



Slip No.MU - 2093

Makeup Examination June/July 2019

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- AVINASH GANGARAM KHUDE
2. Class & Branch : - First Year B.Tech Electrical Engineering
3. Exam Seat No:2017BTEEL00033 4. Address \_\_\_\_\_
- Email : ..... Phone No./Mobile No.: .....

Affix recent  
photograph  
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5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4EN101	Basic Electronics Engineering	1	4MA102	Engineering Mathematics II
2	4CS152	Computer Programming for Electrical Engi	2		
3	4EL101	Basic Electrical Engineering	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 4 X ` 300 /-			Total Amount :- ` 1200/-		

(\* Late Fee      /- + Exam Fee      /-)

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (One Thousand Two Hundred Only) and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No.      :- MU - 2093	Pay Slip No.      :- MU - 2093
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- AVINASH GANGARAM KHUDE	Name:- AVINASH GANGARAM KHUDE
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2017BTEEL00033	Exam Seat No:- 2017BTEEL00033
Exam. Fee Rs Amount. : 1200/-	Exam. Fee Rs Amount. : 1200/-
In Words:- ` One Thousand Two Hundred Only	In Words:- ` One Thousand Two Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by      Cashier	Checked by      Cashier

credit to: **Examination fee (EXAM CELL) A/C**



**WALCHAND COLLEGE OF ENGINEERING, SANGLI**  
(An Autonomous Institute)

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1553**

**I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.**

1. Name of student:- RUTIK BALASAHEB GOAD  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2018BTEEL00001 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

**Affix recent  
photograph**  
----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4PH102	Physics for Electrical and Electronics E	1		
2	4EN101	Basic Electronics Engineering	2		
3	4ME101	Basic Mechanical Engineering	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 3 X ` 300 /-</b>			<b>Total Amount :- ` 900/-</b>		

(\* Late Fee      /- + Exam Fee      /-)

(Signature of student)      Date:

**Accounts,** Please accept the application form along with amount of (Nine Hundred Only) and credit to : **Examination fee(EXAM CELL) A/C**

**Receipt of Exam cell:**

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)		RECEIPT (STUDENT COPY)	
WALCHAND COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI	
(An Autonomous Institute)		(An Autonomous Institute)	
Pay Slip No. :- MU - 1553		Pay Slip No. :- MU - 1553	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- RUTIK BALASAHEB GOAD		Name:- RUTIK BALASAHEB GOAD	
Class & Branch:- First Year B.Tech Electrical Engineering		Class & Branch:- First Year B.Tech Electrical Engineering	
Exam Seat No:- 2018BTEEL00001		Exam Seat No:- 2018BTEEL00001	
Exam. Fee Rs Amount. : <b>900/-</b>		Exam. Fee Rs Amount. : <b>900/-</b>	
In Words:- ` Nine Hundred Only		In Words:- ` Nine Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by	Cashier	Checked by	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1554

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- PRATHAMESH SHASHIKANT SHINDE

2. Class & Branch : - First Year B.Tech Electrical Engineering

3. Exam Seat No:2018BTEEL00002 4. Address \_\_\_\_\_

Email : .....Phone No./Mobile No.: .....

**Affix recent  
photograph**

----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4MA101	Engineering Mathematics I	1	4MA102	Engineering Mathematics II
2	4EN101	Basic Electronics Engineering	2	4CH102	Chemistry for Electrical and Electronics
3	4ME101	Basic Mechanical Engineering	3	4AM102	Introduction to Engineering Mechanics
4	4PH102	Physics for Electrical and Electronics E	4	4CV101	Basic Civil Engineering
5	4HS101	English for Professional Communication	5	4BS102	Elective on Basic Sciences: Material Sci
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 10 X ` 300 /-			Total Amount :- ` 3000/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Thousand Only) and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1554	Pay Slip No. :- MU - 1554
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRATHAMESH SHASHIKANT SHINDE	Name:- PRATHAMESH SHASHIKANT SHINDE
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2018BTEEL00002	Exam Seat No:- 2018BTEEL00002
Exam. Fee Rs Amount. : 3000/-	Exam. Fee Rs Amount. : 3000/-
In Words:- ` Three Thousand Only	In Words:- ` Three Thousand Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1555

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- ABHIRAJ UTTAM EDAKE  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2018BTEEL00033 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

Affix recent  
photograph  
----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4MA101	Engineering Mathematics I	1		
2	4ME101	Basic Mechanical Engineering	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 2 X ` 300 /-			Total Amount :- ` 600/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Six Hundred Only)  
and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1555	Pay Slip No. :- MU - 1555
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ABHIRAJ UTTAM EDAKE	Name:- ABHIRAJ UTTAM EDAKE
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2018BTEEL00033	Exam Seat No:- 2018BTEEL00033
Exam. Fee Rs Amount. : 600/-	Exam. Fee Rs Amount. : 600/-
In Words:- ` Six Hundred Only	In Words:- ` Six Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1556

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- ATHARVA PRAKASH KAYALWAD  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2018BTEEL00061 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.:.....

Affix recent  
photograph  
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5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4EN101	Basic Electronics Engineering	1	4MA102	Engineering Mathematics II
2	4MA101	Engineering Mathematics I	2	4CH102	Chemistry for Electrical and Electronics
3	4ME101	Basic Mechanical Engineering	3	4CV101	Basic Civil Engineering
4	4HS101	English for Professional Communication	4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 7 X ` 300 /-			Total Amount :- ` 2100/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Two Thousand One Hundred Only) and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)
Pay Slip No. :- MU - 1556
Makeup Examination June/July 2019
Name:- ATHARVA PRAKASH KAYALWAD
Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2018BTEEL00061
Exam. Fee Rs Amount. : 2100/-
In Words:- ` Two Thousand One Hundred Only
Date:-
Signature of student:-
Checked by
Cashier

RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)
Pay Slip No. :- MU - 1556
Makeup Examination June/July 2019
Name:- ATHARVA PRAKASH KAYALWAD
Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2018BTEEL00061
Exam. Fee Rs Amount. : 2100/-
In Words:- ` Two Thousand One Hundred Only
Date:-
Signature of student:-
Checked by
Cashier

credit to: **Examination fee (EXAM CELL) A/C**



**WALCHAND COLLEGE OF ENGINEERING, SANGLI**  
(An Autonomous Institute)

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1557**

**I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.**

1. Name of student:- RUSHIKESH GANU BETHEKAR
2. Class & Branch : - First Year B.Tech Electrical Engineering
3. Exam Seat No:2018BTEEL00062 4. Address \_\_\_\_\_
- Email : .....Phone No./Mobile No.: .....

**Affix recent  
photograph**  
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5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4MA101	Engineering Mathematics I	1	4MA102	Engineering Mathematics II
2	4EN101	Basic Electronics Engineering	2	4CH102	Chemistry for Electrical and Electronics
3	4ME101	Basic Mechanical Engineering	3	4AM102	Introduction to Engineering Mechanics
4	4PH102	Physics for Electrical and Electronics E	4	4CV101	Basic Civil Engineering
5	4HS101	English for Professional Communication	5	4BS101	Elective on Basic Sciences: Biology for
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 10 X ` 300 /-</b>			<b>Total Amount :- ` 3000/-</b>		

(\* Late Fee      /- + Exam Fee      /-)

(Signature of student)      Date:

**Accounts,** Please accept the application form along with amount of (Three Thousand Only) and credit to : **Examination fee(EXAM CELL) A/C**

**Receipt of Exam cell:**

Checked by                      Cashier      Date

RECEIPT (ACCOUNTS COPY)		RECEIPT (STUDENT COPY)	
WALCHAND COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI	
(An Autonomous Institute)		(An Autonomous Institute)	
Pay Slip No. :- MU - 1557		Pay Slip No. :- MU - 1557	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- RUSHIKESH GANU BETHEKAR		Name:- RUSHIKESH GANU BETHEKAR	
Class & Branch:- First Year B.Tech Electrical Engineering		Class & Branch:- First Year B.Tech Electrical Engineering	
Exam Seat No:- 2018BTEEL00062		Exam Seat No:- 2018BTEEL00062	
Exam. Fee Rs Amount. : 3000/-		Exam. Fee Rs Amount. : 3000/-	
In Words:- ` Three Thousand Only		In Words:- ` Three Thousand Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by                      Cashier		Checked by                      Cashier	

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1558

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- LENDE OMKAR SURESH  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00008 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

Affix recent  
photograph  
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5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4MA101	Engineering Mathematics I	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Hundred Only)  
and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1558	Pay Slip No. :- MU - 1558
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- LENDE OMKAR SURESH	Name:- LENDE OMKAR SURESH
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00008	Exam Seat No:- 2019BTEEL00008
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1559

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- CHAVAN RUTUJA SHAM  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00012 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.:.....

Affix recent  
photograph  
----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4PH102	Physics for Electrical and Electronics E	1	4CH102	Chemistry for Electrical and Electronics
2	4MA101	Engineering Mathematics I	2	4MA102	Engineering Mathematics II
3	4EN101	Basic Electronics Engineering	3	4AM102	Introduction to Engineering Mechanics
4	4ME101	Basic Mechanical Engineering	4	4CV101	Basic Civil Engineering
5	4HS101	English for Professional Communication	5	4BS102	Elective on Basic Sciences: Material Sci
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 10 X ` 300 /-			Total Amount :- ` 3000/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Thousand Only) and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by Cashier Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1559	Pay Slip No. :- MU - 1559
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- CHAVAN RUTUJA SHAM	Name:- CHAVAN RUTUJA SHAM
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00012	Exam Seat No:- 2019BTEEL00012
Exam. Fee Rs Amount. : 3000/-	Exam. Fee Rs Amount. : 3000/-
In Words:- ` Three Thousand Only	In Words:- ` Three Thousand Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by Cashier	Checked by Cashier

credit to: **Examination fee (EXAM CELL) A/C**





WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1560

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- SHAIKH ASEEM MURTAJA
2. Class & Branch : - First Year B.Tech Electrical Engineering
3. Exam Seat No:2019BTEEL00019 4. Address \_\_\_\_\_
- Email : .....Phone No./Mobile No.: .....

Affix recent  
photograph  
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5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4HS101	English for Professional Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Hundred Only)  
and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1560	Pay Slip No. :- MU - 1560
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHAIKH ASEEM MURTAJA	Name:- SHAIKH ASEEM MURTAJA
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00019	Exam Seat No:- 2019BTEEL00019
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1561

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- KARALE SHUBHAM GOPALRAO  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00045 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

Affix recent  
photograph  
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5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4ME101	Basic Mechanical Engineering	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Hundred Only)  
and credit to : Examination fee(EXAM CELL) A/C

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1561	Pay Slip No. :- MU - 1561
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- KARALE SHUBHAM GOPALRAO	Name:- KARALE SHUBHAM GOPALRAO
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00045	Exam Seat No:- 2019BTEEL00045
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: Examination fee (EXAM CELL) A/C



Makeup Examination June/July 2019

Slip No.MU - 1562

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- KORE PRERANA SANKACHAKRAVIR  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00058 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

Affix recent  
photograph  
----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4ME101	Basic Mechanical Engineering	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Hundred Only)  
and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1562	Pay Slip No. :- MU - 1562
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- KORE PRERANA SANKACHAKRAVIR	Name:- KORE PRERANA SANKACHAKRAVIR
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00058	Exam Seat No:- 2019BTEEL00058
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1563

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- JEENAT AMIN

2. Class & Branch : - First Year B.Tech Electrical Engineering

3. Exam Seat No:2019BTEEL00060 4. Address \_\_\_\_\_

Email : .....Phone No./Mobile No.: .....

**Affix recent  
photograph**

----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4MA101	Engineering Mathematics I	1	4CH102	Chemistry for Electrical and Electronics
2	4EN101	Basic Electronics Engineering	2		
3	4ME101	Basic Mechanical Engineering	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 4 X ` 300 /-			Total Amount :- ` 1200/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (One Thousand Two Hundred Only) and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1563	Pay Slip No. :- MU - 1563
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- JEENAT AMIN	Name:- JEENAT AMIN
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00060	Exam Seat No:- 2019BTEEL00060
Exam. Fee Rs Amount. : 1200/-	Exam. Fee Rs Amount. : 1200/-
In Words:- ` One Thousand Two Hundred Only	In Words:- ` One Thousand Two Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



**WALCHAND COLLEGE OF ENGINEERING, SANGLI**  
(An Autonomous Institute)

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1564**

**I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.**

1. Name of student:- GAIKWAD PIYUSH UDAY  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00067 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

**Affix recent  
photograph**  
----X----

5. Details of the courses for which I wish to appear for the examination:

<b>Courses of semester</b>					
<b>Semester I</b>			<b>Semester II</b>		
<b>Sr.</b>	<b>Code</b>	<b>Course Name</b>	<b>Sr.</b>	<b>Code</b>	<b>Course Name</b>
1	4PH102	Physics for Electrical and Electronics E	1	4CH102	Chemistry for Electrical and Electronics
2	4MA101	Engineering Mathematics I	2	4MA102	Engineering Mathematics II
3	4EN101	Basic Electronics Engineering	3	4AM102	Introduction to Engineering Mechanics
4	4ME101	Basic Mechanical Engineering	4	4CV101	Basic Civil Engineering
5	4HS101	English for Professional Communication	5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 9 X ` 300 /-</b>			<b>Total Amount :- ` 2700/-</b>		

(\* Late Fee      /- + Exam Fee      /-)

**(Signature of student)**      Date:

**Accounts,** Please accept the application form along with amount of (Two Thousand Seven Hundred Only) and credit to : **Examination fee(EXAM CELL) A/C**

**Receipt of Exam cell:**

Checked by

Cashier

Date

<b>RECEIPT (ACCOUNTS COPY)</b>		<b>RECEIPT (STUDENT COPY)</b>	
WALCHAND COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI	
(An Autonomous Institute)		(An Autonomous Institute)	
Pay Slip No. :- <b>MU - 1564</b>		Pay Slip No. :- <b>MU - 1564</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- GAIKWAD PIYUSH UDAY		Name:- GAIKWAD PIYUSH UDAY	
Class & Branch:- First Year B.Tech Electrical Engineering		Class & Branch:- First Year B.Tech Electrical Engineering	
Exam Seat No:- 2019BTEEL00067		Exam Seat No:- 2019BTEEL00067	
Exam. Fee Rs Amount. : <b>2700/-</b>		Exam. Fee Rs Amount. : <b>2700/-</b>	
In Words:- ` Two Thousand Seven Hundred Only		In Words:- ` Two Thousand Seven Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by		Checked by	
Cashier		Cashier	

credit to: **Examination fee (EXAM CELL) A/C**



**WALCHAND COLLEGE OF ENGINEERING, SANGLI**  
(An Autonomous Institute)

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1565**

**I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.**

1. Name of student:- RAJMANE SHRUTI SADANAND  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00068 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

**Affix recent  
photograph**  
----X----

5. Details of the courses for which I wish to appear for the examination:

<b>Courses of semester</b>					
<b>Semester I</b>			<b>Semester II</b>		
<b>Sr.</b>	<b>Code</b>	<b>Course Name</b>	<b>Sr.</b>	<b>Code</b>	<b>Course Name</b>
1	4MA101	Engineering Mathematics I	1		
2	4ME101	Basic Mechanical Engineering	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 2 X ` 300 /-</b>			<b>Total Amount :- ` 600/-</b>		

(\* Late Fee      /- + Exam Fee      /-)

(Signature of student)      Date:

**Accounts,** Please accept the application form along with amount of (Six Hundred Only)  
and credit to : **Examination fee(EXAM CELL) A/C**

**Receipt of Exam cell:**

Checked by                      Cashier              Date

<b>RECEIPT (ACCOUNTS COPY)</b>		<b>RECEIPT (STUDENT COPY)</b>	
WALCHAND COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI	
(An Autonomous Institute)		(An Autonomous Institute)	
Pay Slip No.    :- <b>MU - 1565</b>		Pay Slip No.    :- <b>MU - 1565</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- RAJMANE SHRUTI SADANAND		Name:- RAJMANE SHRUTI SADANAND	
Class & Branch:- First Year B.Tech Electrical Engineering		Class & Branch:- First Year B.Tech Electrical Engineering	
Exam Seat No:- 2019BTEEL00068		Exam Seat No:- 2019BTEEL00068	
Exam. Fee Rs Amount. : <b>600/-</b>		Exam. Fee Rs Amount. : <b>600/-</b>	
In Words:- ` Six Hundred Only		In Words:- ` Six Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by	Cashier	Checked by	Cashier

credit to: **Examination fee (EXAM CELL) A/C**



Makeup Examination June/July 2019

Slip No.MU - 1566

I undersigned student of WCE, Sangli, have read & understood the rules and regulations regarding make up examination. I am filling this form for the following course/s. I know that, if I remain absent at make- up examination it cause FF\$ grade for concerned course/s.

1. Name of student:- PATIL PAYAL RAVINDRA  
2. Class & Branch : - First Year B.Tech Electrical Engineering  
3. Exam Seat No:2019BTEEL00069 4. Address \_\_\_\_\_  
Email : .....Phone No./Mobile No.: .....

Affix recent  
photograph  
----X----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4ME101	Basic Mechanical Engineering	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

(\* Late Fee /- + Exam Fee /-)

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Three Hundred Only)  
and credit to : **Examination fee(EXAM CELL) A/C**

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1566	Pay Slip No. :- MU - 1566
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PATIL PAYAL RAVINDRA	Name:- PATIL PAYAL RAVINDRA
Class & Branch:- First Year B.Tech Electrical Engineering	Class & Branch:- First Year B.Tech Electrical Engineering
Exam Seat No:- 2019BTEEL00069	Exam Seat No:- 2019BTEEL00069
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

credit to: **Examination fee (EXAM CELL) A/C**