



WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)

Form No. 36

Slip No.MU - 2094

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:- KIRAN DNYANESHWAR PATIL
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2016BTEME00029 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	4ME201	Applied Mathematics for Mechanical Engin	1	3ME223	Theory of Machines I
2	4ME203	Strength of Materials	2		
3	4ME204	Materials Engineering	3		
4	4ME202	Thermodynamics	4		
5	4AM101	Engineering Mechanics	5		
6	4MA101	Engineering Mathematics I	6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 7 X ` 300 /-			Total Amount :- ` 2100/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by Cashier Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 2094	Pay Slip No. :- MU - 2094
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- KIRAN DNYANESHWAR PATIL	Name:- KIRAN DNYANESHWAR PATIL
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2016BTEME00029	Exam Seat No:- 2016BTEME00029
Exam. Fee Rs Amount. : 2100/-	Exam. Fee Rs Amount. : 2100/-
In Words:- ` Two Thousand One Hundred Only	In Words:- ` Two Thousand One 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 - 1645

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 SHRIKANT VINCHURKAR
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2016BTEME00067 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	4ME203	Strength of Materials	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 - 1645	Pay Slip No. :- MU - 1645
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ADITYA SHRIKANT VINCHURKAR	Name:- ADITYA SHRIKANT VINCHURKAR
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2016BTEME00067	Exam Seat No:- 2016BTEME00067
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 - 1646

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 YOGESH HONKALAS
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2017BTEME00011 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	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 - 1646	Pay Slip No. :- MU - 1646
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRAJWAL YOGESH HONKALAS	Name:- PRAJWAL YOGESH HONKALAS
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2017BTEME00011	Exam Seat No:- 2017BTEME00011
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 - 1647

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:- RAMCHANDRA TUKARAM MALGE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2017BTEME00029 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME203	Strength of Materials	2		
3	4ME204	Materials Engineering	3		
4	4MA101	Engineering Mathematics I	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 - 1647	Pay Slip No. :- MU - 1647
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RAMCHANDRA TUKARAM MALGE	Name:- RAMCHANDRA TUKARAM MALGE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2017BTEME00029	Exam Seat No:- 2017BTEME00029
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 - 1648

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:- AKSHADA NIWRUTTI DABERAO
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2017BTEME00053 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	4ME203	Strength of Materials	1		
2	4ME204	Materials Engineering	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 2 X ` 300 /-			Total Amount :- ` 600/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by Cashier Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1648	Pay Slip No. :- MU - 1648
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- AKSHADA NIWRUTTI DABERAO	Name:- AKSHADA NIWRUTTI DABERAO
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2017BTEME00053	Exam Seat No:- 2017BTEME00053
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 - 1649

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:- VINAYSINH MADHAVSINH THAKUR
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2017BTEME00073 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME202	Thermodynamics	2		
3	4ME203	Strength of Materials	3		
4	4ME204	Materials Engineering	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 - 1649		Pay Slip No. :- MU - 1649	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- VINAYSINH MADHAVSINH THAKUR		Name:- VINAYSINH MADHAVSINH THAKUR	
Class & Branch:- Second Year B.Tech Mechanical Engineering		Class & Branch:- Second Year B.Tech Mechanical Engineering	
Exam Seat No:- 2017BTEME00073		Exam Seat No:- 2017BTEME00073	
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 - 1650

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:- APURVA KALIDAS SAWANT
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00001 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	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 - 1650	Pay Slip No. :- MU - 1650
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- APURVA KALIDAS SAWANT	Name:- APURVA KALIDAS SAWANT
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00001	Exam Seat No:- 2018BTEME00001
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 - 1651

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:- AVADHOOT SUBHASH JAMDADE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00002 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME202	Thermodynamics	2		
3	4ME203	Strength of Materials	3		
4	4ME204	Materials Engineering	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 - 1651	Pay Slip No. :- MU - 1651
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- AVADHOOT SUBHASH JAMDADE	Name:- AVADHOOT SUBHASH JAMDADE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00002	Exam Seat No:- 2018BTEME00002
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 - 1652

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:- VAISHNAVI VENKATRAO LANGAR
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00005 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	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 - 1652	Pay Slip No. :- MU - 1652
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- VAISHNAVI VENKATRAO LANGAR	Name:- VAISHNAVI VENKATRAO LANGAR
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00005	Exam Seat No:- 2018BTEME00005
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 - 1653

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:- SAMRUDDHI MAHESH LANGADE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00006 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	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 - 1653	Pay Slip No. :- MU - 1653
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SAMRUDDHI MAHESH LANGADE	Name:- SAMRUDDHI MAHESH LANGADE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00006	Exam Seat No:- 2018BTEME00006
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 - 1654

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:- SAKSHI SUNIL KENDALE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00010 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	4ME203	Strength of Materials	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 - 1654	Pay Slip No. :- MU - 1654
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SAKSHI SUNIL KENDALE	Name:- SAKSHI SUNIL KENDALE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00010	Exam Seat No:- 2018BTEME00010
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 - 1655

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:- ABHISHEK GIRISH KARAJGAR
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00018 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	4ME202	Thermodynamics	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 - 1655	Pay Slip No. :- MU - 1655
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ABHISHEK GIRISH KARAJGAR	Name:- ABHISHEK GIRISH KARAJGAR
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00018	Exam Seat No:- 2018BTEME00018
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 - 1656

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:- TEJAS BHALCHANDRA SATHAYE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00019 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	4ME202	Thermodynamics	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 - 1656	Pay Slip No. :- MU - 1656
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- TEJAS BHALCHANDRA SATHAYE	Name:- TEJAS BHALCHANDRA SATHAYE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00019	Exam Seat No:- 2018BTEME00019
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 - 1657

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:- AWANI RAVINDRA PATLE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00020 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	4ME202	Thermodynamics	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 - 1657	Pay Slip No. :- MU - 1657
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- AWANI RAVINDRA PATLE	Name:- AWANI RAVINDRA PATLE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00020	Exam Seat No:- 2018BTEME00020
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 - 1658

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:- SOURABH SADASHIV PATIL
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00022 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME203	Strength of Materials	2		
3	4ME204	Materials Engineering	3		
4	4CH101	Chemistry for Civil and Mechanical Engin	4		
5	4AM101	Engineering 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 - 1658	Pay Slip No. :- MU - 1658
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SOURABH SADASHIV PATIL	Name:- SOURABH SADASHIV PATIL
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00022	Exam Seat No:- 2018BTEME00022
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 - 1659

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:- SURAJ BASGONDA KOLI
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00024 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	2		
3	4MA101	Engineering Mathematics I	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 - 1659	Pay Slip No. :- MU - 1659
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SURAJ BASGONDA KOLI	Name:- SURAJ BASGONDA KOLI
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00024	Exam Seat No:- 2018BTEME00024
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 - 1660

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:- SNEHAL SAMPAT ADAKE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00031 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	2		
3	4ME204	Materials Engineering	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 - 1660	Pay Slip No. :- MU - 1660
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SNEHAL SAMPAT ADAKE	Name:- SNEHAL SAMPAT ADAKE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00031	Exam Seat No:- 2018BTEME00031
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 - 1661

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:- YOGESH RUPESH DHUMAL
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00032 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	4ME202	Thermodynamics	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 - 1661	Pay Slip No. :- MU - 1661
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- YOGESH RUPESH DHUMAL	Name:- YOGESH RUPESH DHUMAL
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00032	Exam Seat No:- 2018BTEME00032
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 - 1662

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 DAYANAND BIRAJDAR
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00036 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	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 - 1662	Pay Slip No. :- MU - 1662
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- AKSHAY DAYANAND BIRAJDAR	Name:- AKSHAY DAYANAND BIRAJDAR
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00036	Exam Seat No:- 2018BTEME00036
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 - 1663

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:- ABHISHEK RAJENDRA SHINDE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00044 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4MA101	Engineering Mathematics I	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 - 1663	Pay Slip No. :- MU - 1663
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ABHISHEK RAJENDRA SHINDE	Name:- ABHISHEK RAJENDRA SHINDE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00044	Exam Seat No:- 2018BTEME00044
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 - 1664

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:- UNMESH ASHOK SADAWARTE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00046 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	4ME203	Strength of Materials	1		
2	4ME204	Materials Engineering	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 2 X ` 300 /-			Total Amount :- ` 600/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by Cashier Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1664	Pay Slip No. :- MU - 1664
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- UNMESH ASHOK SADAWARTE	Name:- UNMESH ASHOK SADAWARTE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00046	Exam Seat No:- 2018BTEME00046
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 - 1665

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:- ASHITOSH SHARAD KSHIRSAGAR
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00053 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	4ME204	Materials Engineering	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by Cashier Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1665	Pay Slip No. :- MU - 1665
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ASHITOSH SHARAD KSHIRSAGAR	Name:- ASHITOSH SHARAD KSHIRSAGAR
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00053	Exam Seat No:- 2018BTEME00053
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 - 1666

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 SHARAD PATIL
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00060 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME203	Strength of Materials	2		
3	4ME204	Materials Engineering	3		
4	4MA101	Engineering Mathematics I	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 - 1666	Pay Slip No. :- MU - 1666
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHUBHAM SHARAD PATIL	Name:- SHUBHAM SHARAD PATIL
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00060	Exam Seat No:- 2018BTEME00060
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 - 1667

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:- ANAND DATTATRAY REVGADE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00074 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	4ME203	Strength of Materials	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 - 1667	Pay Slip No. :- MU - 1667
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ANAND DATTATRAY REVGADE	Name:- ANAND DATTATRAY REVGADE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00074	Exam Seat No:- 2018BTEME00074
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 - 1668

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:- RANJEETSINH MAHENDRA MANE
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2018BTEME00078 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	4ME202	Thermodynamics	1		
2	4ME203	Strength of Materials	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 - 1668	Pay Slip No. :- MU - 1668
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RANJEETSINH MAHENDRA MANE	Name:- RANJEETSINH MAHENDRA MANE
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2018BTEME00078	Exam Seat No:- 2018BTEME00078
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 - 1669

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:- SUTAR YASIN MUNNA
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2019BTEME00208 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME203	Strength of Materials	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 - 1669	Pay Slip No. :- MU - 1669
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SUTAR YASIN MUNNA	Name:- SUTAR YASIN MUNNA
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2019BTEME00208	Exam Seat No:- 2019BTEME00208
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 - 1670

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:- HARSHAD CHANDRASHEKHAR SHRIRAME
2. Class & Branch : - Second Year B.Tech Mechanical Engineering
3. Exam Seat No:2019BTEME00209 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	4ME201	Applied Mathematics for Mechanical Engin	1		
2	4ME202	Thermodynamics	2		
3	4ME203	Strength of Materials	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 - 1670	Pay Slip No. :- MU - 1670
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- HARSHAD CHANDRASHEKHAR SHRIRAME	Name:- HARSHAD CHANDRASHEKHAR SHRIRAME
Class & Branch:- Second Year B.Tech Mechanical Engineering	Class & Branch:- Second Year B.Tech Mechanical Engineering
Exam Seat No:- 2019BTEME00209	Exam Seat No:- 2019BTEME00209
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**