



Slip No.MU - 1720

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:- 08CER101 ABHISHEK ASHOK DHADAS
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:08CER101 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	4CS202	Discrete Mathematics	1	3CS225	Statistics and Fuzzy System
2	4CS203	Data Structures	2	4CS222	Formal Language and Automata Theory
3	4CS204	Data Communication	3	4CS225	Computer Network
4	4HS203	Environmental Science	4	4CS223	Operating Systems
5	3CS205	Processor Architecture	5	4CS224	Database Engineering
6	4CS201	Applied Mathematics for Computer Science	6	4CS271	Database Engineering Laboratory
7	4CS205	Computer Organization and Architecture	7	4CS272	Computer Network Laboratory
8	4CS251	Data Structures Laboratory	8	4CS273	Programming Laboratory 2
9	4CS252	Computer Organization and Architecture L	9	4CS221	Software Engineering
10	4CS253	Programming Laboratory 1	10		
Exam Fee:- 19 X ` 300 /-			Total Amount :- ` 5700/-		

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

(Signature of student)      Date:

Accounts, Please accept the application form along with amount of (Five Thousand Seven 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 - 1720	Pay Slip No.      :- MU - 1720
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- 08CER101 ABHISHEK ASHOK DHADAS	Name:- 08CER101 ABHISHEK ASHOK DHADAS
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 08CER101	Exam Seat No:- 08CER101
Exam. Fee Rs Amount. : 5700/-	Exam. Fee Rs Amount. : 5700/-
In Words:- ` Five Thousand Seven Hundred Only	In Words:- ` Five Thousand Seven Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by      Cashier	Checked by      Cashier

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



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1721

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:- SUMEDH AVINASH KAMBLE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2017BTECS00006 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1721	Pay Slip No. :- MU - 1721
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SUMEDH AVINASH KAMBLE	Name:- SUMEDH AVINASH KAMBLE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00006	Exam Seat No:- 2017BTECS00006
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 - 2091

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:- 2016BTECS00100 SAMYAK SUKUMAR KABURE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2016BTECS00100 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	4AM102	Introduction to Engineering 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 - 2091	Pay Slip No. :- MU - 2091
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- 2016BTECS00100 SAMYAK SUKUMAR KABURE	Name:- 2016BTECS00100 SAMYAK SUKUMAR KABURE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2016BTECS00100	Exam Seat No:- 2016BTECS00100
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 - 1722

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 VASANTRAO SALAME
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2017BTECS00013 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	4CS203	Data Structures	1		
2	4HS203	Environmental Science	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 - 1722	Pay Slip No. :- MU - 1722
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RUSHIKESH VASANTRAO SALAME	Name:- RUSHIKESH VASANTRAO SALAME
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00013	Exam Seat No:- 2017BTECS00013
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1723

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:- SHIVSAMARTH MAHESH DESHMUKH
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2017BTECS00028 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	4CS203	Data Structures	1		
2	4HS203	Environmental Science	2		
3	4CS251	Data Structures Laboratory	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 - 1723	Pay Slip No.      :- MU - 1723
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHIVSAMARTH MAHESH DESHMUKH	Name:- SHIVSAMARTH MAHESH DESHMUKH
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00028	Exam Seat No:- 2017BTECS00028
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 - 1724

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:- SHUBHAM SURESH PIMPARE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2017BTECS00033 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	4CS203	Data Structures	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 - 1724	Pay Slip No. :- MU - 1724
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHUBHAM SURESH PIMPARE	Name:- SHUBHAM SURESH PIMPARE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00033	Exam Seat No:- 2017BTECS00033
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1725

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:- SHITAL SANJAY CHAVAN
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00002 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1725	Pay Slip No. :- MU - 1725
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHITAL SANJAY CHAVAN	Name:- SHITAL SANJAY CHAVAN
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00002	Exam Seat No:- 2018BTECS00002
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1726

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:- TULSI RAJARAM GALANDE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00004 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	4CS205	Computer Organization and Architecture	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 - 1726	Pay Slip No. :- MU - 1726
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- TULSI RAJARAM GALANDE	Name:- TULSI RAJARAM GALANDE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00004	Exam Seat No:- 2018BTECS00004
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 - 1727

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:- JANARDHAN HARIDAS SALGAR
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00008 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1727	Pay Slip No. :- MU - 1727
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- JANARDHAN HARIDAS SALGAR	Name:- JANARDHAN HARIDAS SALGAR
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00008	Exam Seat No:- 2018BTECS00008
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1728

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 NITIN SHINDE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00010 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			1	4HS201	Development of Societies
2			2	4CS221	Software Engineering
3			3	4CS222	Formal Language and Automata Theory
4			4	4CS223	Operating Systems
5			5	4CS224	Database Engineering
6			6	4CS225	Computer Network
7			7	4CS271	Database Engineering Laboratory
8			8	4CS272	Computer Network Laboratory
9			9	4CS273	Programming Laboratory 2
10			10	4MA102	Engineering Mathematics II
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 - 1728	Pay Slip No. :- MU - 1728
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SAURABH NITIN SHINDE	Name:- SAURABH NITIN SHINDE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00010	Exam Seat No:- 2018BTECS00010
Exam. Fee Rs Amount. : 3000/-	Exam. Fee Rs Amount. : 3000/-
In Words:- ` Three Thousand Only	In Words:- ` Three Thousand Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by      Cashier	Checked by      Cashier

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



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1729

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:- JAYESH PADMARAM CHOUDHARI
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00016 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	4CS203	Data Structures	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 - 1729	Pay Slip No. :- MU - 1729
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- JAYESH PADMARAM CHOUDHARI	Name:- JAYESH PADMARAM CHOUDHARI
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00016	Exam Seat No:- 2018BTECS00016
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1730

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:- SHRIKANT NALLAMADGE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00022 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	4CS203	Data Structures	1		
2	4CS204	Data Communication	2		
3	4HS203	Environmental Science	3		
4	4CH103	Chemistry for Computer Professionals	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 - 1730	Pay Slip No. :- MU - 1730
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHRIKANT NALLAMADGE	Name:- SHRIKANT NALLAMADGE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00022	Exam Seat No:- 2018BTECS00022
Exam. Fee Rs Amount. : 1200/-	Exam. Fee Rs Amount. : 1200/-
In Words:- ` One Thousand Two Hundred Only	In Words:- ` One Thousand Two Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by      Cashier	Checked by      Cashier

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



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1731

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:- SUSHIL PRAKASH WAGH
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00031 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	4CS203	Data Structures	1		
2	4CS204	Data Communication	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 - 1731	Pay Slip No. :- MU - 1731
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SUSHIL PRAKASH WAGH	Name:- SUSHIL PRAKASH WAGH
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00031	Exam Seat No:- 2018BTECS00031
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 - 1732

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:- SHUBHAM VISHNU CHOUDHARI
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00040 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	4CS203	Data Structures	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 - 1732	Pay Slip No. :- MU - 1732
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHUBHAM VISHNU CHOUDHARI	Name:- SHUBHAM VISHNU CHOUDHARI
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00040	Exam Seat No:- 2018BTECS00040
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1733

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:- ADITYA UDAY NANOSKAR
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00048 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	4CS205	Computer Organization and Architecture	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 - 1733	Pay Slip No. :- MU - 1733
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ADITYA UDAY NANOSKAR	Name:- ADITYA UDAY NANOSKAR
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00048	Exam Seat No:- 2018BTECS00048
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 - 1734

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 SHIVSHANT GHEWARE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00065 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	4CS203	Data Structures	1		
2	4CS204	Data Communication	2		
3	4CS205	Computer Organization and Architecture	3		
4	4HS203	Environmental Science	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 - 1734	Pay Slip No. :- MU - 1734
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRATHMESH SHIVSHANT GHEWARE	Name:- PRATHMESH SHIVSHANT GHEWARE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00065	Exam Seat No:- 2018BTECS00065
Exam. Fee Rs Amount. : 1200/-	Exam. Fee Rs Amount. : 1200/-
In Words:- ` One Thousand Two Hundred Only	In Words:- ` One Thousand Two Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by      Cashier	Checked by      Cashier

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





WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1735

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:- RUCHITA MAHENDRA MOON
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00066 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1735	Pay Slip No. :- MU - 1735
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RUCHITA MAHENDRA MOON	Name:- RUCHITA MAHENDRA MOON
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00066	Exam Seat No:- 2018BTECS00066
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1736

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 SUHAS KALE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00083 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	4CS205	Computer Organization and Architecture	1		
2	4HS203	Environmental Science	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 - 1736	Pay Slip No. :- MU - 1736
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRATIK SUHAS KALE	Name:- PRATIK SUHAS KALE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00083	Exam Seat No:- 2018BTECS00083
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1737

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:- ROHAN DAYANAND DARADE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00085 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	4CS204	Data Communication	1		
2	4CS251	Data Structures Laboratory	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 - 1737	Pay Slip No. :- MU - 1737
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ROHAN DAYANAND DARADE	Name:- ROHAN DAYANAND DARADE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00085	Exam Seat No:- 2018BTECS00085
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 - 1738

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:- PRATHAMESH RAMESH RAJPUT
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00090 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	4CS203	Data Structures	1		
2	4CS205	Computer Organization and Architecture	2		
3	4HS203	Environmental Science	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 - 1738	Pay Slip No. :- MU - 1738
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRATHAMESH RAMESH RAJPUT	Name:- PRATHAMESH RAMESH RAJPUT
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00090	Exam Seat No:- 2018BTECS00090
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1739

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:- SHIVPRASAD MUNJARAO BELE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00092 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	4CS204	Data Communication	1	4MA102	Engineering Mathematics II
2	4AM102	Introduction to Engineering Mechanics	2		
3			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 - 1739	Pay Slip No. :- MU - 1739
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHIVPRASAD MUNJARAO BELE	Name:- SHIVPRASAD MUNJARAO BELE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00092	Exam Seat No:- 2018BTECS00092
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 - 1740

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:- SHREYA SINGH
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00094 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	4CS205	Computer Organization and Architecture	1		
2	4HS203	Environmental Science	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 - 1740	Pay Slip No. :- MU - 1740
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHREYA SINGH	Name:- SHREYA SINGH
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00094	Exam Seat No:- 2018BTECS00094
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 - 1741

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:- PURVA SOMESHWAR KUDRE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00095 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	4CS203	Data Structures	1		
2	4CS204	Data Communication	2		
3	4CS205	Computer Organization and Architecture	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 - 1741	Pay Slip No. :- MU - 1741
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PURVA SOMESHWAR KUDRE	Name:- PURVA SOMESHWAR KUDRE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00095	Exam Seat No:- 2018BTECS00095
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**



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Slip No.MU - 1742

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:- SHIVA DUTH JAKORE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00096 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1742	Pay Slip No. :- MU - 1742
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHIVA DUTH JAKORE	Name:- SHIVA DUTH JAKORE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00096	Exam Seat No:- 2018BTECS00096
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 - 1744

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 RAJARAM PATIL
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00104 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	4CS203	Data Structures	1		
2	4CS204	Data Communication	2		
3	4CS205	Computer Organization and Architecture	3		
4	4HS203	Environmental Science	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 - 1744	Pay Slip No.      :- MU - 1744
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHREYAS RAJARAM PATIL	Name:- SHREYAS RAJARAM PATIL
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00104	Exam Seat No:- 2018BTECS00104
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 - 1745

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:- ANANT RAJENDRA DEVMORE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00110 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	4CS203	Data Structures	1		
2	4CS204	Data Communication	2		
3	4CS205	Computer Organization and Architecture	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 - 1745	Pay Slip No.      :- MU - 1745
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ANANT RAJENDRA DEVMORE	Name:- ANANT RAJENDRA DEVMORE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00110	Exam Seat No:- 2018BTECS00110
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 - 1746

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:- SHIVAM UMESH CHOUGULE
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2018BTECS00112 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1746	Pay Slip No. :- MU - 1746
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHIVAM UMESH CHOUGULE	Name:- SHIVAM UMESH CHOUGULE
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00112	Exam Seat No:- 2018BTECS00112
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 - 1747

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:- SURADKAR SHRADDHA PRAMODRAO
2. Class & Branch : - Second Year B.Tech Computer Science and Engineering
3. Exam Seat No:2019BTECS00211 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	4CS204	Data Communication	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1747	Pay Slip No. :- MU - 1747
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SURADKAR SHRADDHA PRAMODRAO	Name:- SURADKAR SHRADDHA PRAMODRAO
Class & Branch:- Second Year B.Tech Computer Science and Engineering	Class & Branch:- Second Year B.Tech Computer Science and Engineering
Exam Seat No:- 2019BTECS00211	Exam Seat No:- 2019BTECS00211
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**