



Slip No.MU - 1820

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.

- Name of student:- GHIRE SWAPNIL GAJANAN
- Class & Branch : - First Year M.Tech Mechanical Heat Power Engineering
- Exam Seat No:2019MTEMEHP004 4. Address _____
- Email :.....Phone No./Mobile No.:.....
- Details of the courses for which I wish to appear for the examination:

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

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	3HP503	Advance Fluid Dynamics	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 500 /-			Total Amount :- ` 500/-		

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

(Signature of student) Date:

Accounts, Please accept the application form along with amount of (Five 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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1820	Pay Slip No. :- MU - 1820
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- GHIRE SWAPNIL GAJANAN	Name:- GHIRE SWAPNIL GAJANAN
Class & Branch:- First Year M.Tech Mechanical Heat Power Engineering	Class & Branch:- First Year M.Tech Mechanical Heat Power Engineering
Exam Seat No:- 2019MTEMEHP004	Exam Seat No:- 2019MTEMEHP004
Exam. Fee Rs Amount. : 500/-	Exam. Fee Rs Amount. : 500/-
In Words:- ` Five Hundred Only	In Words:- ` Five Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by _____ Cashier _____	Checked by _____ Cashier _____

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