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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2015016401878154	Eligibility Status: Provisional	Examination form No.: 215675 	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: SUMAN KUMAR	Mother's Name: RIMA	Gender: Male
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Name in Vernacular Language: सुमन कुमार

Address: NEAR SHYAMLAL TABELA CHURCH ROAD GANESH NAGAR ADARSH SEVA MANDAL

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400607

Telephone no.: Mobile no: 917045518375 Email : suman4singh53@gmail.com

DOB: Dec 11, 1998 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI [1S00256](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP3038063 (Status: Fail)

Exam form appearance type: Repeater

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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

PRN: 2016016401793873	Eligibility Status: Eligible	Examination form No.: 215676 	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: PARAB PRASHANT RAGHO	Mother's Name: RUCHI	Gender: Male
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Name in Vernacular Language: परब प्रशांत राघो

Address: 2/1, JAI BAI NIWAS, UMESH NAGER, DEVCHA PADA

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

Telephone no.: Mobile no: 918652216530 Email : parabprashant679@gmail.com

DOB: Apr 09, 1999 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI [1S00256](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP3037869 (Status: Fail)

Exam form appearance type: Repeater

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	88703	Business Intelligence	Th-UA []

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, Director, Board of Examination and Evaluations / 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>	Place: Vidyavihar
	Date:
Student's Signature	

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PRN: 2016016401793977	Eligibility Status: Eligible	Examination form No.: 215677 	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: PARIDA SABYASACHI NIRAKAR	Mother's Name: MAMATA	Gender: Male
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Name in Vernacular Language: परिदा सब्यसाची निराकार

Address: 9/B,BALARAM GAIKWAD CHALL,JARIMARI NAGAR,KOLSEWADI,KALYAN(E)

City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306

Telephone no.:	Mobile no: 918652343177	Email : paridanirakar67@gmail.com
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DOB: Oct 14, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI [1S00256](Regular-Rev16)	Exam Event: Mar-2019	Seat No: RDP3037871 (Status: Fail)
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Exam form appearance type: Repeater

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	88704	Principles of Geographic Information Systems	Th-UA []

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, Director, Board of Examination and Evaluations / 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

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Date:		



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Shahrakh.

PRN: 2016016401794145	Eligibility Status: Eligible	Examination form No.: 215678 	Division/Section: A	Roll No.: 29
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHAN SHARUKH JAVED	Mother's Name: AJAMATUNNISHA	Gender: Male
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Name in Vernacular Language: खान शाहरुख जावेद

Address: GANDHI NAGAR KAJUPADA PIPE LINE NEAR SHIREE NIWAS HOTEL KURLA (W)

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

Telephone no.: Mobile no: 919004299504 Email : KHANSHARUKH0097@GMAIL.COM

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

Previous Latest Examination Details: Sem VI [1S00256](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP3037751 (Status: Fail)

Exam form appearance type: Repeater

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	88704	Principles of Geographic Information Systems	Th-UA []

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

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

Place: Vidyavihar
Date:
Student's Signature

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Date:		



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PRN: 2017016400847502	Eligibility Status: Provisional	Examination form No.: 029862 	Division/Section:	Roll No.:	<i>Vishvjeet Singh</i>
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SINGH VISHVJEET	Mother's Name: RITA	Gender: Male
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Name in Vernacular Language: सिंग विश्वजीत प्रदीप

Address: SANDESH NAGAR BAIL BAZAR KURLA ANDHERI ROAD KURLA WEST

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

Telephone no.:	Mobile no: 918108870062	Email : SHIVBAHADURSINGH95@GMAIL.COM
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DOB: Jul 08, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082292 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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Date:		



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PRN: 2017016402257784	Eligibility Status: Eligible	Examination form No.: 215679 	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: CHAUHAN SURAJ KANHAIYA	Mother's Name: UMA	Gender: Male
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Name in Vernacular Language: चौहान सुरज कन्हैया

Address: 3/5, SAI BABA HOUSING SOCIETY MANGAL RAGHO NAGAR TISGAON ROAD KALYAN(E)
--

City: KALYAN , Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306

Telephone no.:	Mobile no: 918286701027	Email : CHAUHAN.SURAJ27@YAHOO.IN
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DOB: Oct 18, 1995	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI [1S00256](Regular-Rev16)	Exam Event: Mar-2019	Seat No: RDP3037567 (Status: Fail)
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Exam form appearance type: Repeater

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	88703	Business Intelligence	Th-UA []

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

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Date:		



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Rutuja

PRN: 2018016400072105	Eligibility Status: Eligible	Examination form No.: 029863 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: RUTUJA SATISH VILANKAR	Mother's Name: SHRADDHA	Gender: Female
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Name in Vernacular Language: विलंकरऋतुजा सतीश

Address: GAURI SHANKAR CHS 3RD FLOOR ROOM NO. 25 SHASTRI NAGAR DEVICHOWK NEAR JONDHALE HIGH SCHOOL
--

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

Telephone no.:	Mobile no: 918828248159	Email : RUTUJAVILANKAR4@GMAIL.COM
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DOB: Jul 30, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082295 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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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PRN: 2018016400086531	Eligibility Status: Eligible	Examination form No.: 029864 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BORGE ANJALI CHANDRAKANT VAISHALI	Mother's Name: VAISHALI	Gender: Female
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Name in Vernacular Language: बोरगे अंजलि चंद्रकांत वैशाली

Address: 103 ,SHRI MAYURESH CO. OP. HSG. SOCIETY OLD MUMBAI PUNE ROAD , PAKHADI, KHARIGAON ,KALWA ,THANE

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605

Telephone no.: Mobile no: 918879795015 Email : ANJALIBORGE.01@GMAIL.COM

DOB: Jul 13, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16) Exam Event: Dec-2020 Seat No: RDP2082247 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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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Place: **Vidyavihar**

Date:

Student's Signature

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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 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016400376741	Eligibility Status: Eligible	Examination form No.: 029865 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SINGH GOLDENKUMAR VINOD	Mother's Name: SUGANTI DEVI	Gender: Male
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Name in Vernacular Language: सिंह गोल्डनकुमार विनोद

Address: JAY ALAKHNANDA APT. A-302, NEAR SHAKUNTALA VIDYALAYA GM ROAD MANDA TITWALA

City: TITWALA, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421605

Telephone no.:	Mobile no: 918169789098	Email : GOLDENSINGH234@GMAIL.COM
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DOB: Nov 18, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082288 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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

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



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PRN: 2018016400646784	Eligibility Status: Eligible	Examination form No.: 029866 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATHAK VIRENDRAKUMAR KAILASH	Mother's Name: PRATIMA	Gender: Male
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Name in Vernacular Language: पाठक वीरेंद्रकुमार कैलास

Address: RADHA KRISHNA MITRA MANDAL T.M.C/K 1195 BHASKARNAGAR KALWA EAST

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605

Telephone no.:	Mobile no: 917718011621	Email : santoshtpathak12@gmail.com
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DOB: Jun 20, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 9225617 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039561	Eligibility Status: Provisional	Examination form No.: 029867 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MUNDADA SHIVANI MUKESHBHAI	Mother's Name: MAYURI	Gender: Female
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Name in Vernacular Language: मुंदडा शिवानी मुकेशभाई

Address: A2/504,ADINATH COMPLEX NEAR RINA PARK TITHAL ROAD
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City: VALSAD, Taluka: Valsad, District: Valsad, State: Gujarat, PIN: 396001

Telephone no.:	Mobile no: 919824146324	Email : maheshwarivapi@gmail.com
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DOB: Dec 14, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082265 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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Place:	College Staff Signature	Seal and Signature of Principal/HOD/Chairperson
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Date:		
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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039584	Eligibility Status: Eligible	Examination form No.: 029868 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information

Student's Name: SARVAIYA JAY PARAG SMITA	Mother's Name: SMITA	Gender: Male
Name in Vernacular Language: सार्वेय जय पराग स्मिता		
Address: 4/24 , PRIYADARSHANI BLDG KISAN NAGAR 1 THANE		
City: MUMBAI , Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604		
Telephone no.:	Mobile no: 918268985454	Email : karansarvaiya700@gmail.com
DOB: Dec 12, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082276 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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PRN: 2018016402039603	Eligibility Status: Eligible	Examination form No.: 029869 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: SHARMA POOJA SUBHASH	Mother's Name: SHEELA	Gender: Female
Name in Vernacular Language: SHARMA POOJA SUBHASH		
Address: 64/1830, TAGORE NAGAR-7, S.V. DIGHE MARG.		
City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400083		
Telephone no.:	Mobile no: 919820188956	Email : jaidurga_electricals@yahoo.co.in
DOB: Sep 21, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)		Exam Event: Dec-2020
		Seat No: RDP2082286 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039626	Eligibility Status: Eligible	Examination form No.: 029870 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PALAN SHUBH VIPUL	Mother's Name: BHAVANA	Gender: Male
Name in Vernacular Language: shubh		
Address: 004 Lotus jai mata di complex ph-2 kasheli thane bhiwandi road		
City: kasheli, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421302		
Telephone no.:	Mobile no: 919769460740	Email : shubhpalan@gmail.com
DOB: Jun 23, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082267 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039634	Eligibility Status: Eligible	Examination form No.: 029871 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SANURA NAMAN HARESH	Mother's Name: ARUNA	Gender: Male
--	----------------------	--------------

Name in Vernacular Language: मराठी

Address: 201, Shreenathji Bhuvan, Vallabh Baug Lane Tilak Road, Ghatkopar East Mumbai 400077
--

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

Telephone no.:	Mobile no: 918828457724	Email : namanhsanura@gmail.com
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DOB: Jul 13, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082275 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039642	Eligibility Status: Eligible	Examination form No.: 029872 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SINGH SONI SURENDRA	Mother's Name: SUSHMA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: सिंह सोनी सुरेंद्र

Address: HARIYALI VILLAGE ANAND CHAWL TAGORE NAGAR GROUP NO 1 VIKHROLI EAST

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

Telephone no.:	Mobile no: 919867688116	Email : SONISINGH01@GMAIL.COM
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DOB: Jan 23, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082291 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039657	Eligibility Status: Eligible	Examination form No.: 029873 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: DALVI SIDDHI VINAYAK	Mother's Name: ANJALI	Gender: Female
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Name in Vernacular Language: दळवी सिद्धी विनायक

Address: room 8, shramik rahiwash mandal ramabai, ambedkar nagar 1, sai vihar, bhandup (west)

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

Telephone no.:	Mobile no: 919604978495	Email : siddhidalvi293@gmail.com
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DOB: Mar 29, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082248 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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PRN: 2018016402039665	Eligibility Status: Eligible	Examination form No.: 029874 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MAURYA ABHISHEKKUMAR JAGDAMBAPRASAD	Mother's Name: SOMVATI	Gender: Male
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Name in Vernacular Language: मौर्या अभिषेककुमार जगदम्बाप्रसाद

Address: Sant muktabai chawl Road no.34 Anna bhau Sathe Nagar wagle state Near-Wagle depo.

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

Telephone no.:	Mobile no: 919322318802	Email : mauryaabishek1322@gmail.com
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DOB: Feb 13, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082261 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

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R. Kambl

PRN: 2018016402039673	Eligibility Status: Eligible	Examination form No.: 029875 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: KAMBLI RASIKA SUNIL	Mother's Name: VANDANA	Gender: Female
Name in Vernacular Language: रसिका सुनिल कांबळी		
Address: 1, Vandana Niwas CHS, Behind Dr. Shah Clinic, Kokan Nagar, Bhandup West		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078		
Telephone no.:	Mobile no: 918828266949	Email : rasikakambl14@gmail.com
DOB: Mar 14, 2001	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082255 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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):		Bank:

Venue Preference (Code/Name):

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

Declaration by Principal/HOD/Chairperson

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

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



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PRN: 2018016402039681	Eligibility Status: Eligible	Examination form No.: 029876 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SOLANKI MUSKAN MOHAMMAD HANIF	Mother's Name: ANJUM	Gender: Female
--	----------------------	----------------

Name in Vernacular Language: सोलंकी मुस्कान मोहम्मद हनीफ

Address: R-165 MANUBHAI GUJARATI CHAWL NEAR POWAI POLICE STATION S.V. ROAD, CHANDIVALI SAKINAKA

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

Telephone no.:	Mobile no: 919820300230	Email : muskansolanki203@gmail.com
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DOB: Dec 30, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082293 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Bikram

PRN: 2018016402039696	Eligibility Status: Eligible	Examination form No.: 029877 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BIKRAM GAUDA	Mother's Name: NAYANI	Gender: Male
-------------------------------------	-----------------------	--------------

Name in Vernacular Language: Bikram Gauda

Address: Thane Wagle estate Thane West
--

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

Telephone no.:	Mobile no: 917039738912	Email : gaudak95@gmail.com
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DOB: Mar 28, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082249 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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J. Mange

PRN: 2018016402039715	Eligibility Status: Eligible	Examination form No.: 029878 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: MANGE JUGAL RAJESH	Mother's Name: HARSHABEN	Gender: Male
Name in Vernacular Language: मांगे जुगल राजेश		
Address: 6/11, porbunderwala chawl l.b.s marg, ghatkopar(w) ,		
City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086		
Telephone no.:	Mobile no: 919167071174	Email : jugalmange03@gmail.com
DOB: Sep 11, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082260 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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>	Place: Vidyavihar
	Date:
Student's Signature	

Declaration by Principal/HOD/Chairperson

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

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Shubham

PRN: 2018016402039723	Eligibility Status: Eligible	Examination form No.: 029879 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: YADAV SHUBHAM SUSHIL	Mother's Name: VIJAYLAXMI DEVI	Gender: Male
---	--------------------------------	--------------

Name in Vernacular Language: यादव शुभम सुशील
--

Address: Vijay state gulam yunus chawl 166 opp masrani state Halavpool kurla(w) Mumbai 400070

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

Telephone no.:	Mobile no: 919987602114	Email : Shubham210601@gmail.com
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DOB: Jun 21, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082301 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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

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



University of Mumbai, Mumbai

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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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A. V. Rane.

PRN: 2018016402039731	Eligibility Status: Eligible	Examination form No.: 029880 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: RANE AMISHA VITTHAL	Mother's Name: NAYANA	Gender: Female
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Name in Vernacular Language: राने अमिषा विठ्ठल

Address: 2/1 B BALAJI CHHAYA SOCIETY CHAWL MAHATMA PHULE ROAD, NEAR SHRIDHAR MHATRE CHOWK, GARIBACHA WADA, DOMBIVLI (WEST)

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

Telephone no.:	Mobile no: 919892868775	Email : raneamisha@gmail.com
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DOB: Aug 25, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082271 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar
Date:
Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039746	Eligibility Status: Eligible	Examination form No.: 029881 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GUPTA LAVI SUNIL	Mother's Name: SEEMA	Gender: Male
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Name in Vernacular Language: गुप्ता लवी सुनील

Address: Room No 1507 Laxmi Engg. Work Shop Shiv Colony Sector 1 Airoli Navi Mumbai 400708.

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

Telephone no.:	Mobile no: 918693080471	Email : guptalavi120@gmail.com
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DOB: May 10, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082251 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039762	Eligibility Status: Eligible	Examination form No.: 029882 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: NANAWARE RUTUJA SHRIHARI	Mother's Name: UJJWALA	Gender: Female
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Name in Vernacular Language: ननावरे ऋतुजा श्रीहरी

Address: NAAVTARUN CHAWL AMBEDKAR CHOWK, SURYANAGAR VIKHROLI(WEST)
--

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

Telephone no.:	Mobile no: 918169473931	Email : rutuja.nanaware03@gmail.com
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DOB: Oct 03, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082266 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039777	Eligibility Status: Eligible	Examination form No.: 029883 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: AHMED FAISAL AHMED SHABBIR	Mother's Name: RUKSANA	Gender: Male
Name in Vernacular Language: AHMED FAISAL AHMED SHABBIR		
Address: Chawl no 206 , Room no 3008, Tagore Nagar group no 8/B , Vikroli East		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083		
Telephone no.:	Mobile no: 919702675933	Email : faisal152ahmed@gmail.com
DOB: Feb 16, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082282 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039785	Eligibility Status: Eligible	Examination form No.: 029884 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SANDHA DIVYA RAMJI	Mother's Name: DAI	Gender: Female
---	--------------------	----------------

Name in Vernacular Language: सांधा दिव्या रामजी

Address: 481/67 GEETANJALI SOCIETY SHIVAI NAGAR

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

Telephone no.:	Mobile no: 917738662934	Email : sandhadivya99@gmail.com
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DOB: May 02, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082274 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Kamesh

PRN: 2018016402039793	Eligibility Status: Eligible	Examination form No.: 162631 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: CHINTAMANI KAMESH RAJU	Mother's Name: VANDANA	Gender: Male
---	------------------------	--------------

Name in Vernacular Language: चिंतामणी कामेश राजू

Address: B-5 OM SAI SHRADHA HSG. SOCIETY MOHILLI VILLAGE ASALPHA

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

Telephone no.: Mobile no: 918691914731 Email : rajvandana2596@gmail.com

DOB: Jan 23, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 9225595 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039804	Eligibility Status: Eligible	Examination form No.: 029885 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHINDE PRAVEEN RAJEEV	Mother's Name: SANGEETA	Gender: Male
---------------------------------------	-------------------------	--------------

Name in Vernacular Language: शिंदे प्रवीण राजीव

Address: ROOM NO 8, CHAWL NO 4, DOSHI ESTATE, INDIRA NAGAR, SUNDAR BAUG, KAMANI, KURLA(W)

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

Telephone no.:	Mobile no: 918291593157	Email : shindepraveen64@gmail.com
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DOB: Dec 20, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082287 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039835	Eligibility Status: Eligible	Examination form No.: 029887 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHAIKH SAMSEALAM SAMSULHAQUE	Mother's Name: FARIDA	Gender: Male
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Name in Vernacular Language: SHAIKH SAMSEALAM SAMSULHAQUE

Address: INDIRA NAGAR ROAD NO.22 RUPADEVI PADA NO.2 WAGLE ESTATE THANE WEST-400604 INDIRA NAGAR ROAD NO.22 RUPADEVI PADA NO.2 WAGLE ESTATE THANE WEST-400604
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City: THANE WEST, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604

Telephone no.:	Mobile no: 918828989872	Email : shaikhalam0119@gmail.com
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DOB: Apr 01, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082284 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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

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



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

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Pooja

PRN: 2018016402039843	Eligibility Status: Eligible	Examination form No.: 029888 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: YADAV POOJA SHIVMURAT	Mother's Name: GEETA DEVI	Gender: Female
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Name in Vernacular Language: Pooja yadav
--

Address: Behind shivam Engineering, vilash indl.estate Ram. Bagh Upavan

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

Telephone no.: 25883789	Mobile no: 918433840683	Email : poojay648.py@gmail.com
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DOB: Oct 08, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082298 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039851	Eligibility Status: Eligible	Examination form No.: 029889 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MAKWANA RAJ ASHWIN	Mother's Name: VAISHALI	Gender: Male
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Name in Vernacular Language: मकवाना राज अश्विन

Address: 402-A wing, Haridwar CHS, Gaondevi Mandir Pandurang wadi, Manpada road, Dombivli east

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

Telephone no.:	Mobile no: 919619079798	Email : raj.makwana.2001@gmail.com
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DOB: Feb 14, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082258 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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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Ankush

PRN: 2018016402039866	Eligibility Status: Eligible	Examination form No.: 029890 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: YADAV ANKUSH PAPPU	Mother's Name: SAROJ	Gender: Male
Name in Vernacular Language: यादव अंकुश पप्पू		
Address: 1198 SAI SITARA CHAWL RUPADEVI PADA NO 2 ROAD NO 22 OPP SWAMI PARAMHANS SHCOOL		
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604		
Telephone no.:	Mobile no: 918693898902	Email : ankushy1537@gmail.com
DOB: Oct 10, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082296 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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):		Bank:

Venue Preference (Code/Name):

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

Declaration by Principal/HOD/Chairperson

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

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



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PRN: 2018016402039874	Eligibility Status: Eligible	Examination form No.: 029891 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KADAM HARSH RAJENDRA	Mother's Name: RUTIKA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: कदम हर्ष राजेंद्र
--

Address: ROOM NO 4, CHAWL NO 1, IGNESH JOSEPH PARERA CHAWL VIKHROLI VILLAGE

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

Telephone no.:	Mobile no: 918879263195	Email : harshkadam82@gmail.com
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DOB: Jul 03, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082254 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039882	Eligibility Status: Eligible	Examination form No.: 029892 	Division/Section:	Roll No.:	
Instruction Medium:			Nationality: India		

Student's Personal Information		
Student's Name: SINGH LAXMI RAJESH	Mother's Name: BINDU	Gender: Female

Name in Vernacular Language: सिंग लक्ष्मी राजेश

Address: R.no 15 ,Mishra kunj chawl,vaibhav chowk, Tembipada road Bhandup (w) Mumbai-400078

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

Telephone no.: Mobile no: 919594614112 Email : ls084075@gmail.com

DOB: Oct 02, 1999 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16) Exam Event: Dec-2020 Seat No: RDP2082289 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**
Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039897	Eligibility Status: Eligible	Examination form No.: 029893 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: RAORANE OMKAR MAHESH	Mother's Name: MEENAKSHI	Gender: Male
---	--------------------------	--------------

Name in Vernacular Language: रावराणे ओमकार महेश

Address: 2/22 RAM NIWAS SHIVAJI NAGAR T P ROAD BHANDUP WEST

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

Telephone no.:	Mobile no: 919167249959	Email : omkar2001raorane@gmail.com
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DOB: May 22, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082272 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Avinash

PRN: 2018016402039916	Eligibility Status: Eligible	Examination form No.: 029894 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information

Student's Name: MISHRA AVINASH ASHOKKUMAR	Mother's Name: NILAM	Gender: Male
Name in Vernacular Language: मिश्रा अविनाश अशोककुमार		
Address: 305, VAIDEHI C.H.S LTD. DURGAMATA ROAD, KOLSEWADI		
City: Kalyan east, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306		
Telephone no.:	Mobile no: 919819138449	Email : avinashm132000@gmail.com
DOB: Jun 13, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082264 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039924	Eligibility Status: Eligible	Examination form No.: 029895 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SATISHCHANDRA PREMCHANDRA YADAV	Mother's Name: GULABI DEVI	Gender: Male
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Name in Vernacular Language: सतीशचंद्र प्रेमचंद्र यादव
--

Address: Room no. 2 Yadav chawl Subhashnagar
--

City: Navi Mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708
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Telephone no.:	Mobile no: 919967648817	Email : satsishy1221@gmail.com
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DOB: Sep 07, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082300 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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PRN: 2018016402039932	Eligibility Status: Eligible	Examination form No.: 029896 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHAIKH SHEHBAZ ASLAM	Mother's Name: TABSSUM	Gender: Male
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Name in Vernacular Language: शेख शेहबाज़ असलं

Address: Gr.no.4/357/4258 Tagore Nagar,Vikhroli (E) Mumbai-400083

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

Telephone no.:	Mobile no: 918454813601	Email : shehbaz9503@gmail.com
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DOB: Feb 12, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082285 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039947	Eligibility Status: Eligible	Examination form No.: 029897 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHAH SAKSHI KAILASH	Mother's Name: ARTI	Gender: Female
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Name in Vernacular Language: shah sakshi kailash
--

Address: 1001 manisha elite p k road mulund west
--

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

Telephone no.: 25679090	Mobile no: 917021431630	Email : jigarjaan1989@gmail.com
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DOB: Aug 16, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082281 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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JMENSAR

PRN: 2018016402039955	Eligibility Status: Eligible	Examination form No.: 029898 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MENGAR JILL JOGESH	Mother's Name: PRABHA	Gender: Female
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Name in Vernacular Language: मॅंगर जिल जोगेश

Address: A21 SHREE SIDDHIVINAYAK DEEN DAYAL ROAD ANAND NAGAR

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

Telephone no.:	Mobile no: 919702135809	Email : mengarjill@gmail.com
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DOB: Nov 01, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082262 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039963	Eligibility Status: Eligible	Examination form No.: 029899 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MHATRE PAYAL PRADEEP SANGEETA	Mother's Name: SANGEETA	Gender: Female
--	-------------------------	----------------

Name in Vernacular Language: पायल

Address: 1 pushpanjali kutir M.D. Keni marg bhandup village

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

Telephone no.:	Mobile no: 917710821088	Email : payalmhatre1401@gmail.com
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DOB: Jan 14, 2001	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082263 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039971	Eligibility Status: Eligible	Examination form No.: 029900 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BHANDI SUJATA SUDAMA	Mother's Name: RADHAMA	Gender: Female
---	------------------------	----------------

Name in Vernacular Language: भांडी सुजता सुदामा

Address: room no 7 gebrel chawl near naz hotel kurla west

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

Telephone no.:	Mobile no: 918268478934	Email : sujatabhandi@outlook.com
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DOB: Oct 06, 2000	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082246 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039986	Eligibility Status: Provisional	Examination form No.: 029901 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: PATIDAR NARESH KUMAR JAGDISH	Mother's Name: GEETA	Gender: Male
Name in Vernacular Language: पाटीदार नरेश कुमार जगदीश		
Address: SAGAR BONENZA KHOT LANE JV ROAD GHATKOPAR WEST		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086		
Telephone no.:	Mobile no: 917232020511	Email : nareshpatidar3861@gmail.com
DOB: Dec 08, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082268 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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

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



University of Mumbai, Mumbai

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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402039994	Eligibility Status: Eligible	Examination form No.: 029902 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAVLA DHAIRYA BHUPEN	Mother's Name: DIPTI	Gender: Male
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Name in Vernacular Language: सावळा धैर्य भूपेन
--

Address: C/10,RADHAVIHAR SANGEETAWADI SHIVMANDIR ROAD, DOMBIVALI (E)
--

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

Telephone no.:	Mobile no: 918082677150	Email : dhairyasavla2001@gmail.com
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DOB: Jan 21, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082277 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402040011	Eligibility Status: Eligible	Examination form No.: 029903 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: TAMBAWALA NAFISA MURTUZA	Mother's Name: RASHIDA	Gender: Female
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Name in Vernacular Language: तांबावाला नफिसा मुरुतुजा

Address: 102 1ST FLOOR GARDERN PALAC B SHANTINAGAR ANAND KOLIWADA

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

Telephone no.:	Mobile no: 919930939052	Email : nafisatamba786@gmail.com
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DOB: Jan 14, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082294 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar
Date:
Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Dhruvil

PRN: 2018016402040026	Eligibility Status: Eligible	Examination form No.: 029904 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information

Student's Name: SHAH DHRUVIL ATUL	Mother's Name: HEETA	Gender: Male
Name in Vernacular Language: DHRUVIL		
Address: 109 bingo plaza no. 1 Shrikhande wadi Dombivli east		
City: Dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201		
Telephone no.:	Mobile no: 917977537940	Email : dhruvilshahgada@gmail.com
DOB: Nov 29, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082280 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402040034	Eligibility Status: Eligible	Examination form No.: 029905 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JAIWAR AMIT SHANKAR	Mother's Name: POOJA	Gender: Male
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Name in Vernacular Language: जैसवार अमित शंकर

Address: Room no.3/A , Ramdas niwas , Ambechi bharani Tulshet pada , bhandup west , Mumbai 400078

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

Telephone no.: 022	Mobile no: 917021982967	Email : amit.jack101@gmail.com
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DOB: Aug 01, 2000	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082253 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: Vidyavihar
Date:
Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402040042	Eligibility Status: Eligible	Examination form No.: 029906 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SHAIKH FARDEEN FIROZ	Mother's Name: RESHMA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: शेख फर्दिन फिरोझ

Address: 704,C Wing, Survoday CHS Tagore Nagar Vikhroli (East)

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

Telephone no.:	Mobile no: 918850724355	Email : fs9930143479@gmail.com
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DOB: Mar 19, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082283 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402040057	Eligibility Status: Provisional	Examination form No.: 029907 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BURHANUDDIN SHABBIR PRESSWALA	Mother's Name: FARIDA	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: बुरहानुद्दीन

Address: SUMER PARK, BUILDING NO. 1, 6TH FLOOR FLAT 602, OPP. BUNIYAN COLONY, MAZAGAON MUMBAI

City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400027
--

Telephone no.:	Mobile no: 918080897252	Email : shafar7@gmail.com
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DOB: Aug 03, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082270 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Hritik Bagkar

PRN: 2018016402042315	Eligibility Status: Eligible	Examination form No.: 162632 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BAGKAR HRITIK RAMCHANDRA	Mother's Name: RUTUJA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: बागकार ह्रितिक रामचंद्र

Address: 44/1303 AMRUTVEL CHS PANTNAGAR GHATKOPART EAST

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

Telephone no.:	Mobile no: 918108246194	Email : hritikbagkar4@gmail.com
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DOB: Jul 04, 2000	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 9225592 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402042362	Eligibility Status: Eligible	Examination form No.: 029908 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: SINGH ROHAN SHANKAR	Mother's Name: DEBU	Gender: Male
Name in Vernacular Language: सिंह रोहन शंकर		
Address: A-14, Bapu Ji chawl, Shree Krishna Nagar kurla pipe line sakinaka mumbai maharashtra 400072		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072		
Telephone no.:	Mobile no: 918108469713	Email : singhrohan21122000@gmail.com
DOB: Dec 21, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082290 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

<p>To, Director, Board of Examination and Evaluations / 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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PRN: 2018016402042385	Eligibility Status: Eligible	Examination form No.: 029909 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information			
Student's Name: MANISHA ARJUN YADAV	Mother's Name: SHUKLAVATI	Gender: Female	
Name in Vernacular Language: MANISHA ARJUN YADAV			
Address: 142/1745, JAY SANTOSHI CHAWL WAGHOBA NAGAR GAIKAR MAIDAN, GALLI NO. 09			
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605			
Telephone no.:	Mobile no: 917208827042	Email : amity0440@gmail.com	
DOB: Aug 11, 2000	Category: Open	Physically Handicap: No	
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)		Exam Event: Dec-2020	Seat No: RDP2082297 (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	88701	Software Quality Assurance	Th-UA [] ; Th-CA []
2	88702	Security in Computing	Th-UA [] ; Th-CA []
3	88703	Business Intelligence	Th-UA [] ; Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ; Th-CA []
5	88706	IT Service Management	Th-UA [] ; Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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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Jeelina

PRN: 2018016402042404	Eligibility Status: Eligible	Examination form No.: 029910 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: INAMDAR ATKABIR	Mother's Name: FATIMA	Gender: Male
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Name in Vernacular Language: अत्कबीर

Address: Chawl No.244, Room No.3310, Group No.1, Tagore Nagar Vikhroli (East)

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

Telephone no.:	Mobile no: 919833508012	Email : kabirinamdar2000@gmail.com
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DOB: Dec 01, 2000	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082252 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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PRANITA RAMESH
21.02.2018

Pranita

PRN: 2018016402042412	Eligibility Status: Eligible	Examination form No.: 029911 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: POTEKAR PRANITA RAMESH	Mother's Name: SAVITA	Gender: Female
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Name in Vernacular Language:पोतेकर प्रणिता रमेश

Address: C/3 , SAI KRUPA HSG SOC, OPP SHARMA SCHOOL NETAJI NAGAR, 90 FEET ROAD, SAKINAKA

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

Telephone no.: Mobile no: 917506038350 Email : pratikshaprofessional@gmail.com

DOB: Feb 13, 2001 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16) Exam Event: Dec-2020 Seat No: RDP2082269 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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PRN: 2018016402042443	Eligibility Status: Eligible	Examination form No.: 029912 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MANDHARE OMKAR MANGESH	Mother's Name: CHHAYA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: मंढरे ओंकार मंगेश

Address: 26, anant sagar chawl Kokan nagar Bhandup(w)

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

Telephone no.:	Mobile no: 917506693774	Email : omkarmandhre99@gmail.com
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DOB: Jan 30, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082259 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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Bhavesh

PRN: 2018016402042605	Eligibility Status: Eligible	Examination form No.: 029913 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KAVIRE BHAVESH PRAFUL	Mother's Name: ARATI	Gender: Male
--	----------------------	--------------

Name in Vernacular Language: कविरे भावेश प्रफुल

Address: 141/4210 KANNAMWAR NAGAR 2 VIKHROLI EAST

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

Telephone no.:	Mobile no: 919167855256	Email : bhvaeshkavire123@gmail.com
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DOB: Mar 02, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082256 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402042667	Eligibility Status: Eligible	Examination form No.: 029914 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: YADAV SURAJ ANIL	Mother's Name: MAMTA	Gender: Male
---	----------------------	--------------

Name in Vernacular Language:HINDI

Address: 205 ISHWAR KUNJ NR. JAI BAI SCHOOL KATEMANAVALI NAKA KALYAN EAST 205 ISHWAR KUNJ NR. ROYAL RESIDENCY OPP VITHALWADI RLY STN
--

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

Telephone no.:	Mobile no: 917523960740	Email : surajyaduvanshi.056@gmail.com
----------------	-------------------------	---------------------------------------

DOB: Jun 21, 1999	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082302 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Declaration by Principal/HOD/Chairperson

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



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

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Pradeep

PRN: 2018016402042675	Eligibility Status: Eligible	Examination form No.: 029915 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: YADAV PRADEEP KUMAR SURENDRA	Mother's Name: REETA DEVI	Gender: Male
Name in Vernacular Language: यादव प्रदीप कुमार सुरेंद्र कुमार		
Address: Vijay state gulam yunus chawl 166 opp masrani state Halavpool kurla(w) Mumbai 400070		
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070		
Telephone no.:	Mobile no: 917039515750	Email : Pradeepyadav45185@gmail.com
DOB: Oct 02, 2000	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082299 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

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



University of Mumbai, Mumbai

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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402042683	Eligibility Status: Eligible	Examination form No.: 029916 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAYYED MOHAMMED SHOEK KAMAL AHMED	Mother's Name: SHARBATUNNISA	Gender: Male
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Name in Vernacular Language: सैय्यद मोहम्मद शोएब कमल अहमद

Address: PLOT NO.29 LINE NO.B ROOM NO.39 MILAN NAGAR SHIVAJI NAGAR GOVANDI
--

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

Telephone no.:	Mobile no: 918108446546	Email : Jamalamed654@gmail.com
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DOB: Aug 29, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082279 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

Date:	Student's Signature
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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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Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2018016402042691	Eligibility Status: Eligible	Examination form No.: 029917 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAYYED MOHD AHMED MOHD MASROOR	Mother's Name: ZUBAIDA BEGUM	Gender: Male
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Name in Vernacular Language: शय्येद मोहद अहमद मोहद मसरूर

Address: KAMLA RAMAN NAGAR BAIGANWADI GOVANDI

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

Telephone no.:	Mobile no: 919322949474	Email : jalal.pioneers@gmail.com
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DOB: Jun 19, 2001	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082278 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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S. K. Somaiya

PRN: 2018016402042733	Eligibility Status: Eligible	Examination form No.: 029918 	Division/Section:	Roll No.:
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SALIAN TUSHAR VISHWANATH	Mother's Name: SHOBHA	Gender: Male
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Name in Vernacular Language: सलियन तुषार विश्वनाथ

Address: 67/2244 SAGAR CO OP HSG SOC NEHRU NAGAR KURLA EAST MUMBAI 400024

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

Telephone no.:	Mobile no: 919987953286	Email : saliantushar23@gmail.com
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DOB: Mar 23, 2000	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082273 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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

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

Place: **Vidyavihar**

Date:

Student's Signature

Declaration by Principal/HOD/Chairperson

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



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

Application Form for Examination of Summer Session 2021 event.

B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2019016402396054	Eligibility Status: Provisional	Examination form No.: 029919 	Division/Section:	Roll No.:	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: NAMRATA GOPICHAND GHEGADMAL	Mother's Name: ANITA	Gender: Female
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Name in Vernacular Language: नम्रता गोपीचंद घेगडमल

Address: 134/331, Transit camp, pant nagar Naidu colony Ghatkopar(east)

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

Telephone no.:	Mobile no: 919699759510	Email : namrata20144@gmail.com
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DOB: Apr 11, 1999	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem V [1S00255](Regular-Rev16)	Exam Event: Dec-2020	Seat No: RDP2082250 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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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B.Sc. (I.T.)(with Credits)-Regular-Rev16-T.Y. B.Sc. (I.T.)-Sem VI [1S00256]

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PRN: 2019016402460945	Eligibility Status: Provisional	Examination form No.: 162633 	Division/Section:	Roll No.:
Instruction Medium:			Nationality:	India

Student's Personal Information		
Student's Name: GALA PARTH RASHMI	Mother's Name: NINA	Gender: Male
Name in Vernacular Language: Parth Rashmi Gala		
Address: 11 ANITA Pestom Sagar Road No.3 Chembur		
City: CHEMBUR, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400089		
Telephone no.:	Mobile no: 919833236131	Email : galaparth99@gmail.com
DOB: Oct 09, 1999	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem III(Regular-Rev16)	Exam Event: Nov-2019	Seat No: 9225597 (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	88701	Software Quality Assurance	Th-UA [] ;Th-CA []
2	88702	Security in Computing	Th-UA [] ;Th-CA []
3	88703	Business Intelligence	Th-UA [] ;Th-CA []
4	88704	Principles of Geographic Information Systems	Th-UA [] ;Th-CA []
5	88706	IT Service Management	Th-UA [] ;Th-CA []
6	USIT6P1	Project Implementation	Pr-UA []
7	USIT6P2	Security in Computing Practical	Pr-UA []
8	USIT6P3	Business Intelligence Practical	Pr-UA []
9	USIT6P4	Principles of Geographic Information Systems Practical	Pr-UA []
10	USIT6P6	Advanced Mobile Programming	Pr-UA []

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, Director, Board of Examination and Evaluations / 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:		