



University of Mumbai, Mumbai

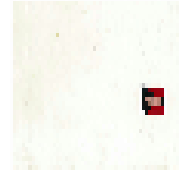
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Sheth T. J. Education Society Sheth N. K. T. T. College of Commerce and Sheth J. T. T. College Of Arts (309)

Application Form for Examination of First Half 2019 event.

B.M.S.(with Credits)-Regular-C7525Rev-T.Y. B.M.S.-Sem VI

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PRN: 2013016401429991	Eligibility Status: Eligible	Examination form No.: 292054 	Division/Section: B	Roll No.: 60
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: BAFNA SEJAL SANTOSH	Mother's Name: SANTOSH	Gender: Female
Name in Vernacular Language: BAFNA SEJAL SANTOSH		
Address: D301, RUNWAL ESTATE, NEAR LAWKIM CO., GHODBANDAR ROAD, THANE WEST PIN 400604		
City: THANE WEST, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400607		
Telephone no.:	Mobile no: 919323449042	Email : santoshbafna@hotmail.com
DOB: Mar 20, 1996	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2017	Seat No: RDP6355967 (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	12601	Operation Research	Th-UA []
2	12607	International Finance	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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

PRN: 2014016400019907	Eligibility Status: Eligible	Examination form No.: 292055 	Division/Section: B	Roll No.: 109
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATIL VARSHA KISHOR	Mother's Name: KANTA	Gender: Female
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Name in Vernacular Language: पाटील वर्षा किशोर

Address: BALKUM PADA NO 1 PATIL ALI THANE (W)

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

Telephone no.: Mobile no: 918655081691 Email : varshapatil1248@gmail.com

DOB: Jun 16, 1996 Category: Reserved (OBC) Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Oct-2017 Seat No: RDP2173401 (Status: Absent)

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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination,

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Place: **Thane (W)**

Date:

Student's Signature

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Roht

PRN: 2014016400020764	Eligibility Status: Eligible	Examination form No.: 292056 	Division/Section: B	Roll No.: 104
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PAL ROHIT SHYAMLAL	Mother's Name: SUMAN	Gender: Male
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Name in Vernacular Language: पाल रोहित SHYAMLAL

Address: 102,BWING OM SWASTIK PARK BANGAR NAGAR KALHER BHIWANDI

City: KALHER, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421302

Telephone no.: 9730738110 Mobile no: 918600113155 Email : prohitpal789@gmail.com

DOB: Oct 03, 1996 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Mar-2018 Seat No: RDP3209254 (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	12611	International Marketing	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

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Venue Preference (Code/Name):

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Place: **Thane (W)**
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Student's Signature

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PRN: 2014016400020884	Eligibility Status: Eligible	Examination form No.: 292057 	Division/Section: B	Roll No.: 88	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MISHRA KAJAL KANHAIYA	Mother's Name: SANGEETA	Gender: Female
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Name in Vernacular Language: मिश्र काजळ कन्हैया

Address: KRIPA B2 WILLOWS SOCIETY DADLANI ROAD BALKUM THANE WEST

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

Telephone no.: Mobile no: 919773737352 Email : kajalmishra.ym@gmail.com

DOB: May 16, 1995 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Mar-2017 Seat No: RDP6355503 (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	12601	Operation Research	Th-UA []
2	12614	Media Planning and Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	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: **Thane (W)**
Date:

Student's Signature

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PRN: 2014016400021021	Eligibility Status: Eligible	Examination form No.: 292059 	Division/Section: B	Roll No.: 105	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: VISHWAKARMA ANKIT KANHAIYA PRASAD	Mother's Name: SHEELA	Gender: Male
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Name in Vernacular Language: विश्वकर्मा अंकित कन्हैया प्रसाद
--

Address: SHYAM NIWAS CHWAL ROOM NO 2 SAVARKAR NAGAR

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606
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Telephone no.:	Mobile no: 918976185019	Email :
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DOB: Jan 04, 1994	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209392 (Status: Absent)
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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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA [] ;Th-CA []
2	12602	Indian Ethos in Management	Th-UA [] ;Th-CA []
3	12603	Corporate Communication and Public Relations	Th-UA [] ;Th-CA []
4	12605	Brand Management	Th-UA [] ;Th-CA []
5	12608	Retail Management	Th-UA [] ;Th-CA []
6	12611	International Marketing	Th-UA [] ;Th-CA []
7	12614	Media Planning and Management	Th-UA [] ;Th-CA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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Date:		



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PRN: 2014016400081297	Eligibility Status: Eligible	Examination form No.: 292060 	Division/Section: A	Roll No.: 22	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: CHAUDHARY HITESH MANJI	Mother's Name: SATIBEN	Gender: Male
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Name in Vernacular Language: चौधरी हितेश मंजी

Address: ROOM NO. 20 , CHAWL NO. 4, EKROOP SOCIETY, SHIVAI NAGAR
--

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606
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Telephone no.:	Mobile no: 917738937125	Email : hiteshchoudhary20000@gmail.com
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DOB: Nov 29, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2017	Seat No: RDP6356001 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []
2	12602	Indian Ethos in Management	Th-UA []
3	12607	International Finance	Th-UA []
4	12613	Project Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

<p>To, The Controller of Examination Form Generated on: Friday, March 8, 2019, 12:49:33 PM by Mr. Chetan Mhatre, Form Downloaded on: Friday, March 8, 2019, 5:51:28 PM by CFC4 I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other 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: Thane (W) Date: Student's Signature
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PRN: 2014016400081324	Eligibility Status: Eligible	Examination form No.: 292061 	Division/Section: A	Roll No.: 8
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: NEVSE SHANUL DILIPKUMAR	Mother's Name: MANGALA	Gender: Male
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Name in Vernacular Language: नेवसे शानुल दिलीपकुमार

Address: 202 / 7, EKMAT CO-OP. HSG. SOC. LTD, NEAR SWIMMING POOL, MANISHA NAGAR GATE NO. 1, MUMBAI - PUNE ROAD, KALWA (W.) THANE.

City: KALWA THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605
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Telephone no.:	Mobile no: 919867002363	Email : shanulnevse6@gmail.com
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DOB: Aug 06, 1994	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075407 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
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Venue Preference (Code/Name):

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

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PRN: 2014016400081363	Eligibility Status: Eligible	Examination form No.: 292062 	Division/Section: A	Roll No.: 43	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: AMOL BALWANT DHAMANKAR	Mother's Name: NANDA	Gender: Male
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Name in Vernacular Language: अमोल बळवंत धामणकर

Address: RAMCHANDRA KABADI CHAWL, ROOM NO.10
GALLI NO.2, NEAR REWALI TALAV,
YASHASWI NAGAR, THANE WEST.

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

Telephone no.:	Mobile no: 918286868795	Email : amoldhamankar48@gmail.com
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DOB: Mar 24, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2017	Seat No: RDP2173373 (Status: Absent)
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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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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Venue Preference (Code/Name):

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<p>Student's Signature</p>	

Declaration by Principal/HOD/Chairperson

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Sheth T. J. Education Society Sheth N. K. T. T. College of Commerce and Sheth J. T. T. College Of Arts (309)

Application Form for Examination of First Half 2019 event.

B.M.S.(with Credits)-Regular-C7525Rev-T.Y. B.M.S.-Sem VI

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PRN: 2014016400081371	Eligibility Status: Eligible	Examination form No.: 292063 	Division/Section: A	Roll No.: 16	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: ANSARI JAMSHED RASHID	Mother's Name: SULTANA	Gender: Male
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Name in Vernacular Language: अंसारी जमशेद रशीद
--

Address: KATTAL KHANA ROAD NEAR FRIEND CIRCLE SCHOOL 1ST RABODI THANE (W)

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601
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Telephone no.:	Mobile no: 918976537270	Email : Jamsheedansari102@gmail.com
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DOB: Aug 06, 1992	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2017	Seat No: RDP6355338 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA [] ;Th-CA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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

PRN: 2014016400086557	Eligibility Status: Eligible	Examination form No.: 292064 	Division/Section: A	Roll No.: 36
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GAWADE TUSHAR DNYANESHWAR	Mother's Name: SUREKHA	Gender: Male
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Name in Vernacular Language: गावडे तुषार ज्ञानेश्वर

Address: SAMRAT ASHOK NAGAR, MAJIWADA

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

Telephone no.: Mobile no: 918424880409 Email : tushargawade18@gmail.com

DOB: Jul 18, 1996 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Oct-2017 Seat No: RDP2173377 (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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination,

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

Place: **Thane (W)**
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:		

Form Generated on: Friday, March 8, 2019, 12:49:33 PM by Mr. Chetan Mhatre, Form Downloaded on: Friday, March 8, 2019, 5:51:28 PM by CF-CA



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PRN: 2014016400086712	Eligibility Status: Eligible	Examination form No.: 292065 	Division/Section: B	Roll No.: 103	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: VISHWAKARMA ANKUR NANHELAL	Mother's Name: SHOBHA	Gender: Male
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Name in Vernacular Language: विश्वकर्मा अंकुर नान्हेलाल

Address: 303,OM SHIV SHAKTI 'B' BUILDING, KALHER, BANGAR NAGAR,BHIWANDI ROAD, THANE.
--

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

Telephone no.:	Mobile no: 918600671191	Email : avkarma456@gmail.com
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DOB: Mar 15, 1997	Category: Reserved (NT-1 (NT-B))	Physically Handicap: No
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Previous Latest Examination Details: Sem V(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3196808 (Status: Pass)
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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	12603	Corporate Communication and Public Relations	Th-UA []
2	12604	Risk Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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

PRN: 2014016400086766	Eligibility Status: Eligible	Examination form No.: 292066 	Division/Section: A	Roll No.: 42
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATIL JIVESH PRAKASH	Mother's Name: VANITA	Gender: Male
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Name in Vernacular Language: पाटील जीवेश प्रकाश

Address: AT SARANG GAON , POST PIMPLAS

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

Telephone no.: Mobile no: 919930429264 Email : patiljivesh789@gmail.com

DOB: Feb 05, 1997 Category: Reserved (OBC) Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Mar-2018 Seat No: RDP3209921 (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	12601	Operation Research	Th-UA []
2	12602	Indian Ethos in Management	Th-UA []
3	12603	Corporate Communication and Public Relations	Th-UA []
4	12604	Risk Management	Th-UA []
5	12607	International Finance	Th-UA []
6	12610	Innovative Financial Services	Th-UA []
7	12613	Project Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name): Form Generated on: Friday, March 8, 2019, 12:49:33 PM by Mr. Chetan Mhatre, Form Downloaded on: Friday, March 8, 2019, 5:51:28 PM by CFC4

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W)
	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: 2014016400086936	Eligibility Status: Eligible	Examination form No.: 292067 	Division/Section: B	Roll No.: 95	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: VELHAL MANSI MEGHSHYAM	Mother's Name: VANDANA	Gender: Female
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Name in Vernacular Language: वेल्हाल मानसी मेघश्याम

Address: 94, LAXMAN NIWAS, PAR NAKA, BAJAR PETH

City: BHIWANDI, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421308

Telephone no.:	Mobile no: 919922576233	Email :
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DOB: Aug 16, 1996	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2017	Seat No: RDP2173500 (Status: Absent)
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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	12604	Risk Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

<p>To, The Controller of Examination,</p> <p>I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.</p>	Place: Thane (W)
	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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Application Form for Examination of First Half 2019 event.

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PRN: 2014016400087015	Eligibility Status: Eligible	Examination form No.: 292068 	Division/Section: A	Roll No.: 41	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SINGH SUCHITRA VIRENDRA	Mother's Name: NEELAM	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: सिंग सुचित्रा वीरेंद्र

Address: MOHITE CHAWL ROOM NO 3 SAVARKAR NAGAR THANE

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

Telephone no.:	Mobile no: 917208230823	Email :
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DOB: Jul 05, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2017	Seat No: RDP2173491 (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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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

Declaration by Principal/HOD/Chairperson

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



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PRN: 2014016400087062	Eligibility Status: Eligible	Examination form No.: 292069 	Division/Section: B	Roll No.: 71	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KAGADE REKHA ANIL	Mother's Name: SUNITA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: कागदे रेखा अनिल

Address: 27/5, PRIYADARSHANI BLDG, KISAN NAGAR NO.1, NEAR PANCHPARMESHVAR TEMPLE, WAGLE ESTATE.

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

Telephone no.:	Mobile no: 919987625570	Email : rekhakagade@gmail.com
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DOB: May 04, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2017	Seat No: RDP6355761 (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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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

Declaration by Principal/HOD/Chairperson

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



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PRN: 2014016400087104	Eligibility Status: Eligible	Examination form No.: 292070 	Division/Section: B	Roll No.: 106	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHANDAGALE SUMIT DASHRATH	Mother's Name: DAYA	Gender: Male
--	---------------------	--------------

Name in Vernacular Language: खडागले सुमित दशरथ
--

Address: LENIN NAGAR ,ROYAL CHALLENGE HOTEL NITIN COMPANY THANE

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

Telephone no.:	Mobile no: 919619763193	Email :
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DOB: May 22, 1996	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075546 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []
2	12610	Innovative Financial Services	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university examination etc. On religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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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PRN: 2014016400087197	Eligibility Status: Eligible	Examination form No.: 292071 	Division/Section: B	Roll No.: 106	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: YADAV DEEPAK VILAS	Mother's Name: SANGEETA	Gender: Male
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Name in Vernacular Language: यादव दीपक
--

Address: ROOM NO.368, BUILDING NO.11, SINDHI CAMP, KOPRI COLONY.
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City: THANE EAST, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400603

Telephone no.:	Mobile no: 917208333419	Email : vilasy18@gmail.com
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DOB: Nov 11, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2017	Seat No: RDP2173502 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12603	Corporate Communication and Public Relations	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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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Sheth T. J. Education Society Sheth N. K. T. T. College of Commerce and Sheth J. T. T. College Of Arts (309)

Application Form for Examination of First Half 2019 event.

B.M.S.(with Credits)-Regular-C7525Rev-T.Y. B.M.S.-Sem VI

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PRN: 2014016400087271	Eligibility Status: Eligible	Examination form No.: 292072 	Division/Section: A	Roll No.: 15	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KHATRI BABAR JALIL	Mother's Name: IRFANA	Gender: Male
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Name in Vernacular Language: खात्री बाबर जलील

Address: NABIHAN APT. ROOM NO. 6, 3RD FLOOR, KATTAL KHANA ROAD, NEAR SHIMLA BAKERY, RABODI 1,

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

Telephone no.: Mobile no: 918976595556 Email : babarkhatri0@gmail.com

DOB: Nov 20, 1996 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem V(Regular-C7525Rev) Exam Event: Mar-2017 Seat No: RDP6431205 (Status: Pass)

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	12601	Operation Research	Th-UA []
2	12602	Indian Ethos in Management	Th-UA []
3	12611	International Marketing	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination,

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

Place: **Thane (W)**

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: 2014016400087375	Eligibility Status: Eligible	Examination form No.: 292073 	Division/Section: A	Roll No.: 46	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: CHOWDHARY VIVEK PRAMOD	Mother's Name: BINU	Gender: Male
---	---------------------	--------------

Name in Vernacular Language: चोव्धार्य विवेक प्रमोद

Address: CHOWDHARY NIWAS, NR. PIMPLASHWAR MANDIR, AZAD NAGAR, THANE - W

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

Telephone no.:	Mobile no: 919004379536	Email :
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DOB: Oct 02, 1995	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V(Regular-C7525Rev)	Exam Event: Mar-2017	Seat No: RDP6431169 (Status: Pass)
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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	12601	Operation Research	Th-UA []
2	12602	Indian Ethos in Management	Th-UA []
3	12614	Media Planning and Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W)
	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: 2014016400090114	Eligibility Status: Eligible	Examination form No.: 292074 	Division/Section: B	Roll No.: 83	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PINGALE SANIKA RAMESH	Mother's Name: MEENA	Gender: Female
--	----------------------	----------------

Name in Vernacular Language:पिंगळे सानिका रमेश

Address: 101, BALAJI HIGHTS LOKMANYA NAGAR, PADA NO.2, YASHODHAN NAGAR, THANE (W) 400606

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

Telephone no.:	Mobile no: 919322991878	Email :
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DOB: Oct 24, 1996	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209933 (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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination,

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

Place: Thane (W)
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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Hiren

PRN: 2014016400090192	Eligibility Status: Eligible	Examination form No.: 292075 	Division/Section: A	Roll No.: 23
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: DUBRIYA HIREN DHANJI	Mother's Name: JAMUNA	Gender: Male
---	-----------------------	--------------

Name in Vernacular Language: दुबरीया हिरेन धनजी

Address: B2/11 HILL VIEW APT, DEVDAYA NAGAR, POKHRAN ROAD NO.1, THANE (W)

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

Telephone no.:	Mobile no: 919967246322	Email : hirendubariya5@gmail.com
----------------	-------------------------	----------------------------------

DOB: Jul 03, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2017	Seat No: RDP6356029 (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	12601	Operation Research	Th-UA []
2	12603	Corporate Communication and Public Relations	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
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Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
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Practical Fee	University Exam Fee Share	Total:	
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Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination,

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

Place: **Thane (W)**

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: 2014016400090296	Eligibility Status: Eligible	Examination form No.: 292076 	Division/Section: B	Roll No.: 67	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KOKANE PORNIMA ANIL	Mother's Name: VARSHA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: कोकणे पोर्णिमा अनिल
--

Address: ANIL KOKANE, VISHNU SHETH CHAWL, PATLI PADA, G.B ROAD, THANE (WEST)
--

City: PATLI PADA, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400607

Telephone no.: 25861360	Mobile no: 919820775809	Email : anilskoakane@gmail.com
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DOB: Feb 21, 1997	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2017	Seat No: RDP2173446 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12603	Corporate Communication and Public Relations	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2014016400090331	Eligibility Status: Eligible	Examination form No.: 292077 	Division/Section: A	Roll No.: 17	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SAWANT SWAPNIL SATYAVIJAY	Mother's Name: SONALI	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: सावंत स्वप्नील सत्यविजय
--

Address: ROOM NO-5, SHRI HARI SOCIETY, NEAR VITTHAL MANDIR BALKUM PADA NO-1 THANE (W)

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400608
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Telephone no.:	Mobile no: 919987503435	Email : swapnilsawant47@gmail.com
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DOB: May 02, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075569 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2014016402682601	Eligibility Status: Eligible	Examination form No.: 292078 	Division/Section: B	Roll No.: 86	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: CHOUHARI ARIF GULAM	Mother's Name: SABRUNNISHA	Gender: Male
Name in Vernacular Language: चौधरी अरिफ गुलाम सबरुन्निशा		
Address: SAMRAT ASHOK NAGAR MAJIWADA NAKA THANE(W)		
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601		
Telephone no.:	Mobile no: 919930722043	Email : KNIHALKHAN@GMAIL.COM
DOB: Jun 02, 1997	Category: Open	Physically Handicap: No
Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2017	Seat No: RDP2173310 (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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	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, 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: Thane (W)</p> <p>Date:</p>
<p>Student's Signature</p>	

Declaration by Principal/HOD/Chairperson

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

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Anil K.

PRN: 2015016401134596	Eligibility Status: Eligible	Examination form No.: 292079 	Division/Section: B	Roll No.: 97
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KATHEKAR ANIL ASHOK	Mother's Name: SANGITA	Gender: Male
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Name in Vernacular Language: काठेकर अनिल अशोक

Address: SAINATH NAGAR NEAR GOODWILL COMPANY G B ROAD THANE W

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

Telephone no.: Mobile no: 918655664843 Email :

DOB: Sep 10, 1996 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Oct-2018 Seat No: RDP1075388 (Status: Absent)

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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination,

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

Place: **Thane (W)**

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: 2015016401142031	Eligibility Status: Eligible	Examination form No.: 292080 	Division/Section: B	Roll No.: 102	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: GUHER RAHUL KISHANPAL	Mother's Name: SAROJ	Gender: Male
--	----------------------	--------------

Name in Vernacular Language: गुहेर राहुल किशांपाल

Address: LILABAI CHAWL LAXMI CHIRAG NAGAR NEAR J K GRAM COMPOUND THANE WEST

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

Telephone no.:	Mobile no: 918879204267	Email : RAHULGUHER100@GMAIL.COM
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DOB: Jul 26, 1995	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209124 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2015016401143807	Eligibility Status: Eligible	Examination form No.: 292081 	Division/Section: B	Roll No.: 66	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MAYEKAR VINAY VIVEK	Mother's Name: VEENA	Gender: Male
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Name in Vernacular Language: मयेकर विनय विवेक

Address: AATKONESHWAR NAGAR NO.2 NEAR HINDVI MITRA MANDAL

City: KALWA, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605
--

Telephone no.:	Mobile no: 917506025217	Email : VINAY.MAYEKAR93@GMAIL.COM
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DOB: Mar 15, 1997	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075401 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2015016401144254	Eligibility Status: Eligible	Examination form No.: 292082 	Division/Section: A	Roll No.: 18	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: JADHAV CHARAN KARBHARI	Mother's Name: SHAILA	Gender: Male
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Name in Vernacular Language: जाधव चरण कारभारी

Address: HANUMAN CHAWL DURGA CHAWK MANPADA THANE 400607

City: MANPADA, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400607
--

Telephone no.:	Mobile no: 919769484546	Email : CHARANJADHAV70@GMAIL.COM
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DOB: Jun 29, 1997	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209787 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []
2	12603	Corporate Communication and Public Relations	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university examination etc. On religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2015016401145002	Eligibility Status: Eligible	Examination form No.: 292083 	Division/Section: A	Roll No.: 36	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PAWAR ASHANKA RAMESH	Mother's Name: RUPALI	Gender: Female
---	-----------------------	----------------

Name in Vernacular Language: पवार आशंका रमेश
--

Address: ROOM NO 3, PALLAVI MITRA MANDAL, RAMNAGAR DIGHA.

City: NAVIMUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708

Telephone no.:	Mobile no: 918425070722	Email :
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DOB: Mar 03, 1998	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075560 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12607	International Finance	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2015016401145106	Eligibility Status: Eligible	Examination form No.: 292084 	Division/Section: B	Roll No.: 104	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: SINGH SHEKHAR RAMBAHADUR	Mother's Name: RAMBHADEVI	Gender: Male
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Name in Vernacular Language: सिंघ शेखर रामबहादूर
--

Address: SHIVSHAKTI NAGAR NO 2 PIPE LINE ROAD NO 16 WAGLE ESTATE THANE W
--

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

Telephone no.:	Mobile no: 917715984966	Email : SINGHSHEKHAR665@GMAIL.COM
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DOB: Nov 04, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem V(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3196798 (Status: Pass)
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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)
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SN	Paper Code	Paper Name	AM - AT
1	12610	Innovative Financial Services	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W)
	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: 2015016401145145	Eligibility Status: Eligible	Examination form No.: 292085 	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: BHOIR PALLAVI SUNIL	Mother's Name: SUNITA	Gender: Female
--	-----------------------	----------------

Name in Vernacular Language: भोईर पल्लवी सुनिल
--

Address: ROOM NO 2 CHANDRAKANT SOCIEY EDLJI ROAD TEMBHI NAKA
--

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

Telephone no.:	Mobile no: 919324711895	Email :
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DOB: Nov 24, 1997	Category: Reserved (OBC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209710 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12613	Project Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W) 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: 2015016401145242	Eligibility Status: Eligible	Examination form No.: 292086 	Division/Section: B	Roll No.: 89	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KAR RANIT SAMIR	Mother's Name: KAJARI	Gender: Male
--	-----------------------	--------------

Name in Vernacular Language: कर राणीत SAMIR

Address: 335/1A, REBALE TALAO, OPP. FIRE BRIGADE, BHIWANDI ROAD

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

Telephone no.:	Mobile no: 919167999341	Email : RANITKAR96@GMAIL.COM
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DOB: Apr 09, 1996	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075387 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
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Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
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Practical Fee	University Exam Fee Share	Total:	
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Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.	Place: Thane (W)
	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: 2015016401146396	Eligibility Status: Eligible	Examination form No.: 292087 	Division/Section: A	Roll No.: 12	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: KAKLIJ GAUTAMI PRAMOD ASHA	Mother's Name: ASHA	Gender: Female
---	---------------------	----------------

Name in Vernacular Language: ककळीज गौतमी प्रमोद आशा

Address: A/6 BALKUM FIRE BRIGADE OPP BIG BAZZAR

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

Telephone no.:	Mobile no: 918080267180	Email : GKAKLIJ@GMAIL.COM
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DOB: Sep 07, 1997	Category: Reserved (SC)	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209813 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12604	Risk Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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

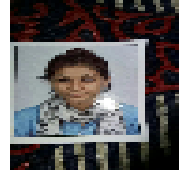
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PRN: 2015016401146535	Eligibility Status: Eligible	Examination form No.: 292088 	Division/Section: A	Roll No.: 40
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MEMON MEHSHAR FEROUZ	Mother's Name: SHABANA	Gender: Female
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Name in Vernacular Language:मेमोन मेहशर फिरोज

Address: MAHAGIRI, KK ROAD NEAR SURYA RICE MILL, BISMILLAH APT

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

Telephone no.: Mobile no: 919867479840 Email : MEHSHARMEMON9@GMAIL.COM

DOB: Sep 24, 1997 Category: Open Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Mar-2018 Seat No: RDP3209873 (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	12601	Operation Research	Th-UA []
2	12604	Risk Management	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

DD No: MICR No: DD Date: Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

To, The Controller of Examination,

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

Place: **Thane (W)**
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: 2015016401146953	Eligibility Status: Eligible	Examination form No.: 292089 	Division/Section: B	Roll No.: 98	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: ANSARI ARIF ABDUL SAMAD	Mother's Name: SAJIRUNISHA	Gender: Male
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Name in Vernacular Language: अन्सारी आरिफ अब्दुल समद
--

Address: 01, SANTOSH BHUVAN, NR. PRAMILA HOSP, KALWA THANE
--

City: KALWA, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605
--

Telephone no.:	Mobile no: 919867680502	Email : ANSARIARIF590@GMAIL.COM
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DOB: Sep 14, 1997	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075353 (Status: Absent)
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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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

To, The Controller of Examination,	Place: Thane (W)
I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other 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: 2015016401148503	Eligibility Status: Eligible	Examination form No.: 292090 	Division/Section: B	Roll No.: 79	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: PATEL BABU KARMAN	Mother's Name: SHYMA	Gender: Male
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Name in Vernacular Language: पटेल बाबु करमन

Address: ATHARVA PARK D-203, SHIVAI NAGAR, THANE (W)
--

City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606
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Telephone no.:	Mobile no: 919819232615	Email : BABU.GAMI1997@GMAIL.COM
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DOB: Mar 31, 1997	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Mar-2018	Seat No: RDP3209270 (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)
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SN	Paper Code	Paper Name	AM - AT
1	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
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Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
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Practical Fee	University Exam Fee Share	Total:	
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Payment Details:	Amount Received:	College Receipt No. and Date:
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DD No:	MICR No:	DD Date:	Bank:
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Center Preference (Code/Name):

Venue Preference (Code/Name):

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	Student's Signature

Declaration by Principal/HOD/Chairperson

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: 2015016401149112	Eligibility Status: Eligible	Examination form No.: 292091 	Division/Section: A	Roll No.: 19	
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: CHAURASIYA UMASHANKAR DILIP	Mother's Name: KESHKALI	Gender: Male
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Name in Vernacular Language: चौरासिया उमाशंकर दिलीप

Address: SHREE SAIDHAM SOCIETY BLDG NO.14 FLAT NO 603, DHARAMVEER NAGAR TULSHIDHAM

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

Telephone no.:	Mobile no: 918108071719	Email : CHAURASIYAUMASHANKAR75@GMAIL.COM
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DOB: Jun 23, 1998	Category: Open	Physically Handicap: No
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Previous Latest Examination Details: Sem VI(Regular-C7525Rev)	Exam Event: Oct-2018	Seat No: RDP1075530 (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	12601	Operation Research	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

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

Venue Preference (Code/Name):

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<p>Student's Signature</p>	

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



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Pranay

PRN: 2015016401149352	Eligibility Status: Eligible	Examination form No.: 292092 	Division/Section: A	Roll No.: 31
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Instruction Medium:	Nationality: India
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Student's Personal Information

Student's Name: MHATRE PRANAY RAMESH	Mother's Name: PUSHPA	Gender: Male
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Name in Vernacular Language: म्हात्रे प्रणय रमेश

Address: ROOM NO. 20, ANNAPURNA SOC. HANUMAN NAGAR, KALWA.

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

Telephone no.: Mobile no: 918898388905 Email : PM96801@GMAIL.COM

DOB: Oct 01, 1997 Category: Reserved (OBC) Physically Handicap: No

Previous Latest Examination Details: Sem VI(Regular-C7525Rev) Exam Event: Mar-2018 Seat No: RDP3209225 (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	12611	International Marketing	Th-UA []

Application Fee	Convocation Fee	Dissertation Fee	Exam Form Fee
Exam Form Late Fee	Exam Form Super Late Fee	Examination Fees	Mark Statement Fee
Practical Fee	University Exam Fee Share	Total:	

Payment Details:	Amount Received:	College Receipt No. and Date:
DD No:	MICR No:	DD Date:
		Bank:

Center Preference (Code/Name):

Venue Preference (Code/Name):

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	Student's Signature

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