



Slip No.MU - 1567

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:- 2015BCV038 HAGE NULL YAMMI
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2015BCV038 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	4CV201	Applied Mathematics for Civil Engineers	1	4ME101	Basic Mechanical Engineering
2	4CV204	Engineering Geology	2	4HS203	Environmental Science
3	4CV203	Building Materials and Construction	3	4CV222	Building Planning and Design
4	3CV204	Engineering Surveying	4	4CV223	Water Resource Engineering
5	3AM201	Solid Mechanics	5	3AM221	Structural Mechanics I
6	4EN101	Basic Electronics Engineering	6	3CV223	Advanced Surveying
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 12 X ` 300 /-			Total Amount :- ` 3600/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (Three Thousand 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 - 1567	Pay Slip No. :- MU - 1567
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- 2015BCV038 HAGE NULL YAMMI	Name:- 2015BCV038 HAGE NULL YAMMI
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2015BCV038	Exam Seat No:- 2015BCV038
Exam. Fee Rs Amount. : 3600/-	Exam. Fee Rs Amount. : 3600/-
In Words:- ` Three Thousand Six Hundred Only	In Words:- ` Three Thousand 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**



Slip No.MU - 1568

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:- SHIVKANT SHIVAJI SHIRDE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2016BTECV00014 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	4CV201	Applied Mathematics for Civil Engineers	1	4MA102	Engineering Mathematics II
2	4CV204	Engineering Geology	2		
3	4CV205	Engineering Surveying	3		
4	4AM201	Solid Mechanics	4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 5 X ` 300 /-			Total Amount :- ` 1500/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (One Thousand 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	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1568	Pay Slip No. :- MU - 1568
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHIVKANT SHIVAJI SHIRDE	Name:- SHIVKANT SHIVAJI SHIRDE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2016BTECV00014	Exam Seat No:- 2016BTECV00014
Exam. Fee Rs Amount. : 1500/-	Exam. Fee Rs Amount. : 1500/-
In Words:- ` One Thousand Five Hundred Only	In Words:- ` One Thousand 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**



Slip No.MU - 1569

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:- 2016BTECV00036 SHRIHARI BANKAT BOYANE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2016BTECV00036 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV203	Building Materials and Construction	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 - 1569	Pay Slip No.      :- MU - 1569
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- 2016BTECV00036 SHRIHARI BANKAT BOYANE	Name:- 2016BTECV00036 SHRIHARI BANKAT BOYANE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2016BTECV00036	Exam Seat No:- 2016BTECV00036
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1570

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:- PRATHMESH RAJESH DESHMANE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2017BTECV00017 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV202	Fluid Mechanics	2		
3	4CV205	Engineering Surveying	3		
4	4AM201	Solid Mechanics	4		
5	4MA101	Engineering Mathematics I	5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 5 X ` 300 /-			Total Amount :- ` 1500/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (One Thousand 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 - 1570	Pay Slip No.      :- MU - 1570
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRATHMESH RAJESH DESHMANE	Name:- PRATHMESH RAJESH DESHMANE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00017	Exam Seat No:- 2017BTECV00017
Exam. Fee Rs Amount. : 1500/-	Exam. Fee Rs Amount. : 1500/-
In Words:- ` One Thousand Five Hundred Only	In Words:- ` One Thousand 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**



Slip No.MU - 1571

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:- TANVEER FAYAZ MANDOO
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2017BTECV00020 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	4CV205	Engineering Surveying	1	4ME102	Engineering Graphics
2			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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No.      :- MU - 1571	Pay Slip No.      :- MU - 1571
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- TANVEER FAYAZ MANDOO	Name:- TANVEER FAYAZ MANDOO
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00020	Exam Seat No:- 2017BTECV00020
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1572

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:- PRATIK PRAMOD BODHALE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00003 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	4CV205	Engineering Surveying	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 - 1572		Pay Slip No.    :- MU - 1572	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- PRATIK PRAMOD BODHALE		Name:- PRATIK PRAMOD BODHALE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00003		Exam Seat No:- 2018BTECV00003	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1574

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:- VENKATESH UMESH MULE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00004 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	4CV205	Engineering Surveying	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 - 1574		Pay Slip No.      :- MU - 1574	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- VENKATESH UMESH MULE		Name:- VENKATESH UMESH MULE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00004		Exam Seat No:- 2018BTECV00004	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1575

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:- PRADNYSHEEL KISHOR SHINGADE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00006 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	4CV205	Engineering Surveying	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 - 1575		Pay Slip No.    :- MU - 1575	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- PRADNYSHEEL KISHOR SHINGADE		Name:- PRADNYSHEEL KISHOR SHINGADE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00006		Exam Seat No:- 2018BTECV00006	
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      Cashier		Checked by      Cashier	

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





Slip No.MU - 1576

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:- GAJANAN VASANTA KHEKALE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00007 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	4CV205	Engineering Surveying	1		
2	4AM201	Solid Mechanics	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 - 1576	Pay Slip No. :- MU - 1576
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- GAJANAN VASANTA KHEKALE	Name:- GAJANAN VASANTA KHEKALE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00007	Exam Seat No:- 2018BTECV00007
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1577

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:- PRATIKSHA PRAVIN YADAV
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00008 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	4CV205	Engineering Surveying	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 - 1577		Pay Slip No.      :- MU - 1577	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- PRATIKSHA PRAVIN YADAV		Name:- PRATIKSHA PRAVIN YADAV	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00008		Exam Seat No:- 2018BTECV00008	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1579

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:- SUJAY VASANT SHIKHARE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00009 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	4CV205	Engineering Surveying	1		
2	4AM201	Solid Mechanics	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 - 1579		Pay Slip No.      :- MU - 1579	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- SUJAY VASANT SHIKHARE		Name:- SUJAY VASANT SHIKHARE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00009		Exam Seat No:- 2018BTECV00009	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1580

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:- SAURABH MUKUND BEDAKE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00011 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	4CV205	Engineering Surveying	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 - 1580	Pay Slip No. :- MU - 1580
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SAURABH MUKUND BEDAKE	Name:- SAURABH MUKUND BEDAKE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00011	Exam Seat No:- 2018BTECV00011
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1581

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:- MANASI MAHESH NAGARALE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00012 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	4CV205	Engineering Surveying	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 - 1581		Pay Slip No.      :- MU - 1581	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- MANASI MAHESH NAGARALE		Name:- MANASI MAHESH NAGARALE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00012		Exam Seat No:- 2018BTECV00012	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1583

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:- BHAGYALAXMI VIJAYKUMAR GAIKWAD
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00013 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	4CV205	Engineering Surveying	1		
2	4AM201	Solid Mechanics	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 - 1583	Pay Slip No. :- MU - 1583
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- BHAGYALAXMI VIJAYKUMAR GAIKWAD	Name:- BHAGYALAXMI VIJAYKUMAR GAIKWAD
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00013	Exam Seat No:- 2018BTECV00013
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1584

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:- ROHIT SANJAY KESTE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00016 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	4CV201	Applied Mathematics for Civil Engineers	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 - 1584		Pay Slip No.      :- MU - 1584	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- ROHIT SANJAY KESTE		Name:- ROHIT SANJAY KESTE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00016		Exam Seat No:- 2018BTECV00016	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1585

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:- DHAIRYASHIL DATTAJIRAO PATIL
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00017 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	4CV205	Engineering Surveying	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 - 1585		Pay Slip No.      :- MU - 1585	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- DHAIRYASHIL DATTAJIRAO PATIL		Name:- DHAIRYASHIL DATTAJIRAO PATIL	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00017		Exam Seat No:- 2018BTECV00017	
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      Cashier		Checked by      Cashier	

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





Slip No.MU - 1586

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:- NIKHIL YUVRAJ JADHAV
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00019 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	4CV205	Engineering Surveying	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 - 1586		Pay Slip No.    :- MU - 1586	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- NIKHIL YUVRAJ JADHAV		Name:- NIKHIL YUVRAJ JADHAV	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00019		Exam Seat No:- 2018BTECV00019	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1588

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:- ANJALI YUVRAJ GHUGE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00020 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	4CV205	Engineering Surveying	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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1588	Pay Slip No. :- MU - 1588
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ANJALI YUVRAJ GHUGE	Name:- ANJALI YUVRAJ GHUGE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00020	Exam Seat No:- 2018BTECV00020
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1589

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:- SATYAM SHIVPRASAD LANDGE  
2. Class & Branch : - Second Year B.Tech Civil Engineering  
3. Exam Seat No:2018BTECV00021 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	4CV202	Fluid Mechanics	1		
2	4CV205	Engineering Surveying	2		
3	4AM201	Solid Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1589	Pay Slip No. :- MU - 1589
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SATYAM SHIVPRASAD LANDGE	Name:- SATYAM SHIVPRASAD LANDGE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00021	Exam Seat No:- 2018BTECV00021
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
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**



Slip No.MU - 1591

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:- KRISHA RAKESH KOTHARI
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00023 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	4CV205	Engineering Surveying	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 - 1591	Pay Slip No. :- MU - 1591
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- KRISHA RAKESH KOTHARI	Name:- KRISHA RAKESH KOTHARI
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00023	Exam Seat No:- 2018BTECV00023
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1592

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:- NAGESH BADRINARAYAN MUNDADA
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00024 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	4CV205	Engineering Surveying	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 - 1592		Pay Slip No.    :- MU - 1592	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- NAGESH BADRINARAYAN MUNDADA		Name:- NAGESH BADRINARAYAN MUNDADA	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00024		Exam Seat No:- 2018BTECV00024	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1594

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:- KARTIK RAMESH VASAVE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00027 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV202	Fluid Mechanics	2		
3	4CV203	Building Materials and Construction	3		
4	4CV205	Engineering Surveying	4		
5	4AM201	Solid Mechanics	5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 5 X ` 300 /-			Total Amount :- ` 1500/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (One Thousand 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		WALCHAND COLLEGE OF ENGINEERING, SANGLI	
(An Autonomous Institute)		(An Autonomous Institute)	
Pay Slip No.      :- MU - 1594		Pay Slip No.      :- MU - 1594	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- KARTIK RAMESH VASAVE		Name:- KARTIK RAMESH VASAVE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00027		Exam Seat No:- 2018BTECV00027	
Exam. Fee Rs Amount. : 1500/-		Exam. Fee Rs Amount. : 1500/-	
In Words:- ` One Thousand Five Hundred Only		In Words:- ` One Thousand 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**



Slip No.MU - 1595

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:- RUSHIKESH SUNIL PATIL
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00028 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	4CV205	Engineering Surveying	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 - 1595		Pay Slip No.    :- MU - 1595	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- RUSHIKESH SUNIL PATIL		Name:- RUSHIKESH SUNIL PATIL	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00028		Exam Seat No:- 2018BTECV00028	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1596

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:- KRUSHNAT APPASO PATIL
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00029 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	4CV205	Engineering Surveying	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 - 1596	Pay Slip No.      :- MU - 1596
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- KRUSHNAT APPASO PATIL	Name:- KRUSHNAT APPASO PATIL
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00029	Exam Seat No:- 2018BTECV00029
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      Cashier	Checked by      Cashier

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





Slip No.MU - 1597

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:- YASH RAVINDRA PAWAR
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00030 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	4CV205	Engineering Surveying	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 - 1597		Pay Slip No. :- MU - 1597	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- YASH RAVINDRA PAWAR		Name:- YASH RAVINDRA PAWAR	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00030		Exam Seat No:- 2018BTECV00030	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1599

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:- HARSHADA RAMESH GHAYTADAK
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00035 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	4CV203	Building Materials and Construction	1		
2	4CV205	Engineering Surveying	2		
3	4AM201	Solid Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1599		Pay Slip No. :- MU - 1599	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- HARSHADA RAMESH GHAYTADAK		Name:- HARSHADA RAMESH GHAYTADAK	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00035		Exam Seat No:- 2018BTECV00035	
Exam. Fee Rs Amount. : 900/-		Exam. Fee Rs Amount. : 900/-	
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**



Slip No.MU - 1601

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:- RIYAZ HARUN MULANI
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00039 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	4CV205	Engineering Surveying	1		
2	4AM201	Solid Mechanics	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 - 1601	Pay Slip No. :- MU - 1601
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RIYAZ HARUN MULANI	Name:- RIYAZ HARUN MULANI
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00039	Exam Seat No:- 2018BTECV00039
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1603

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:- PRAJWAL ANILKUMAR MUDDAMWAR
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00040 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	4CV201	Applied Mathematics for Civil Engineers	1	4HS201	Development of Societies
2	4CV202	Fluid Mechanics	2	4CV221	Hydraulics and Hydraulics Machinery
3	4CV203	Building Materials and Construction	3	4CV222	Building Planning and Design
4	4CV204	Engineering Geology	4	4CV223	Water Resource Engineering
5	4CV205	Engineering Surveying	5	4AM221	Structural Analysis
6	4AM201	Solid Mechanics	6	4CH101	Chemistry for Civil and Mechanical Engin
7	4EL101	Basic Electrical Engineering	7		
8			8		
9			9		
10			10		
Exam Fee:- 13 X ` 300 /-			Total Amount :- ` 3900/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (Three Thousand 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 - 1603	Pay Slip No. :- MU - 1603
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRAJWAL ANILKUMAR MUDDAMWAR	Name:- PRAJWAL ANILKUMAR MUDDAMWAR
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00040	Exam Seat No:- 2018BTECV00040
Exam. Fee Rs Amount. : 3900/-	Exam. Fee Rs Amount. : 3900/-
In Words:- ` Three Thousand Nine Hundred Only	In Words:- ` Three Thousand 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**



Slip No.MU - 1604

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:- VAIBHAV RAJENDRA JAYBHAYE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00042 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV202	Fluid Mechanics	2		
3	4CV205	Engineering Surveying	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1604	Pay Slip No.      :- MU - 1604
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- VAIBHAV RAJENDRA JAYBHAYE	Name:- VAIBHAV RAJENDRA JAYBHAYE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00042	Exam Seat No:- 2018BTECV00042
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
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**



Slip No.MU - 1605

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:- DNYANESHWARI UTTAM BHAT
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00043 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	4CV205	Engineering Surveying	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 - 1605	Pay Slip No.      :- MU - 1605
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- DNYANESHWARI UTTAM BHAT	Name:- DNYANESHWARI UTTAM BHAT
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00043	Exam Seat No:- 2018BTECV00043
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1606

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:- RAVINDRA HAUSERAW GAWALI
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00047 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	4AM201	Solid Mechanics	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 - 1606		Pay Slip No.      :- MU - 1606	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- RAVINDRA HAUSERAW GAWALI		Name:- RAVINDRA HAUSERAW GAWALI	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00047		Exam Seat No:- 2018BTECV00047	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1608

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:- SHREYASH MAHESH DHANAWADE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00048 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV205	Engineering Surveying	2		
3	4AM201	Solid Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1608		Pay Slip No.      :- MU - 1608	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- SHREYASH MAHESH DHANAWADE		Name:- SHREYASH MAHESH DHANAWADE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00048		Exam Seat No:- 2018BTECV00048	
Exam. Fee Rs Amount. : 900/-		Exam. Fee Rs Amount. : 900/-	
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**





Slip No.MU - 1609

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:- AARTI DEEPAK SHINDE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00049 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	4CV203	Building Materials and Construction	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 - 1609		Pay Slip No.      :- MU - 1609	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- AARTI DEEPAK SHINDE		Name:- AARTI DEEPAK SHINDE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00049		Exam Seat No:- 2018BTECV00049	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1612

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:- SANAT SAMPAT BHOSALE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00053 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV202	Fluid Mechanics	2		
3	4CV203	Building Materials and Construction	3		
4	4CV205	Engineering Surveying	4		
5	4AM201	Solid Mechanics	5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 5 X ` 300 /-			Total Amount :- ` 1500/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (One Thousand 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	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No.      :- MU - 1612	Pay Slip No.      :- MU - 1612
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SANAT SAMPAT BHOSALE	Name:- SANAT SAMPAT BHOSALE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00053	Exam Seat No:- 2018BTECV00053
Exam. Fee Rs Amount. : 1500/-	Exam. Fee Rs Amount. : 1500/-
In Words:- ` One Thousand Five Hundred Only	In Words:- ` One Thousand 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**



Slip No.MU - 1613

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:- MOHAMMAD YAHYA
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00057 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	4CV205	Engineering Surveying	1		
2	4AM201	Solid Mechanics	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 - 1613	Pay Slip No. :- MU - 1613
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- MOHAMMAD YAHYA	Name:- MOHAMMAD YAHYA
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00057	Exam Seat No:- 2018BTECV00057
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1615

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:- UBAID YOUSUF
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00059 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV202	Fluid Mechanics	2		
3	4CV205	Engineering Surveying	3		
4	4AM201	Solid Mechanics	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 - 1615		Pay Slip No.    :- MU - 1615	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- UBAID YOUSUF		Name:- UBAID YOUSUF	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00059		Exam Seat No:- 2018BTECV00059	
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**



Slip No.MU - 1617

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:- SHREYAS VIJAYKUMAR SADAVARE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00060 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV205	Engineering Surveying	2		
3	4AM201	Solid Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1617	Pay Slip No.      :- MU - 1617
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHREYAS VIJAYKUMAR SADAVARE	Name:- SHREYAS VIJAYKUMAR SADAVARE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00060	Exam Seat No:- 2018BTECV00060
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
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**



Slip No.MU - 1619

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:- ROHIT VINOD GIRHE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00065 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	4CV205	Engineering Surveying	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 - 1619		Pay Slip No.      :- MU - 1619	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- ROHIT VINOD GIRHE		Name:- ROHIT VINOD GIRHE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00065		Exam Seat No:- 2018BTECV00065	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1621

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:- SANYAM SANJAY GAWAI
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00066 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV203	Building Materials and Construction	2		
3	4CV205	Engineering Surveying	3		
4	4AM201	Solid Mechanics	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 - 1621		Pay Slip No.    :- MU - 1621	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- SANYAM SANJAY GAWAI		Name:- SANYAM SANJAY GAWAI	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00066		Exam Seat No:- 2018BTECV00066	
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**



Slip No.MU - 1623

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:- PIYUSH MADHUKAR SHELKE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00071 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	4CV205	Engineering Surveying	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 - 1623	Pay Slip No.      :- MU - 1623
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PIYUSH MADHUKAR SHELKE	Name:- PIYUSH MADHUKAR SHELKE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00071	Exam Seat No:- 2018BTECV00071
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      Cashier	Checked by      Cashier

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





Slip No.MU - 1624

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:- KUNAL LOTAN DESALE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00073 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	4CV205	Engineering Surveying	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 - 1624		Pay Slip No. :- MU - 1624	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- KUNAL LOTAN DESALE		Name:- KUNAL LOTAN DESALE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00073		Exam Seat No:- 2018BTECV00073	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1626

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:- POOJA RANI

2. Class & Branch : - Second Year B.Tech Civil Engineering

3. Exam Seat No:2018BTECV00074 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV203	Building Materials and Construction	2		
3	4CV205	Engineering Surveying	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1626	Pay Slip No. :- MU - 1626
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- POOJA RANI	Name:- POOJA RANI
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00074	Exam Seat No:- 2018BTECV00074
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
In Words:- ` Nine Hundred Only	In Words:- ` Nine Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



Slip No.MU - 1627

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:- AKSHAY SHANKAR RATHOD
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00075 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	4CV205	Engineering Surveying	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 - 1627		Pay Slip No.      :- MU - 1627	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- AKSHAY SHANKAR RATHOD		Name:- AKSHAY SHANKAR RATHOD	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00075		Exam Seat No:- 2018BTECV00075	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1628

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:- UJAVAL BALU MOTE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00076 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	4CV203	Building Materials and Construction	1		
2	4CV205	Engineering Surveying	2		
3	4AM201	Solid Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

(\* 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 - 1628		Pay Slip No. :- MU - 1628	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- UJAVAL BALU MOTE		Name:- UJAVAL BALU MOTE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00076		Exam Seat No:- 2018BTECV00076	
Exam. Fee Rs Amount. : 900/-		Exam. Fee Rs Amount. : 900/-	
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**



Slip No.MU - 1630

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:- SANKET SOBHAGE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00079 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	4CV201	Applied Mathematics for Civil Engineers	1	4AM221	Structural Analysis
2	4CV202	Fluid Mechanics	2	4CH101	Chemistry for Civil and Mechanical Engin
3	4CV203	Building Materials and Construction	3		
4	4CV204	Engineering Geology	4		
5	4CV205	Engineering Surveying	5		
6	4AM201	Solid Mechanics	6		
7	4EL101	Basic Electrical Engineering	7		
8	4EN101	Basic Electronics Engineering	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 - 1630		Pay Slip No.    :- MU - 1630	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- SANKET SOBHAGE		Name:- SANKET SOBHAGE	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00079		Exam Seat No:- 2018BTECV00079	
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**



Slip No.MU - 1632

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:- SHRAVAN VIJAY BHILARE
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00082 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	4CV205	Engineering Surveying	1		
2	4AM201	Solid Mechanics	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 - 1632	Pay Slip No. :- MU - 1632
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHRAVAN VIJAY BHILARE	Name:- SHRAVAN VIJAY BHILARE
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00082	Exam Seat No:- 2018BTECV00082
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      Cashier	Checked by      Cashier

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



Slip No.MU - 1633

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:- SRUSHTI SANJAY MALANDKAR
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2018BTECV00084 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	4CV205	Engineering Surveying	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 - 1633		Pay Slip No.      :- MU - 1633	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- SRUSHTI SANJAY MALANDKAR		Name:- SRUSHTI SANJAY MALANDKAR	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00084		Exam Seat No:- 2018BTECV00084	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1635

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:- GAYWADE ANKITA PURUSHOTTAM
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2019BTECV00201 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	4AM201	Solid Mechanics	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 - 1635		Pay Slip No.      :- MU - 1635	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- GAYWADE ANKITA PURUSHOTTAM		Name:- GAYWADE ANKITA PURUSHOTTAM	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2019BTECV00201		Exam Seat No:- 2019BTECV00201	
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      Cashier		Checked by      Cashier	

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





Slip No.MU - 1636

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:- WALKO PRANAY SHIVRAM
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2019BTECV00202 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV202	Fluid Mechanics	2		
3	4CV204	Engineering Geology	3		
4	4CV205	Engineering Surveying	4		
5	4AM201	Solid Mechanics	5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 5 X ` 300 /-			Total Amount :- ` 1500/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (One Thousand 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	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1636	Pay Slip No. :- MU - 1636
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- WALKO PRANAY SHIVRAM	Name:- WALKO PRANAY SHIVRAM
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2019BTECV00202	Exam Seat No:- 2019BTECV00202
Exam. Fee Rs Amount. : 1500/-	Exam. Fee Rs Amount. : 1500/-
In Words:- ` One Thousand Five Hundred Only	In Words:- ` One Thousand 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**



Slip No.MU - 1637

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:- PATIL ANIKET SANJAY
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2019BTECV00204 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	4CV205	Engineering Surveying	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 - 1637		Pay Slip No.    :- MU - 1637	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- PATIL ANIKET SANJAY		Name:- PATIL ANIKET SANJAY	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2019BTECV00204		Exam Seat No:- 2019BTECV00204	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1638

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:- MOHITE RUTUJA VIKAS
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2019BTECV00205 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	4CV201	Applied Mathematics for Civil Engineers	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 - 1638		Pay Slip No.      :- MU - 1638	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- MOHITE RUTUJA VIKAS		Name:- MOHITE RUTUJA VIKAS	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2019BTECV00205		Exam Seat No:- 2019BTECV00205	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1640

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:- JAGDALE MAYURI VIVEKANAND
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2019BTECV00208 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	4CV201	Applied Mathematics for Civil Engineers	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 - 1640		Pay Slip No. :- MU - 1640	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- JAGDALE MAYURI VIVEKANAND		Name:- JAGDALE MAYURI VIVEKANAND	
Class & Branch:- Second Year B.Tech Civil Engineering		Class & Branch:- Second Year B.Tech Civil Engineering	
Exam Seat No:- 2019BTECV00208		Exam Seat No:- 2019BTECV00208	
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      Cashier		Checked by      Cashier	

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



Slip No.MU - 1641

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:- GORAVE PRACHI KERBA
2. Class & Branch : - Second Year B.Tech Civil Engineering
3. Exam Seat No:2019BTECV00209 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	4CV201	Applied Mathematics for Civil Engineers	1		
2	4CV205	Engineering Surveying	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 - 1641	Pay Slip No. :- MU - 1641
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- GORAVE PRACHI KERBA	Name:- GORAVE PRACHI KERBA
Class & Branch:- Second Year B.Tech Civil Engineering	Class & Branch:- Second Year B.Tech Civil Engineering
Exam Seat No:- 2019BTECV00209	Exam Seat No:- 2019BTECV00209
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      Cashier	Checked by      Cashier

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