in Vernacular Language: शाह विवेक विनोद

Address: 604 OM LAXMI SOCIETY BHANDAR ALI NEAR PRABHAT THEATRE THANE (W)400601

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

Telephone no.: 8108971511 Mobile no: 919967921344 Email : vshah349@gmail.com

DOB: Apr 04, 1998 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3320975 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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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Kapdoskar

PRN: 2016016402053067	Eligibility Status: Eligible	Examination form No.: 126605 	Division/Section: A	Roll No.: 41
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: KAPDOSKAR SIDDHESH VILAS	Mother's Name: VIBHAWARI	Gender: Male
Name in Vernacular Language: कापडोस्कर सिध्देश विलास		
Address: BLDG NO 28, ROOM NO 991, SUBHASH NAGAR, CHEMBUR, MUMBAI		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071		
Telephone no.:	Mobile no: 918879068747	Email :
DOB: Sep 07, 1998	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)		Exam Event: Apr-2019
Seat No: 3333355 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ; Th-CA []
2	87003	Cyber Forensics	Th-UA [] ; Th-CA []
3	87005	Digital Image Processing	Th-UA [] ; Th-CA []
4	87006	Data Science	Th-UA [] ; Th-CA []
5	87007	Ethical Hacking	Th-UA [] ; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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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Rishi

PRN: 2016016402053195	Eligibility Status: Eligible	Examination form No.: 126606 	Division/Section: A	Roll No.: 34
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JHALA DRUSTIBA NARENDRA	Mother's Name: ANANDBA	Gender: Female
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Name in Vernacular Language: ज़ाला दृष्टीब नरेंद्र

Address: DR.C.G ROAD, NATRAJ LAWN , OPP. SHALIMAR PETROL PUMP, JHULIANWADI, ROOM NO 508.

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074

Telephone no.:	Mobile no: 919619283951	Email :
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DOB: Nov 01, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3333353 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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



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Sayali

PRN: 2016016402053253	Eligibility Status: Eligible	Examination form No.: 126607 	Division/Section: A	Roll No.: 19
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GAWADE SAYALI SHYAMSUNDAR	Mother's Name: SNEHAL	Gender: Female
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Name in Vernacular Language: गावडे सायली श्यामसुंदर

Address: B/601, SHIVAM PARADISE C.H.S. LTD , L.B.S. ROAD BHANDUP (WEST)

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

Telephone no.: Mobile no: 919920199219 Email : sayaligawade992@gmail.com

DOB: Apr 05, 1998 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3333354 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Preeti Jayanti

PRN: 2016016402053292	Eligibility Status: Eligible	Examination form No.: 126608 	Division/Section: A	Roll No.: 22
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GOTHI PREETI JAYANTI	Mother's Name: AMRUTA	Gender: Female
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Name in Vernacular Language: गोष्टी प्रीती जयंती

Address: 317/16, SIDDHIVINAYAK SOCIETY, HINGWALA LANE, PANTNAGAR, GHATKOPAR EAST.

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

Telephone no.:	Mobile no: 919819320744	Email : preetigothi1997@gmail.com
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DOB: Jun 21, 1997	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320963 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Romil

PRN: 2016016402053357	Eligibility Status: Eligible	Examination form No.: 126609 	Division/Section: A	Roll No.: 114
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: VORA ROMIL PRAGNESH	Mother's Name: MANISHA	Gender: Male
Name in Vernacular Language: वोरा रोमिला प्रगनेश		
Address: B/203,GURUKRUPA HRISIKESH,NANDIVALI ROAD,NEAR SARVODAY PARK.		
City: DOMBIVALI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201		
Telephone no.:	Mobile no: 919167404595	Email : romilvora11@gmail.com
DOB: Apr 03, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330600 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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PRN: 2016016402053493	Eligibility Status: Eligible	Examination form No.: 126610 	Division/Section: A	Roll No.: 57
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MORE MANISH VINOD	Mother's Name: VAIBHAVI	Gender: Male
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Name in Vernacular Language: मोरे मनीष विनोद

Address: L/33,DADLANI PARK,BALKUM,THANE WEST

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400608

Telephone no.:	Mobile no: 919167271760	Email : manishmore971@yahoo.com
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DOB: Dec 10, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3333351 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Handwritten signature

PRN: 2016016402053574	Eligibility Status: Eligible	Examination form No.: 126611 	Division/Section: A	Roll No.: 89
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SARDHARA HEET GHANSHYAM	Mother's Name: ASHA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: हीत घनश्याम सरधारा

Address: A-1/75, KRISHNA DHAM SOCIETY, NR. VEENA NAGAR, LBS MARG, MULUND (WEST)

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

Telephone no.: 21644963	Mobile no: 919920404817	Email : h.sardhara@somaiya.edu
-------------------------	-------------------------	--------------------------------

DOB: Mar 10, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320933 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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)

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Gaikwad

PRN: 2016016402053624	Eligibility Status: Eligible	Examination form No.: 126612 	Division/Section: A	Roll No.: 15
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GAIKWAD ANIKET SIDDHARTH	Mother's Name: JAYSHREE	Gender: Male
---	-------------------------	--------------

Name in Vernacular Language: अनिकेत सिद्धार्थ गायकवाड

Address: OPP. DR. BABASAHEB AMBEDKAR HIGH SCHOOL, ANAND GALLI, MEHRA PLOT, P. L. LOKHANDE MARG.

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

Telephone no.:	Mobile no: 918425073056	Email : gaikwad1997aniket@gmail.com
----------------	-------------------------	-------------------------------------

DOB: Nov 06, 1997	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320960 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ; Th-CA []
2	87003	Cyber Forensics	Th-UA [] ; Th-CA []
3	87005	Digital Image Processing	Th-UA [] ; Th-CA []
4	87006	Data Science	Th-UA [] ; Th-CA []
5	87007	Ethical Hacking	Th-UA [] ; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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)

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12-12-2015

PRN: 2016016402053655	Eligibility Status: Eligible	Examination form No.: 126613 	Division/Section: A	Roll No.: 27
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JADHAV VIRAJ DILIP	Mother's Name: SHOBHA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: जाधव विराज दिलीप

Address: PLOT NO2/1 LAKSHMI NIVAS SAMRAT ASHOK NAGAR SHELL COLONY CHEMBUR MUMBAI 71

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071

Telephone no.:	Mobile no: 919167415502	Email : viraj27jadhav@gmail.com
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DOB: Jul 27, 1998	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320968 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Raj V.

PRN: 2016016402053663	Eligibility Status: Eligible	Examination form No.: 126614 	Division/Section: A	Roll No.: 69
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATEL RAJ VIJAY	Mother's Name: BHAVNA	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: पटेल राज विजय

Address: E 402, PLOT NO 20, SECTOR 11, NEELSIDHI RESIDENCY, KOPERKHAINA, NAVI MUMBAI

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

Telephone no.: 27541927 Mobile no: 919769984429 Email : rajvijaysankhla@gmail.com

DOB: Apr 14, 1998 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3320974 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Handwritten signature

PRN: 2016016402053686	Eligibility Status: Eligible	Examination form No.: 126615 	Division/Section: A	Roll No.: 44
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHAN FARAZ VAKEEL AHMED	Mother's Name: ATIYA BEGUM	Gender: Male
--	----------------------------	--------------

Name in Vernacular Language: **खान फराज़ वकील अहमद**

Address: 10/5 RANGWALA FHATIMA BAI CHAWL , SHAMBHAJI CHAOUK PARSIWADI

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

Telephone no.:	Mobile no: 918693818270	Email : Farazkhan1000001@gmail.com
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DOB: Aug 15, 1998	Category: Open	Physically Handicap: Orthopedic Disorder or Mentally Retarded
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Previous Latest Examination Details: Sem I(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 2016016402053686 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2016016402053783	Eligibility Status: Eligible	Examination form No.: 126616 	Division/Section: A	Roll No.: 94
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: SHAIKH IRSHAD ALTAF HUSEN	Mother's Name: SABRUNNISA	Gender: Male
Name in Vernacular Language: शेख इर्शाद अल्ताफ हुसेन		
Address: TARDEO HILL NO 2 NSS ROAD NARAYAN NAGAR GHATKOPAR (W)		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086		
Telephone no.:	Mobile no: 918879843260	Email : kharbatco@gmail.com
DOB: Mar 19, 1998	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Nov-2018	Seat No: 7000538 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Brijesh

PRN: 2016016402053872	Eligibility Status: Eligible	Examination form No.: 126617 	Division/Section: A	Roll No.: 110
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: UPADHYAY BRIJESH VINAY	Mother's Name: GEETA	Gender: Male
Name in Vernacular Language: उपाध्याय ब्रिजेश विनाय		
Address: A-2/4 SARASWATI BUILDING NAMDAR BALASAHEB DESAI SAHAKARI VASAHT LTD OPP HOME GAURD GHATKOPAR(W)		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084		
Telephone no.:	Mobile no: 919619124141	Email : brijurocks777@gmail.com
DOB: Jul 14, 1997	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320966 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Island@

PRN: 2017016400013841	Eligibility Status: Eligible	Examination form No.: 126618 	Division/Section: A	Roll No.: 74
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: POOJARY VRANDA KRISHNA	Mother's Name: SHOBHA	Gender: Female
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Name in Vernacular Language: पुजारी वृन्दा कृष्णा

Address: 06 Gopal niwas Lokmanya nagar bhandup west

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

Telephone no.: 022	Mobile no: 918693051287	Email : vrandapoojary2000@gmail.com
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DOB: May 23, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320946 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400040056	Eligibility Status: Eligible	Examination form No.: 126619 	Division/Section: A	Roll No.: 119
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: SINGH ARJUN RANAPRATAP	Mother's Name: SADHANA	Gender: Male
Name in Vernacular Language: सिंह अर्जुन राणाप्रताप		
Address: E-1,01, SAIVINAYAK PRAGATI C.H.S HARIBHAUPADA, HANUMAN NAGAR KALYAN(E)		
City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306		
Telephone no.:	Mobile no: 919819036517	Email : helloarjun.r.singh@gmail.com
DOB: Apr 12, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320954 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Shai

PRN: 2017016400123771	Eligibility Status: Eligible	Examination form No.: 126620 	Division/Section: A	Roll No.: 112
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: VISHWAKARMA SHAILESH SHIVBALI	Mother's Name: JANKI	Gender: Male
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Name in Vernacular Language: विश्वकर्मा शैलेश शिवबली

Address: A/403 SHREE SAI AMRUT APT OPP- C.H.S, SABE ROAD DIVA (E)

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

Telephone no.:	Mobile no: 919029466408	Email : VISHWAKARMASHAILESH73542@GMAIL.COM
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DOB: Oct 25, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320924 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400236857	Eligibility Status: Eligible	Examination form No.: 126621 	Division/Section: A	Roll No.: 83	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: FARIN ABDUL REHMAN	Mother's Name: FARJANA	Gender: Female
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Name in Vernacular Language: फारिन अब्दुल रहमान

Address: MS/RB/III/114/7 CENTRAL RAILWAY COLONY KURLA (EAST) MUMBAI

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

Telephone no.:	Mobile no: 918976594664	Email : FARINSHAIKH811@GMAIL.COM
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DOB: Nov 24, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320958 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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SRR

PRN: 2017016400839143	Eligibility Status: Eligible	Examination form No.: 126622 	Division/Section: A	Roll No.: 83
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: RANANAVARE SNEHAL RAJARAM	Mother's Name: MAHANANDA	Gender: Female
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Name in Vernacular Language: रणनवरे स्नेहल राजाराम

Address: ROOM NO. 450, BLDG NO. 14 PMGP COLONY MANKHURD WEST

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

Telephone no.:	Mobile no: 919892284915	Email : varshekadam123@gmail.com
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DOB: Oct 05, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330567 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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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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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Sneha

PRN: 2017016400839174	Eligibility Status: Eligible	Examination form No.: 126623 	Division/Section: A	Roll No.: 76
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PACHARANE SNEHA SHAM	Mother's Name: SANGITA	Gender: Female
---	------------------------	----------------

Name in Vernacular Language: पाचारणे स्नेहा शाम

Address: RAJGAD BLDG NO 60 /C ROOM NO 327 LALLUBHAI COMPOUND MANKHURD

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

Telephone no.:	Mobile no: 918454813502	Email : snehapacharane0111@gmail.com
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DOB: Feb 01, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330545 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400839255	Eligibility Status: Eligible	Examination form No.: 126624 	Division/Section: A	Roll No.: 88	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SARANG ADITYA PRABHAKAR	Mother's Name: PRATIKSHA	Gender: Male
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Name in Vernacular Language: सारंग आदित्य प्रभाकर

Address: B/7 Sai dham chawl Sai nagar

City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400042
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Telephone no.:	Mobile no: 918689964969	Email : adityasarang4@gmail.com
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DOB: Jan 14, 2000	Category: Reserved (SBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313358 (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)
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SN	Paper Code	Paper Name	AM - AT
1	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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:

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.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Shah

PRN: 2017016400839433	Eligibility Status: Eligible	Examination form No.: 126625 	Division/Section: A	Roll No.: 92
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHAH JINESHWARI NARESH	Mother's Name: BHARTI	Gender: Female
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Name in Vernacular Language: शाह जिनेश्वरी नरेश

Address: 3/32, SIMPLE APT, MANPADA ROAD, OPP AGRAWAL HALL, RAMWADI
--

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 421201
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Telephone no.:	Mobile no: 918879219713	Email : jinushah541@gmail.com
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DOB: Aug 23, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313365 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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):

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	Date:

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

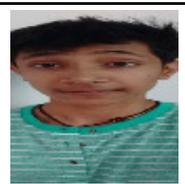
<http://mum.digitaluniversity.ac/>

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

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B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400840517	Eligibility Status: Provisional	Examination form No.: 126626 	Division/Section: A	Roll No.: 66
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: PATEL BHAVYA RAJESH	Mother's Name: VIMLA PATEL	Gender: Male
Name in Vernacular Language: भव्या		
Address: 401,e-wing,neel siddhi residency,op society,sector 11,koparkhairane 402,e-wing,neel siddhi residency,op society,sector 11,koparkhairane		
City: navi mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400709		
Telephone no.: 27541927	Mobile no: 919869381222	Email : bhavyapatel3200@gmail.com
DOB: Feb 03, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330552 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

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Jinal HM

PRN: 2017016400840831	Eligibility Status: Eligible	Examination form No.: 126627 	Division/Section: A	Roll No.: 56
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MOMAYA JINAL HITESH	Mother's Name: SONAL	Gender: Female
--	----------------------	----------------

Name in Vernacular Language: जिनल मोमाया

Address: B-44, S.P. Bhagat CHS, Kopar Cross Road, Dombivli (W)

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

Telephone no.: Mobile no: 919323440814 Email : sonalhmomaya@gmail.com

DOB: Apr 27, 2000 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3330542 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400840877	Eligibility Status: Eligible	Examination form No.: 126628 	Division/Section: A	Roll No.: 82	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: RAVAL DHARMIL RAJENDRA	Mother's Name: RITA	Gender: Male
---	---------------------	--------------

Name in Vernacular Language: धर्मिल रावल

Address: B6/103, LOK NISARG NEAR VAISHALI NAGAR MULUND W , MUMBAI 80

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

Telephone no.: 21646644	Mobile no: 919167313019	Email : dharmilrvl01@gmail.com
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DOB: Sep 28, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320962 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Ayaz

PRN: 2017016400840885	Eligibility Status: Provisional	Examination form No.: 126629 	Division/Section: A	Roll No.: 32
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: JARIA AYAZ MUKESH J	Mother's Name: HAMIDA	Gender: Male
Name in Vernacular Language: अयाज		
Address: 2/b/51 Taximens colony L.B.S marg kurla west Mumbai 400070		
City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070		
Telephone no.:	Mobile no: 919769698969	Email : ayazjaria786@gmail.com
DOB: Dec 27, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330522 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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>To, The Controller of Examination,</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: Vidyavihar</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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400841246	Eligibility Status: Eligible	Examination form No.: 126630 	Division/Section: A	Roll No.: 90
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAWANT RISHIKESH RAJAN	Mother's Name: TANVI	Gender: Male
---	----------------------	--------------

Name in Vernacular Language: सावंत ऋषिकेश राजन
--

Address: A/5,Vishwabharti.co.op.hsg.soc Indira Nagar, Kanjurmarg(E)

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042

Telephone no.:	Mobile no: 919821294919	Email : buntysawant29@gmail.com
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DOB: Sep 14, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330576 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400841327	Eligibility Status: Eligible	Examination form No.: 126631 	Division/Section: A	Roll No.: 85	<i>A.Sail.</i>
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: ASHISH VIJAY SAIL	Mother's Name: VANITA	Gender: Male
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Name in Vernacular Language: आशिष विजय साइल

Address: 8, Ganesh Darshan CHS Kulkarni Wadi, JMM Marg, Asalpha, Ghatkopar West

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

Telephone no.:	Mobile no: 917039879399	Email : ashish.sail99@gmail.com
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DOB: Oct 02, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330570 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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Hardik

PRN: 2017016400841455	Eligibility Status: Eligible	Examination form No.: 126632 	Division/Section: A	Roll No.: 111
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: HARDIK ASHOK VEGAD	Mother's Name: SUNITA	Gender: Male
Name in Vernacular Language:HINDU		
Address: 303,DEEPJYOTI APT, KISAN NAGAR 1, THANE 400604.		
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604		
Telephone no.:	Mobile no: 919022153528	Email : vegadhardik7@gmail.com
DOB: Jun 16, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313366 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

To, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400841745	Eligibility Status: Eligible	Examination form No.: 126633 	Division/Section: A	Roll No.: 48	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHONA BHARVI GAUTAM	Mother's Name: SHEETAL	Gender: Female
--	------------------------	----------------

Name in Vernacular Language: खोना भारवी गौतम

Address: A-203, Sai Paradise Sec-8/A, Plot No-64, Airoli

City: Navi Mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708

Telephone no.:	Mobile no: 919833619944	Email : bharvikhona@gmail.com
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DOB: Sep 19, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330533 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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PRN: 2017016400841881	Eligibility Status: Eligible	Examination form No.: 126634 	Division/Section: A	Roll No.: 17	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GANATRA KEYUR VASANT	Mother's Name: HEENA	Gender: Male
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Name in Vernacular Language: गणनात्रा केयूर वसंत
--

Address: 15/3,LAKSHMI VISNU CHS AHILYABAI CHOWK KALYAN (W)
--

City: MUMBAI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421301
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Telephone no.:	Mobile no: 918080105417	Email : ganatra023@gmail.com
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DOB: Dec 23, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330509 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400841896	Eligibility Status: Eligible	Examination form No.: 126635 	Division/Section: A	Roll No.: 77
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PRAJAPATI SACHIN NARAYANBHAI	Mother's Name: REKHABEN	Gender: Male
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Name in Vernacular Language: प्रजापती सचिन नारायणभाई
--

Address: SS III ROOM NO327 SECTOR 07 KOPARKHAIRANE
--

City: NAVI MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400709
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Telephone no.:	Mobile no: 919619342599	Email : prajapatisachin77@gmail.com
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DOB: Jul 19, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330561 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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:

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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Taniya

PRN: 2017016400842114	Eligibility Status: Eligible	Examination form No.: 126636 	Division/Section: A	Roll No.: 49
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: KULKARNI TANIYA RAVINDRA	Mother's Name: RACHANA	Gender: Female
Name in Vernacular Language: taniya		
Address: A-505, lambodar park nr. saya park kalwa,thane		
City: thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605		
Telephone no.:	Mobile no: 918108533133	Email : taniyarkulkarni@gmail.com
DOB: Oct 12, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330534 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

<p>To, The Controller of Examination,</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: Vidyavihar</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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Manan

PRN: 2017016400842385	Eligibility Status: Eligible	Examination form No.: 126637 	Division/Section: A	Roll No.: 113
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MANAN RAJEEV VORA	Mother's Name: RITA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: manan

Address: B/12 Mahindra Park, Narayan Nagar L.B.S Marg, Ghatkopar West Mumbai
--

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

Telephone no.: 25140250	Mobile no: 919619672431	Email : vora.rajeev@yahoo.in
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DOB: Oct 07, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313351 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ; Th-CA []
2	87003	Cyber Forensics	Th-UA [] ; Th-CA []
3	87005	Digital Image Processing	Th-UA [] ; Th-CA []
4	87006	Data Science	Th-UA [] ; Th-CA []
5	87007	Ethical Hacking	Th-UA [] ; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400842466	Eligibility Status: Eligible	Examination form No.: 126638 	Division/Section: A	Roll No.: 16
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GALA MUKUL RAJESH	Mother's Name: SANDHYA	Gender: Male
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Name in Vernacular Language: गाला मुकुल राजेश

Address: 401 AMBERPRIDE, SHANTI NAGAR, NEAR JAIN TEMPLE, DOMIVLI EAST 401 AMBERPRIDE, SHANTI NAGAR, NEAR JAIN TEMPLE, DOMIVLI EAST
--

City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201
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Telephone no.:	Mobile no: 919029242910	Email : mukulgala940@gmail.com
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DOB: Mar 29, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330508 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Tejale

PRN: 2017016400842691	Eligibility Status: Eligible	Examination form No.: 126639 	Division/Section: A	Roll No.: 64
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: PARAB TEJAS VILAS	Mother's Name: SUGANDHA	Gender: Male
Name in Vernacular Language: परब तेजस विलास		
Address: BANDIWADE RAYKARWADI MALVAN SINDHUDURG		
City: MALVAN, Taluka: Malvan, District: Sindhudurg, State: Maharashtra, PIN: 416608		
Telephone no.:	Mobile no: 917875194846	Email : tejasparab3899@gmail.com
DOB: Aug 03, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)		Exam Event: Apr-2019
		Seat No: 3330550 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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

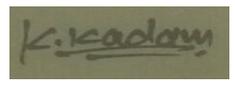
<http://mum.digitaluniversity.ac/>

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400842717	Eligibility Status: Eligible	Examination form No.: 126640 	Division/Section: A	Roll No.: 37
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KADAM KRISHNAKANT DATTATRAY	Mother's Name: JAYASHREE	Gender: Male
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Name in Vernacular Language: कृष्णकांत

Address: 101, 1st Floor, Mulund Mayur Chs, Mhada Mulund East

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400081

Telephone no.:	Mobile no: 919930145595	Email : kadamkrishu17@gmail.com
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DOB: Oct 17, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 2017016400842717 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400842764	Eligibility Status: Eligible	Examination form No.: 126641 	Division/Section: A	Roll No.: 102
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: SUMARIA ANKIT RAJENDRA	Mother's Name: VARSHA	Gender: Male
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Name in Vernacular Language: अंकित

Address: A/6, PRABHU CHHAYA, SHRIKHANDE WADI, DOMBIVALI EAST A/6, PRABHU CHHAYA, SHRIKHANDE WADI, DOMBIVALI EAST

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

Telephone no.:	Mobile no: 919619335258	Email : ankisum2000@gmail.com
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DOB: Mar 09, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330589 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400842787	Eligibility Status: Eligible	Examination form No.: 126642 	Division/Section: A	Roll No.: 79
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: PUROHIT AMIT SINGH NARAYANSINGH	Mother's Name: SANTOSH	Gender: Male
Name in Vernacular Language: पुरोहित अमितसिंघ नारायण		
Address: ROOM NO. 703 BUILDING NO.3 VISHRANTI CO-OP HOUSING SOCIETY SAMTA COLONY PANTNAGAR		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075		
Telephone no.:	Mobile no: 919967030344	Email : SARTAPE45@GMAIL.COM
DOB: Apr 01, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330563 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400843117	Eligibility Status: Eligible	Examination form No.: 126643 	Division/Section: A	Roll No.: 115
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: WALANJ MANALI MANGESH	Mother's Name: NIRMALA	Gender: Female
Name in Vernacular Language: वाळंज मनाली मंगेश		
Address: room no 9, pallavi apartment, shivaji nagar, 2nd rabodi thane		
City: thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601		
Telephone no.:	Mobile no: 919987540946	Email : manawalanj22@gmail.com
DOB: Sep 22, 1999	Category: Reserved (SC)	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)		Exam Event: Apr-2019
Seat No: 3330601 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400843133	Eligibility Status: Eligible	Examination form No.: 126644 	Division/Section: A	Roll No.: 6	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BHANDARKAR SNEHAL MANGESH	Mother's Name: VAISHALI	Gender: Female
--	-------------------------	----------------

Name in Vernacular Language: स्नेहल

Address: B-402 Sadanand Villa, Goggrasswadi Patharli Road

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

Telephone no.:	Mobile no: 919619481166	Email : snehalbhandarkar6@gmail.com
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DOB: Mar 08, 2000	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330499 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400843156	Eligibility Status: Provisional	Examination form No.: 126645 	Division/Section: A	Roll No.: 116	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JOSHUA LERIN ZACHARIA	Mother's Name: SUMA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: ज़ोशुआ लेरिन ज़चरीअ

Address: 103 B Wing Kaveri Society Janardhan Patil Road Diamond Garden Chembur

City: Mumbai , Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071

Telephone no.: 25206274	Mobile no: 919833743925	Email : zacler19@gmail.com
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DOB: Jan 09, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320945 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Pooja

PRN: 2017016400843504	Eligibility Status: Eligible	Examination form No.: 126646 	Division/Section: A	Roll No.: 55
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MISHRA POOJA HARINATH	Mother's Name: KANCHAN	Gender: Female
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Name in Vernacular Language: मिश्रा पूजा हरिनाथ

Address: 6/4, RAJKAMAL CHAWL HARIYALI VILLAGE, GROUP NO.4

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

Telephone no.:	Mobile no: 918286986241	Email : ritumishra391@gmail.com
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DOB: Aug 09, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330541 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400843663	Eligibility Status: Provisional	Examination form No.: 126647 	Division/Section: A	Roll No.: 109
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: TIWARI SHANI ANIL KUMAR	Mother's Name: ANITA	Gender: Male
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Name in Vernacular Language: तिवारी शनी अनिल कुमार

Address: dombivli east , manpada road , opp to kasturi plaza malhar palace , building no. 3 , flat no. 404

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

Telephone no.:	Mobile no: 919004778023	Email : powerofmytower29031998@gmail.com
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DOB: Mar 29, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320923 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Hardik

PRN: 2017016400843736	Eligibility Status: Eligible	Examination form No.: 126648 	Division/Section: A	Roll No.: 29
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: JAIN HARDIK JAGDISHKUMAR	Mother's Name: REKHA	Gender: Male
Name in Vernacular Language: जैन हार्दिक jagdishkumar		
Address: shyam niwas chawl 2/16, link road sakinaka, mumbai 400072		
City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072		
Telephone no.: 28526199	Mobile no: 919967369268	Email : hardik240499@gmail.com
DOB: Apr 24, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330519 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Sachin

PRN: 2017016400843767	Eligibility Status: Provisional	Examination form No.: 126649 	Division/Section: A	Roll No.: 98
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHINDE SACHIN CHANDRAKANT	Mother's Name: BHARATI	Gender: Male
---	------------------------	--------------

Name in Vernacular Language: शिंदे सचिन चंद्रकांत

Address: k/2 shree krishna soc. sunderbaug kamani

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

Telephone no.:	Mobile no: 917506294529	Email : shindesachin2110@gmail.com
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DOB: Oct 21, 1999	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320921 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Shruti

PRN: 2017016400843984	Eligibility Status: Eligible	Examination form No.: 126650 	Division/Section: A	Roll No.: 61
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PADAYA SHRUTI DINESH	Mother's Name: VARSHA	Gender: Female
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Name in Vernacular Language: श्रुती

Address: B-207 MANAVDRISHTI SOCIETY OPP. KURLA COURT L.B.S ROAD

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

Telephone no.:	Mobile no: 919930677099	Email : shrutidpadaya@gmail.com
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DOB: Oct 21, 1999	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330546 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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: 2017016400844071	Eligibility Status: Eligible	Examination form No.: 126651 	Division/Section: A	Roll No.: 99	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHIRKE RUTUJA SUNIL	Mother's Name: SUPRIYA	Gender: Female
--	------------------------	----------------

Name in Vernacular Language: शिर्के रतुजा सुनील

Address: 183/6610 KANNAMWAR NAGAR 1 VIKHROLI [EAST]

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

Telephone no.:	Mobile no: 918108605767	Email : Rutuja.shirke123@gmail.com
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DOB: Sep 23, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330582 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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):

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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.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Jigar

PRN: 2017016400844233	Eligibility Status: Eligible	Examination form No.: 126652 	Division/Section: A	Roll No.: 1
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JIGAR HARSHAD ACHARYA	Mother's Name: KIRAN	Gender: Male
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Name in Vernacular Language: जिगर

Address: 4,HIRA BHUVAN,BEHIND KOTESHWAR DEEP,M.V.R.S MARG,M.S.E.B ROAD BHANDUP-WEST,MUMBAI-400078

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

Telephone no.:	Mobile no: 919833766615	Email : jacharya58@gmail.com
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DOB: Mar 02, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320967 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400844287	Eligibility Status: Eligible	Examination form No.: 126653 	Division/Section: A	Roll No.: 42	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KASALE PRATIK SURESH	Mother's Name: SANYUKTA	Gender: Male
---	-------------------------	--------------

Name in Vernacular Language: कासले प्रतिक सुरेश

Address: SAMRAT ASHOK NAGAR, OPPOSITE NAVJIVAN SOCIETY, R.C. MARG, CHEMBUR, MUMBAI - 400074

City: MUMBAI SUBURBAN, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074
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Telephone no.:	Mobile no: 918108560959	Email : sagar.kirloskar@ves.ac.in
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DOB: Nov 20, 1999	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313357 (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)
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SN	Paper Code	Paper Name	AM - AT
1	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400844411	Eligibility Status: Eligible	Examination form No.: 126654 	Division/Section: A	Roll No.: 71	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATIL YASH KRISHNAKANT	Mother's Name: MINAL	Gender: Male
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Name in Vernacular Language: पाटील यश कृष्णकांत

Address: PARVATI SADAN AT POST- SARAL TALUKA-ALIBAG

City: ALIBAG, Taluka: Alibag, District: Raigad, State: Maharashtra, PIN: 402209

Telephone no.: 249044	Mobile no: 918805770026	Email : yashpatil84650@gmail.com
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DOB: May 21, 2000	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330555 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Bhavi Ka Jain

PRN: 2017016400844531	Eligibility Status: Eligible	Examination form No.: 126655 	Division/Section: A	Roll No.: 28
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: JAIN BHAVIKA SURESH	Mother's Name: BHAGYAVANTI	Gender: Female
Name in Vernacular Language: BHAVIKA		
Address: 401, SHIVDHAM CHS. SEC 20/C AIROLI, NAVIMUMBAI		
City: navi mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708		
Telephone no.:	Mobile no: 917045229510	Email : motawatrakhi@gmail.com
DOB: Apr 08, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330518 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

<p>To, The Controller of Examination,</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: Vidyavihar</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:		



University of Mumbai, Mumbai

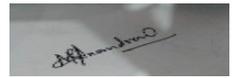
<http://mum.digitaluniversity.ac/>

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400844585	Eligibility Status: Eligible	Examination form No.: 126656 	Division/Section: A	Roll No.: 2
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: ANANDRAO MAYURESH RAJENDRA	Mother's Name: RAJASHREE	Gender: Male
Name in Vernacular Language: आनंदराव मयुरेश राजेंद्र		
Address: shivdarshan estate room no 2 jambulpada asalpa ghatkopar west		
City: ghatkopar, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086		
Telephone no.:	Mobile no: 918108767570	Email : anandramayuresh@gmail.com
DOB: Apr 29, 1999	Category: Reserved (OBC)	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)		Exam Event: Apr-2019
Seat No: 3320948 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Medha

PRN: 2017016400844763	Eligibility Status: Eligible	Examination form No.: 126657 	Division/Section: A	Roll No.: 43
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHAIRNAR MEDHA HEMANT	Mother's Name: REKHA	Gender: Female
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Name in Vernacular Language: MEDHA

Address: C-102, Jai Mata Di Cwing CHS Station Road Opp Sarswant Bank
--

City: Kalwa, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605
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Telephone no.:	Mobile no: 919699605580	Email : hrkhairnar8594@gmail.com
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DOB: Mar 30, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330530 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ; Th-CA []
2	87003	Cyber Forensics	Th-UA [] ; Th-CA []
3	87005	Digital Image Processing	Th-UA [] ; Th-CA []
4	87006	Data Science	Th-UA [] ; Th-CA []
5	87007	Ethical Hacking	Th-UA [] ; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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:

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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400844821	Eligibility Status: Eligible	Examination form No.: 126658 	Division/Section: A	Roll No.: 68
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: PATEL HEMANG AMRUT	Mother's Name: DAKSHA	Gender: Male
Name in Vernacular Language: Hemang		
Address: Brahmand ph-1 co-op. hsg. Soc. Bldg-5/203, Azadnagar Thane(west)		
City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400607		
Telephone no.:	Mobile no: 919892956773	Email : hemangpatel0310@gmail.com
DOB: Oct 03, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313364 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

To, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400844933	Eligibility Status: Eligible	Examination form No.: 126659 	Division/Section: A	Roll No.: 103
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SYED MOHAMMED ADNAN YUNUS	Mother's Name: FARZANA BANU	Gender: Male
--	-----------------------------	--------------

Name in Vernacular Language: सय्यद मोहम्मद अदनान युनुस

Address: C-401, ALLIED COMPLEX SHARIFA ROAD, AMRUT NAGAR

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

Telephone no.:	Mobile no: 91771801127	Email : adnansayyed1000@gmail.com
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DOB: Jan 16, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330591 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400844987	Eligibility Status: Eligible	Examination form No.: 126660 	Division/Section: A	Roll No.: 52
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MANGE VATSAL MAHESH	Mother's Name: KAVITA	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: MANGE VATSAL MAHESH
--

Address: 17, mathuresh nagar, 4th floor gulshan galli mulund west 400080
--

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

Telephone no.:	Mobile no: 919820970899	Email : vatsalmange@gmail.com
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DOB: Aug 07, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320973 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ; Th-CA []
2	87003	Cyber Forensics	Th-UA [] ; Th-CA []
3	87005	Digital Image Processing	Th-UA [] ; Th-CA []
4	87006	Data Science	Th-UA [] ; Th-CA []
5	87007	Ethical Hacking	Th-UA [] ; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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S.D Shirke

PRN: 2017016400845097	Eligibility Status: Eligible	Examination form No.: 126661 	Division/Section: A	Roll No.: 100
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SUSHANT DATTARAM SHIRKE	Mother's Name: RAJSHREE	Gender: Male
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Name in Vernacular Language: सुशांत दत्ताराम शिर्के

Address: H/905, New P.M.G.P Mhada colony Mulund (East)
--

City: Mulund, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400081

Telephone no.:	Mobile no: 919930142457	Email : sushantshirke1508@gmail.com
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DOB: Aug 15, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320956 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400845341	Eligibility Status: Eligible	Examination form No.: 126662 	Division/Section: A	Roll No.: 76
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: POTTATHUPARAMBIL CALVIN JOB	Mother's Name: MARY	Gender: Male
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Name in Vernacular Language: पोतात्पाराम्बील कॅल्विन जॉब

Address: Justine Villa, Room No 5 Opp Block no 722-A-1444 Sahyadri Nagar

City: Ulhasnagar, Taluka: Ulhasnagar, District: Thane, State: Maharashtra, PIN: 421005

Telephone no.:	Mobile no: 918007746747	Email : calvinjob007@gmail.com
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DOB: Sep 19, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330560 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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:

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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400845395	Eligibility Status: Eligible	Examination form No.: 126663 	Division/Section: A	Roll No.: 67
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: PATEL HARSH HITESH	Mother's Name: PUSHPALATA	Gender: Male
Name in Vernacular Language: HARSH		
Address: A-15, CHHADVA NAGAR , MATCH FACTORY LANE KURLA (WEST)		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070		
Telephone no.:	Mobile no: 919619354813	Email : habbi.99@gmail.com
DOB: May 19, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330553 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400845654	Eligibility Status: Eligible	Examination form No.: 126664 	Division/Section: A	Roll No.: 58
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: NAIKAR GANAPATHY SHANKAR	Mother's Name: MAGESHWARI	Gender: Male
---	---------------------------	--------------

Name in Vernacular Language: नाईकर गणपथ्य शंकर

Address: SUBHASH NAGAR SHIV SHENA SHAKHA, NEAR PET OXFORD SCHOOL ULHASNAGAR- 3

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

Telephone no.:	Mobile no: 919766583443	Email : ganapathynaikar0000@gmail.com
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DOB: Jul 15, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320920 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400845685	Eligibility Status: Eligible	Examination form No.: 126665 	Division/Section: A	Roll No.: 5
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: BALKUR MANJUSHREE SHEKAR	Mother's Name: KUSUMA	Gender: Female
Name in Vernacular Language: बलकुर मंजुश्री SHEKAR		
Address: BLDG 3/A ROOM NO.202, EKTA COOPERATIVE HOUSING SOCIETY KARVENAGAR , KANJURMARG [E]		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042		
Telephone no.:	Mobile no: 917738438283	Email : mbalkur99@gmail.com
DOB: Sep 06, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330498 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Mamta

PRN: 2017016400845774	Eligibility Status: Eligible	Examination form No.: 126666 	Division/Section: A	Roll No.: 23
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GUPTA MAMTA CHHOTELAL	Mother's Name: SHASHI	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: ममता

Address: SHOP NO.5, JAI JAI GAURI SHANKAR CHAWL SARVODAYA NAGAR BHANDUP WEST
--

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

Telephone no.:	Mobile no: 917208267726	Email : niranjangupta12795@gmail.com
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DOB: Jun 09, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 909822 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400845855	Eligibility Status: Eligible	Examination form No.: 126667 	Division/Section: A	Roll No.: 25
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: HALDANKAR PRATHMESH SANTOSH	Mother's Name: SANJANA	Gender: Male
--	------------------------	--------------

Name in Vernacular Language: हळदणकर प्रथमेश संतोष

Address: 2/7 Rambhujarat chaudry chawl Pratap Nagar Road

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

Telephone no.:	Mobile no: 917045701298	Email : hprathmesh279@gmail.com
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DOB: May 27, 1999	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320965 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Sagar

PRN: 2017016400845905	Eligibility Status: Eligible	Examination form No.: 126668 	Division/Section: A	Roll No.: 84
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SABBANI SAGAR SWAMI SARASWATI	Mother's Name: SARASWATI	Gender: Male
--	--------------------------	--------------

Name in Vernacular Language: साबबानी सागर स्वामी सरस्वती

Address: X104/15 GODREJ STATION SIDE COLONY PIROJSHA NAGAR VIKHROLI (E)

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

Telephone no.:	Mobile no: 919920342070	Email : sagarsabbani97@gmail.com
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DOB: Sep 09, 1996	Category: Reserved (SBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320932 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Manoj

PRN: 2017016400846166	Eligibility Status: Eligible	Examination form No.: 126669 	Division/Section: A	Roll No.: 14
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: FULWADIYA MANOJ NANDKISHOR	Mother's Name: CHANDRAMUKHI	Gender: Male
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Name in Vernacular Language: manoj

Address: 3/22, THAKKAR BAPPA COLONY C.S.T ROAD CHEMBUR MUMBAI

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071

Telephone no.:	Mobile no: 919930804875	Email : manojfulwadiya6789@gmail.com
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DOB: Nov 02, 1999	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320969 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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:

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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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(Handwritten signature)

PRN: 2017016400846174	Eligibility Status: Eligible	Examination form No.: 126670 	Division/Section: A	Roll No.: 39
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KALAL NANDITA NARSHIMLU	Mother's Name: SHIVAMMA	Gender: Female
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Name in Vernacular Language: कलाल नंदिता नरशीमळू

Address: ROOM NO 307 TRIMURTI CHAWL SANAJY NAGAR GAO DEVI ROAD MUMBRA

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

Telephone no.:	Mobile no: 919930736155	Email : nanditakalal99@gmail.com
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DOB: Oct 28, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330528 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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

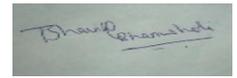
<http://mum.digitaluniversity.ac/>

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400846247	Eligibility Status: Provisional	Examination form No.: 126671 	Division/Section: A	Roll No.: 7
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: BHANUSHALI BHAVIK JAGDISH	Mother's Name: VARSHA	Gender: Male
Name in Vernacular Language: BHANUSHALI BHAVIK JAGDISH		
Address: A-601, DWARKA CHS LIMITED BUL NO.7 SHASTRI NAGAR GOREGAON WEST MUMBAI 400104		
City: MUMBAI, Taluka: , District: Mumbai Suburban, State: Maharashtra, PIN: 400104		
Telephone no.:	Mobile no: 918306656001	Email : bhavikbhanushali83@gmail.com
DOB: May 05, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320937 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

<p>To, The Controller of Examination,</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: Vidyavihar</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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400846402	Eligibility Status: Eligible	Examination form No.: 126672 	Division/Section: A	Roll No.: 86	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAPKALE AKSHAY RAMESH	Mother's Name: USHA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: सपकाळे अक्षय रमेश

Address: A2/12/605, shivneri building DESHMUKH HOMES, NEAR TATA POWER HOUSE SHIL ROAD, DOMBIVLI (E)

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

Telephone no.:	Mobile no: 917738917500	Email : akshaysapkale@gmail.com
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DOB: Aug 21, 1997	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313370 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Bhosale

PRN: 2017016400846433	Eligibility Status: Eligible	Examination form No.: 126673 	Division/Section: A	Roll No.: 10
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BHOSALE SOURABH NITIN	Mother's Name: HEMLATA	Gender: Male
--	------------------------	--------------

Name in Vernacular Language: भोसले सौरभ नितिन

Address: 1/2 ,jerry villa chawl ,gomes colony Kanjurmarg(east) Mumbai

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042

Telephone no.: Mobile no: 918425904667 Email : sourabhbosale161@gmail.com

DOB: Nov 03, 1999 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem II(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3313350 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400846456	Eligibility Status: Eligible	Examination form No.: 126674 	Division/Section: A	Roll No.: 70	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATIL NIRANJAN ANANT	Mother's Name: ASMITA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: पाटील निरंजन अनंत
--

Address: rm.509,shri swami samarth apt lokmanya nagar pada no.1 pokhran rd.1, thane west
--

City: th, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606

Telephone no.:	Mobile no: 919987670272	Email : patilniranjan000@gmail.com
----------------	-------------------------	------------------------------------

DOB: Oct 25, 1998	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320964 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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:

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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Pinal Jain

PRN: 2017016400846472	Eligibility Status: Provisional	Examination form No.: 126675 	Division/Section: A	Roll No.: 30
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JAIN PINAL NARESH	Mother's Name: JAYA JAIN	Gender: Female
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Name in Vernacular Language: जैन पीनल नारेश

Address: 505/B-WING PRANAY KIRAN CAMA LANE GHATKOPAR WEST

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

Telephone no.:	Mobile no: 919892628618	Email : PINALJAIN2051@gmail.com
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DOB: Jan 25, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem I(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 2017016400846472 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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:

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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400846603	Eligibility Status: Eligible	Examination form No.: 126676 	Division/Section: A	Roll No.: 78
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: PUJARE TEJAL DEEPAK	Mother's Name: PRATIKSHA	Gender: Female
Name in Vernacular Language: तेजल		
Address: ROOM NO 1, PATKAR CHAWL, PATKAR COMPUND, TULSHETPADA, BHANDUP WEST		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078		
Telephone no.:	Mobile no: 919833230447	Email : tejalpujare01@gmail.com
DOB: Oct 12, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330562 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Thakare

PRN: 2017016400846634	Eligibility Status: Eligible	Examination form No.: 126677 	Division/Section: A	Roll No.: 104
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: THAKARE SANKET VILAS	Mother's Name: PALLAVI	Gender: Male
Name in Vernacular Language: ठाकरे संकेत विलास		
Address: VILAS THAKARE N-42/JC-3/7/3 RAIGAD CHOWK PAVAN NAGAR CIDCO NASHIK		
City: NASHIK, Taluka: Nashik, District: Nashik, State: Maharashtra, PIN: 422009		
Telephone no.:	Mobile no: 917887441910	Email : ss.thakare2026@gmail.com
DOB: Jul 30, 1999	Category: Reserved (NT-1 (NT-B))	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)		Exam Event: Apr-2019
		Seat No: 3330592 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400846754	Eligibility Status: Eligible	Examination form No.: 126678 	Division/Section: A	Roll No.: 80
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: RUSHABH ANIL RAJPUT	Mother's Name: KALPANA	Gender: Male
Name in Vernacular Language: Rushabh anil rajput		
Address: Ganesh darshan ,765 Sector 4. ,ghansoli Navi mumbai		
City: Ghansoli, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400701		
Telephone no.:	Mobile no: 919819589406	Email : rushabhraj9@gmail.com
DOB: Nov 06, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330565 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

<p>To, The Controller of Examination,</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: Vidyavihar</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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400846882	Eligibility Status: Provisional	Examination form No.: 126679 	Division/Section: A	Roll No.: 117
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: ASHISH GANGAN	Mother's Name: AJITHA	Gender: Male
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Name in Vernacular Language: आशिष गंगन

Address: Ashish Nivas, Navy compound, Chaitanya nagar, opp IIT main gate, Powai, Mumbai - 400076

City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400076

Telephone no.:	Mobile no: 919594347964	Email : ashishgangan25@gmail.com
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DOB: Apr 25, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330510 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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S.K. Thakare

PRN: 2017016400846955	Eligibility Status: Eligible	Examination form No.: 126680 	Division/Section: A	Roll No.: 105	S.K. Thakare
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: THAKARE SURAJ KRISHNA	Mother's Name: SHARDA	Gender: Male
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Name in Vernacular Language: सुरज

Address: 161/25 NCH COLONY LBS MARG KANJURMARG WEST

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

Telephone no.:	Mobile no: 918286772862	Email : suraj61thakare62@gmail.com
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DOB: Feb 10, 1999	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330593 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400847204	Eligibility Status: Eligible	Examination form No.: 126681 	Division/Section: A	Roll No.: 54	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MEHTA RIDDHISH NIRMAL	Mother's Name: RAJKUMARI	Gender: Male
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Name in Vernacular Language: मेहता रिद्धीशी निर्मल

Address: 7 AMIRKHAN NIWAS TAGORE NAGAR1 VIKHROLI (E)

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

Telephone no.:	Mobile no: 918692880931	Email : RIDDHISHMEHTA246@YAHOO.COM
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DOB: Jun 24, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313367 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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):

<p>To, The Controller of Examination,</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: Vidyavihar</p> <p>Date:</p> <p>Student's Signature</p>
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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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Jhanvi

PRN: 2017016400847266	Eligibility Status: Eligible	Examination form No.: 126682 	Division/Section: A	Roll No.: 65
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: JHANVI RAKESH PARDESHI	Mother's Name: SHALINI	Gender: Female
Name in Vernacular Language: जाह्नवी राकेश परदेशी		
Address: A 7 504 DALEN CHARM CITY NEAR VINAYAK PARK MANDA TITWALA EAST TAL KALYAN DIST THANE		
City: TITWALA, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421605		
Telephone no.:	Mobile no: 919594357290	Email : pardeshijhanvi98@gmail.com
DOB: May 17, 1998	Category: Reserved (OBC)	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)		Exam Event: Apr-2019
Seat No: 3330551 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400847371	Eligibility Status: Provisional	Examination form No.: 126683 	Division/Section: A	Roll No.: 73	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: POLADIA BHAVY HARSHAL	Mother's Name: ALPA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: पोलडिया भव्य

Address: B/5 Chitra Tambe Nagar Mulund West

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

Telephone no.: 25676898	Mobile no: 919004240789	Email : bhavypoladia5@gmail.com
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DOB: Apr 09, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330557 (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)
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SN	Paper Code	Paper Name	AM - AT
1	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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:

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

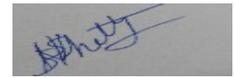
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400847421	Eligibility Status: Eligible	Examination form No.: 126684 	Division/Section: A	Roll No.: 97
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: SHETTY NISHANT SANTOSH	Mother's Name: TEJASHREE	Gender: Male
Name in Vernacular Language: Nishant		
Address: Narayan park RM no.101 airoli goan airoli navi Mumbai-400708 Near shivneri hotel		
City: Airoli, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708		
Telephone no.:	Mobile no: 918976859400	Email : nishantshetty001@gmail.com
DOB: May 04, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330580 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

To, 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

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Kishan

PRN: 2017016400847491	Eligibility Status: Eligible	Examination form No.: 126685 	Division/Section: A	Roll No.: 75
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KISHAN GHANSHYAM PORIYA	Mother's Name: RANJANBEN	Gender: Male
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Name in Vernacular Language: किशन

Address: 8,Sita Nagar,D.D.U Marg,Mulund-(WEST) 8,Sita Nagar,D.D.U Marg,Mulund-(WEST)

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

Telephone no.:	Mobile no: 919619026199	Email : kishan.poriya99@gmail.com
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DOB: Oct 03, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320957 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Viraj Dhila

PRN: 2017016400847525	Eligibility Status: Eligible	Examination form No.: 126686 	Division/Section: A	Roll No.: 12
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: VIRAJKETANDHILA	Mother's Name: BHAVNA	Gender: Male
Name in Vernacular Language: विराज		
Address: 19/23, GEETA BHAVAN , ZAVER ROAD, MULUND WEST ZAVER ROAD		
City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080		
Telephone no.: 5684710	Mobile no: 919869488233	Email : writetovirajdhila@gmail.com
DOB: Mar 23, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313362 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Matele

PRN: 2017016400847541	Eligibility Status: Eligible	Examination form No.: 126687 	Division/Section: A	Roll No.: 53
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MATELE SAHIL PRABHAKAR	Mother's Name: SHOBHA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: मातेला साहिल प्रभाकर

Address: 2/1775,shiv colony,sec -1,airoli near shiv colony ground

City: navi mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708

Telephone no.:	Mobile no: 919702350924	Email : sahilmatele001@gmail.com
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DOB: Sep 23, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330539 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Raksha

PRN: 2017016400847556	Eligibility Status: Provisional	Examination form No.: 126688 	Division/Section: A	Roll No.: 40
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KALE RAKSHA SUBHASH	Mother's Name: SHILPA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: काले रक्षा सुभाष

Address: 654, 518, VRUNDAVAN SOC., RAIGAD VIBHAG, VIKHROLI PARK SITE, VIKHROLI WEST, MUMBAI

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

Telephone no.:	Mobile no: 918291574187	Email :
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DOB: Sep 15, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 909826 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400847692	Eligibility Status: Provisional	Examination form No.: 126689 	Division/Section: A	Roll No.: 33	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: HIREN AJAY JETHVA	Mother's Name: MANJULA	Gender: Male
--	------------------------	--------------

Name in Vernacular Language: हिरेन अजय जेठवा

Address: 16-A, 2nd floor shushila sadan (gaiwala building) MULUND (W), MUMBAI -80

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

Telephone no.:	Mobile no: 918451932619	Email : hirenjethva33@gmail.com
----------------	-------------------------	---------------------------------

DOB: Apr 12, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320944 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Satish

PRN: 2017016400847796	Eligibility Status: Provisional	Examination form No.: 126690 	Division/Section: A	Roll No.: 8
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: BHANUSHALI SATISH MAHENDRA	Mother's Name: HANSA	Gender: Male
Name in Vernacular Language: सतीश		
Address: a/14, sylvester house d souza wadi		
City: MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604		
Telephone no.:	Mobile no: 917208607179	Email : bhanushalisatish5555@gmail.com
DOB: Feb 23, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320934 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400848463	Eligibility Status: Eligible	Examination form No.: 126691 	Division/Section: A	Roll No.: 20	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GOHIL MITKUMAR BHARATSINGH	Mother's Name: MAKUNVERBA	Gender: Male
---	---------------------------	--------------

Name in Vernacular Language: गोहिल मितकुमार भारतसिंह

Address: Room no. 1/2 sane guruji nagar n.s.s road Sant Dyneshwar Chawl Ghatkopar west

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

Telephone no.:	Mobile no: 919833078208	Email : gohilmit6062@gmail.com
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DOB: Jul 15, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320935 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400848575	Eligibility Status: Eligible	Examination form No.: 126692 	Division/Section: A	Roll No.: 3	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: ANDYAL LOKESH RAJENDRA	Mother's Name: ISHWARI	Gender: Male
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Name in Vernacular Language: अन्द्याल लोकेश राजेंद्र
--

Address: 186/6848 ,a- wing kannamwar nagar 2,vikhroli-east mumbai-83
--

City: vikhroli, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400083
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Telephone no.:	Mobile no: 919920443196	Email : lokeshandyal66@gmail.com
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DOB: Oct 25, 1999	Category: Reserved (SBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320949 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400848656	Eligibility Status: Provisional	Examination form No.: 126693 	Division/Section: A	Roll No.: 107
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAGAR K THORAT	Mother's Name: SEEMA	Gender: Male
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Name in Vernacular Language: सागर किशोर थोरात

Address: 2686/208, SEC-6, C.G.S COLONY, ANTOP HILL

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400037

Telephone no.:	Mobile no: 918286365355	Email : djsag180613@gmail.com
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DOB: Jul 15, 1999	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320955 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87004	Information Retrieval	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400848776	Eligibility Status: Provisional	Examination form No.: 126694 	Division/Section: A	Roll No.: 87
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAPKALE SAMRUDDHEE VILAS	Mother's Name: ANITA	Gender: Female
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Name in Vernacular Language:समृद्धी सपकाळे

Address: R/H NO. 2 , SHUBH RESIDENCY, MORIVALI PADA B-CABIN ROAD, AMBERNATH EAST.

City: Ambarnath, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 421501

Telephone no.:	Mobile no: 919823783632	Email : samruddhee196@gmail.com
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DOB: Dec 15, 1999	Category: Reserved (SBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 2017016400848776 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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>To, The Controller of Examination,</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: Vidyavihar</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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400848834	Eligibility Status: Eligible	Examination form No.: 126695 	Division/Section: A	Roll No.: 35
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JOSHI SHUBHAM SHAIENDRA	Mother's Name: VANITA	Gender: Male
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Name in Vernacular Language: शुभम शैलेंद्र जोशी

Address: Kopri colony Parashi wadi Joshi chawl, Thane (E)

City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400603

Telephone no.: 25323239	Mobile no: 919920126543	Email : joshi.shubham61@gmail.com
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DOB: Jul 05, 1999	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320942 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400849002	Eligibility Status: Eligible	Examination form No.: 126696 	Division/Section: A	Roll No.: 72	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MADAN GOPAL PAWAR	Mother's Name: GAURI	Gender: Male
--	----------------------	--------------

Name in Vernacular Language: मदन गोपाळ पवार

Address: SHIVNERI CHAWL, SHIVMAHARASHTRA NAGAR 1 SURYANAGAR VIKHROLI (w) LBS MARG

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

Telephone no.:	Mobile no: 918898875091	Email : maddy.g.pawar@gmail.com
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DOB: Dec 28, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330556 (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)
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SN	Paper Code	Paper Name	AM - AT
1	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400849017	Eligibility Status: Eligible	Examination form No.: 126697 	Division/Section: A	Roll No.: 63
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: PANDEY ANAND OMPRAKASH	Mother's Name: SONU	Gender: Male
Name in Vernacular Language: आनंद ओमप्रकाश पांडेय		
Address: EK VIRA MITRA MANDAL GANESH NAGAR NEAR DURGA MATA MANDIR LOKMANYA NAGAR PADA NO 3		
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606		
Telephone no.:	Mobile no: 918689907433	Email : anandpandey987654@gmail.com
DOB: Jul 17, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330548 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400849242	Eligibility Status: Provisional	Examination form No.: 126698 	Division/Section: A	Roll No.: 50
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: LOHAR SURAJ BHAGWATI	Mother's Name: MEENA LOHAR	Gender: Male
Name in Vernacular Language: लोहार सूरज भगवती		
Address: H no.1195/A Dhaukal chawl Waghoba nagar		
City: Kalwa, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605		
Telephone no.:	Mobile no: 918652401400	Email : loharsuraj31@gmail.com
DOB: Feb 21, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330536 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400849257	Eligibility Status: Provisional	Examination form No.: 126699 	Division/Section: A	Roll No.: 36	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KADAM ATUL SAKHARAM	Mother's Name: SARITA	Gender: Male
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Name in Vernacular Language: अतुल

Address: RAMABAI COLONY, DB PAWAR CHOWK ANAND VIKAS CHWAL, GHATKOPER(E)

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

Telephone no.:	Mobile no: 919769540460	Email : kdmatul3199@gmail.com
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DOB: Dec 31, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320919 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400851585	Eligibility Status: Eligible	Examination form No.: 126700 	Division/Section: A	Roll No.: 38
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: ROHIT RAJESH KADAM	Mother's Name: ROHINI	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: रोहित राजेश कदम

Address: room no.14,indira nagar,laxmi baug rajaram bane marg,pantnagar,ghatkopar east ghatkopar east

City: mumbai, Taluka: , District: Mumbai Suburban, State: Maharashtra, PIN: 400075

Telephone no.:	Mobile no: 919833999852	Email : kadam17rohit@gmail.com
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DOB: Dec 01, 1998	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320953 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400851941	Eligibility Status: Provisional	Examination form No.: 126701 	Division/Section: A	Roll No.: 4
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BADSHAH MOHD AMAN MOHD ISMAIL	Mother's Name: NAJMA	Gender: Male
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Name in Vernacular Language: बादशाह मोहद अमन मोहद इस्माइल

Address: 15/25, NANIBAI CHAWL, NAUPADA, KURLA WEST,

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070
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Telephone no.:	Mobile no: 919819646912	Email :
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DOB: Apr 09, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 909825 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016400913657	Eligibility Status: Provisional	Examination form No.: 126702 	Division/Section: A	Roll No.: 13
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: DUBEY RAJANISHDHAR RAMADHAR	Mother's Name: RANI	Gender: Male
Name in Vernacular Language: दूबे रजनीशधर रामाधर		
Address: LOL UDYAN TULSI BUILDING C3001 SAGLEWADI ROAD KALYAN (W) LOL UDYAN TULSI BUILDING C3001 SAGLEWADI ROAD KALYAN (W) LOL UDYAN TULSI BUILDING C3001 SAGLEWADI ROAD KALYAN (W)		
City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421301		
Telephone no.:	Mobile no: 918600975601	Email : ASHISHDHHARDUBEYS@GMAIL.COM
DOB: Nov 14, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330506 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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>To, The Controller of Examination,</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: Vidyavihar</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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Preraj!

PRN: 2017016401030201	Eligibility Status: Eligible	Examination form No.: 126703 	Division/Section: A	Roll No.: 31
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: JAISWAR NIRANKAR ANANDKUMAR	Mother's Name: SUSHILADEVI	Gender: Male
Name in Vernacular Language: NIRANKAR		
Address: SHIV SHAMBHU APT. 3RD FLR 'A' WING ROOM NO.20 SAI NAGAR , JAI BAI ROAD KATEMANEVALI KALYAN EAST		
City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306		
Telephone no.:	Mobile no: 919969782323	Email : NIRANKARJAISWAR@GMAIL.COM
DOB: Jan 14, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320971 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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:
Center Preference (Code/Name):		
Venue Preference (Code/Name):		

<p>To, The Controller of Examination,</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: Vidyavihar</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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016401552473	Eligibility Status: Eligible	Examination form No.: 126704 	Division/Section: A	Roll No.: 106
Instruction Medium:			Nationality:	India

Student's Personal Information

Student's Name: THAKUR RAKESH KUMAR SHRI UDIT	Mother's Name: MEENA	Gender: Male
Name in Vernacular Language: ठाकुर राकेश कुमार श्री उदित		
Address: 04, DURGA SOCIETY NEAR SAMARTH SOCIETY GOLAVLI		
City: DOMBIVLI, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201		
Telephone no.:	Mobile no: 918655164985	Email : RT9334889@GMAIL.COM
DOB: Nov 06, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320936 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Alifiya

PRN:
2017016401795207

Eligibility Status:
Eligible

Examination form No.:
126705

Division/Section:
A

Roll No.:
47

Instruction Medium:

Nationality: India

Student's Personal Information

Student's Name: **KHERIWALA ALIFIYA KUTBUDDIN**

Mother's Name: RASHIDA

Gender: Female

Name in Vernacular Language: खेरीवाला एलिफिया कुतबुद्दीन

Address: A 1/103 AMAKIN MOHAMMEDIYA COMPLEX KHAMBALPADA BHOIRWADI NR SHIVSENA OFFICE KALYAN

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

Telephone no.: Mobile no: 918655469152 Email : kheriwala53@gmail.com

DOB: Sep 25, 1999 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3330532 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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



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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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[Handwritten Signature]

PRN: 2017016401795231	Eligibility Status: Provisional	Examination form No.: 126706 	Division/Section: A	Roll No.: 21
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GOKANI DHRUV JAGDISH	Mother's Name: FALGUNI	Gender: Male
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Name in Vernacular Language: गोकानी ध्रुव जगदीश

Address: 407/4TH FLOOR, SHREE SAI SHAKTI SOC., PATEL CHOWK, GHATKOPAR EAST

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

Telephone no.:	Mobile no: 919167448233	Email : DHRUVGOKANI11@GMAIL.COM
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DOB: Jul 25, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3320972 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN:
2017016401795285

Eligibility Status:
Eligible

Examination form No.:
126707

Division/Section:
A

Roll No.:
51

Instruction Medium: _____ Nationality: India

Student's Personal Information

Student's Name: **MANGE SHRADHA JERAM** Mother's Name: REKHA Gender: Female

Name in Vernacular Language: shradha

Address: 203/A,Nanda bhuvan Shethyanagar, sakinaka,90ft rd Ghatkopar (w), mumbai-72

City: Mumbai, Taluka: , District: , State: Maharashtra, PIN: 400072

Telephone no.: _____ Mobile no: 918898976557 Email : shradha22m@gmail.com

DOB: Oct 22, 1999 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3330537 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Savitri

PRN: 2017016401795293	Eligibility Status: Eligible	Examination form No.: 126708 	Division/Section: A	Roll No.: 9
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BHANUSHALI SAVITRI JAYANTILAL	Mother's Name: BHAGAWATI	Gender: Female
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Name in Vernacular Language: भानुशाली सावित्री जयंतिलाल

Address: 19/6, navjeevan nagar hariyali village, tagor nagar - 3 vikhroli east, mumbai - 400083

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

Telephone no.:	Mobile no: 919769365459	Email : savitribhanu@gmail.com
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DOB: Apr 30, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330502 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016401795304	Eligibility Status: Eligible	Examination form No.: 126709 	Division/Section: A	Roll No.: 101
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SONTAKKE TEJAS VIKRAM	Mother's Name: VAISHALI	Gender: Male
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Name in Vernacular Language: सौनटक्के तेजस विक्रम

Address: 305 LAXMI DURGA CHS LTD SHREE KRISHNA NAGAR 90 FEET ROAD SAKINAKA MUMBAI 400072

City: MUMBAI, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400072

Telephone no.:	Mobile no: 918108727222	Email : tejasvs987@gmail.com
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DOB: Oct 12, 1999	Category: Reserved (NT-2 (NT-C))	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330587 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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)

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Palsamkar

PRN: 2017016401795351	Eligibility Status: Eligible	Examination form No.: 126710 	Division/Section: A	Roll No.: 62
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PALSAMKAR SAMIR SURESH	Mother's Name: SUCHITA	Gender: Male
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Name in Vernacular Language: पलसमकार समीर सुरेश

Address: GOPAL VITTHAL TAMBE CHAWL KIROL VILLAGE , VIDYAVIHAR WEST MUMBAI

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

Telephone no.:	Mobile no: 919833147510	Email : samirpalsamkar@gmail.com
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DOB: Mar 05, 2000	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem II(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3313368 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation Fee	Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees
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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, 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

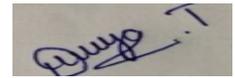
<http://mum.digitaluniversity.ac/>

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016401795416	Eligibility Status: Provisional	Examination form No.: 126711 	Division/Section: A	Roll No.: 108
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: **DIVYA TIWARI** Mother's Name: VANDANA TIWARI Gender: Female

Name in Vernacular Language: दिव्या तिवारी

Address: CISF UNIT, RCFL CHEMBUR MUMBAI-74

City: CHEMBUR, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400074

Telephone no.: Mobile no: 919004947612 Email : divya98@gmail.com

DOB: Feb 05, 1998 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Apr-2019 Seat No: 3320961 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016401795424	Eligibility Status: Eligible	Examination form No.: 126712 	Division/Section: A	Roll No.: 95
Instruction Medium:			Nationality: India	

Student's Personal Information

Student's Name: SHAIKH MOHD WASIM MOHD HAROON	Mother's Name: PARVEEN BEGUM	Gender: Male
Name in Vernacular Language: शेख मोहम्मद वसीम मोहम्मद हारून		
Address: 68/13, ibrahim subhan chawl, trimurti seva mandal, sainath chowk, Takiyaward, kurla west. Mumbai-400070		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070		
Telephone no.:	Mobile no: 919833386326	Email : wasim3132000@gmail.com
DOB: Mar 31, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330578 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA []; Th-CA []
2	87003	Cyber Forensics	Th-UA []; Th-CA []
3	87005	Digital Image Processing	Th-UA []; Th-CA []
4	87006	Data Science	Th-UA []; Th-CA []
5	87007	Ethical Hacking	Th-UA []; Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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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B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Santosh

PRN: 2017016401851507	Eligibility Status: Eligible	Examination form No.: 126713 	Division/Section: A	Roll No.: 18
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GANJI SANTOSH VEERAMAHARUSHI	Mother's Name: VIJAYA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: गंजी संतोष वीरमहाराष्टी

Address: ROOM NO.463/12 , AZAD NAGAR DS ROAD,CHIRAGNAGAR, GHATKOPAR(WEST)

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

Telephone no.:	Mobile no: 918108043086	Email : ROCKZSANTOSH38@GMAIL.COM
----------------	-------------------------	----------------------------------

DOB: May 24, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 3330511 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Krishna

PRN: 2017016401851844	Eligibility Status: Eligible	Examination form No.: 126714 	Division/Section: A	Roll No.: 96
Instruction Medium:			Nationality: India	

Student's Personal Information		
Student's Name: SHARMA KRISHNA NAVIN	Mother's Name: DEEPA	Gender: Male
Name in Vernacular Language: शर्मा कृष्णा नविन		
Address: 8714/6 RUKMINIBAI CHAWL HANUMAN DARSHAN CHS HANUMAN NAGAR PARKSITE VIKHROLI (WEST)		
City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400079		
Telephone no.:	Mobile no: 918422806695	Email : KISSNU26@GMAIL.COM
DOB: Nov 26, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)		Exam Event: Apr-2019
Seat No: 3320940 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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>To, The Controller of Examination,</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: Vidyavihar</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:		



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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016403361431	Eligibility Status: Provisional	Examination form No.: 126715 	Division/Section: A	Roll No.: 45	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHAN MOHD TARIQ ABDUL HAFIZ	Mother's Name: ASMA KHATOON	Gender: Male
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Name in Vernacular Language: खान मोहम्मद तारिक अब्दुल हाफिज

Address: 1/1, LIYAKAT HUSSAIN CHAWL, KAJUPADA PIPE LINE, KURLA WEST, MUMBAI

City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072

Telephone no.:	Mobile no: 917400252566	Email :
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DOB: Jan 25, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 909933 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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, 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

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

Application Form for Examination of Summer Session 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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Bharti
Candidate's

PRN: 2017016403361446	Eligibility Status: Provisional	Examination form No.: 126716 	Division/Section: A	Roll No.: 46
Instruction Medium:			Nationality:	India

Student's Personal Information

Student's Name: KHATRI DAKSH JAYESH	Mother's Name: BHARTI	Gender: Male
Name in Vernacular Language: खत्री दक्ष जयेश		
Address: A/10, GHARKUL SOC., SIDDHARTH NAGAR, VAKOLA, SANTACRUZ EAST, MUMBAI		
City: MUMBAI, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400055		
Telephone no.:	Mobile no: 919769104428	Email :
DOB: Aug 29, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 909934 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	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 2020 event.

B.Sc. Computer Science(with Credits)-Regular-Rev16-T.Y. B.Sc. CS-Sem VI [1S00156]

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PRN: 2017016403361454	Eligibility Status: Provisional	Examination form No.: 126717 	Division/Section: A	Roll No.: 24	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GUPTA SUMIT KUMAR JAGDISH	Mother's Name: SHARMILA	Gender: Male
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Name in Vernacular Language: गुप्ता सुमित कुमार जगदीश

Address: 3, PUNVASI CHAWL, RAGHUNATH NAGAR, M.S. ROAD, WAGLE ESTATE, THANE WEST

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604
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Telephone no.:	Mobile no: 918898042652	Email :
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DOB: Apr 21, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem IV(Regular-Rev16)	Exam Event: Apr-2019	Seat No: 909935 (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	87001	Wireless Sensor Networks and Mobile Communication	Th-UA [] ;Th-CA []
2	87003	Cyber Forensics	Th-UA [] ;Th-CA []
3	87005	Digital Image Processing	Th-UA [] ;Th-CA []
4	87006	Data Science	Th-UA [] ;Th-CA []
5	87007	Ethical Hacking	Th-UA [] ;Th-CA []
6	USCSP601	Practical of Elective - I	Pr-CA []
7	USCSP602	Practical of Elective - II	Pr-CA []
8	USCSP603	Project Implementation	Pr-CA []
9	USCSP604	Practical of Skill Enhancement : USCS607	Pr-CA []

Convocation 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):

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	Student's Signature

Declaration by Principal/HOD/Chairperson

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