



Slip No.MU - 1780

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:- 2014BCV049 PRIYA SURESH BHOIR
2. Class & Branch : - Third Year B.Tech Civil Engineering
3. Exam Seat No:2014BCV049 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	3AM302	Structural Mechanics II	1	3CV321	Waste Management and Pollution Control
2	3CV302	Water Supply and Treatment Technology	2		
3	3CV303	Soil Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 4 X ` 300 /-			Total Amount :- ` 1200/-		

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

(Signature of student)      Date:

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

Receipt of Exam cell:

Checked by      Cashier      Date

RECEIPT (ACCOUNTS COPY)		RECEIPT (STUDENT COPY)	
WALCHAND COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI	
(An Autonomous Institute)		(An Autonomous Institute)	
Pay Slip No.      :- MU - 1780		Pay Slip No.      :- MU - 1780	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- 2014BCV049 PRIYA SURESH BHOIR		Name:- 2014BCV049 PRIYA SURESH BHOIR	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2014BCV049		Exam Seat No:- 2014BCV049	
Exam. Fee Rs Amount. : 1200/-		Exam. Fee Rs Amount. : 1200/-	
In Words:- ` One Thousand Two Hundred Only		In Words:- ` One Thousand Two Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by      Cashier		Checked by      Cashier	

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



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1781

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 PARASHURAM BHOKARE
2. Class & Branch : - Third Year B.Tech Civil Engineering
3. Exam Seat No:2016BTECV00056 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	3CV303	Soil 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 - 1781	Pay Slip No. :- MU - 1781
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHUBHAM PARASHURAM BHOKARE	Name:- SHUBHAM PARASHURAM BHOKARE
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2016BTECV00056	Exam Seat No:- 2016BTECV00056
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



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

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1782**

**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 SAMBHAJI MAHADIK  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2016BTECV00064 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	3CV303	Soil Mechanics	1		
2	3CV351	Environmental Engineering Lab	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 2 X ` 300 /-</b>			<b>Total Amount :- ` 600/-</b>		

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

(Signature of student)      Date:

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

**Receipt of Exam cell:**

Checked by

Cashier

Date

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. :- <b>MU - 1782</b>		Pay Slip No. :- <b>MU - 1782</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- SHUBHAM SAMBHAJI MAHADIK		Name:- SHUBHAM SAMBHAJI MAHADIK	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2016BTECV00064		Exam Seat No:- 2016BTECV00064	
Exam. Fee Rs Amount. : <b>600/-</b>		Exam. Fee Rs Amount. : <b>600/-</b>	
In Words:- ` Six Hundred Only		In Words:- ` Six Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by	Cashier	Checked by	Cashier

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



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

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1783**

**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:- ONKAR MURARI BHOSALE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00008 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	3AM301	Design of Steel Structures	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1783</b>		Pay Slip No.    :- <b>MU - 1783</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- ONKAR MURARI BHOSALE		Name:- ONKAR MURARI BHOSALE	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00008		Exam Seat No:- 2017BTECV00008	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

Makeup Examination June/July 2019

Slip No.MU - 1784

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:- RUTUJA MILIND METKARI  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00010 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	3AM301	Design of Steel Structures	1		
2	3CV302	Water Supply and Treatment Technology	2		
3	3AM302	Structural Mechanics II	3		
4	3CV303	Soil Mechanics	4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 4 X ` 300 /-			Total Amount :- ` 1200/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1784	Pay Slip No. :- MU - 1784
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RUTUJA MILIND METKARI	Name:- RUTUJA MILIND METKARI
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00010	Exam Seat No:- 2017BTECV00010
Exam. Fee Rs Amount. : 1200/-	Exam. Fee Rs Amount. : 1200/-
In Words:- ` One Thousand Two Hundred Only	In Words:- ` One Thousand Two Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



Slip No.MU - 2092

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:- MONALI SUDHAKAR ALONE
2. Class & Branch : - Third Year B.Tech Civil Engineering
3. Exam Seat No:2017BTECV00013 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	3CV303	Soil 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 - 2092		Pay Slip No.      :- MU - 2092	
Makeup Examination June/July 2019		Makeup Examination June/July 2019	
Name:- MONALI SUDHAKAR ALONE		Name:- MONALI SUDHAKAR ALONE	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00013		Exam Seat No:- 2017BTECV00013	
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

Makeup Examination June/July 2019

Slip No.MU - 1785

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:- NIHAL NISAR SAYYAD
2. Class & Branch : - Third Year B.Tech Civil Engineering
3. Exam Seat No:2017BTECV00019 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	3AM301	Design of Steel Structures	1		
2	3CV302	Water Supply and Treatment Technology	2		
3	3CV303	Soil Mechanics	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 3 X ` 300 /-			Total Amount :- ` 900/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1785	Pay Slip No. :- MU - 1785
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- NIHAL NISAR SAYYAD	Name:- NIHAL NISAR SAYYAD
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00019	Exam Seat No:- 2017BTECV00019
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
In Words:- ` Nine Hundred Only	In Words:- ` Nine Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



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

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1786**

**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:- PRERANA DINKARRAO CHAUDHARI  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00021 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	3AM301	Design of Steel Structures	1		
2	3CV302	Water Supply and Treatment Technology	2		
3	3AM302	Structural Mechanics II	3		
4	3CV303	Soil Mechanics	4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 4 X ` 300 /-</b>			<b>Total Amount :- ` 1200/-</b>		

(\* 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. :- <b>MU - 1786</b>		Pay Slip No. :- <b>MU - 1786</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- PRERANA DINKARRAO CHAUDHARI		Name:- PRERANA DINKARRAO CHAUDHARI	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00021		Exam Seat No:- 2017BTECV00021	
Exam. Fee Rs Amount. : <b>1200/-</b>		Exam. Fee Rs Amount. : <b>1200/-</b>	
In Words:- ` One Thousand Two Hundred Only		In Words:- ` One Thousand Two Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by	Cashier	Checked by	Cashier

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





WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1787

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

1. Name of student:- PRATIKSHA PRAKASH SONWANE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00023 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	3AM302	Structural Mechanics II	1		
2	3CV303	Soil Mechanics	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 2 X ` 300 /-			Total Amount :- ` 600/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by

Cashier

Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- MU - 1787	Pay Slip No. :- MU - 1787
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRATIKSHA PRAKASH SONWANE	Name:- PRATIKSHA PRAKASH SONWANE
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00023	Exam Seat No:- 2017BTECV00023
Exam. Fee Rs Amount. : 600/-	Exam. Fee Rs Amount. : 600/-
In Words:- ` Six Hundred Only	In Words:- ` Six Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



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

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1788**

**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:- SULTAN AZHAR PATEL  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00032 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	3CV303	Soil Mechanics	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1788</b>		Pay Slip No.    :- <b>MU - 1788</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- SULTAN AZHAR PATEL		Name:- SULTAN AZHAR PATEL	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00032		Exam Seat No:- 2017BTECV00032	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

**Makeup Examination June/July 2019**

**Slip No.MU - 1789**

**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:- SHAM GULABRAO KADAM  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00038 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	3CV303	Soil Mechanics	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1789</b>		Pay Slip No.    :- <b>MU - 1789</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- SHAM GULABRAO KADAM		Name:- SHAM GULABRAO KADAM	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00038		Exam Seat No:- 2017BTECV00038	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

**Makeup Examination June/July 2019**

**Slip No.MU - 1790**

**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:- GANESH DATTATRAYA YEDAVE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00040 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	3AM302	Structural Mechanics II	1		
2	3CV303	Soil Mechanics	2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 2 X ` 300 /-</b>			<b>Total Amount :- ` 600/-</b>		

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

(Signature of student)      Date:

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

**Receipt of Exam cell:**

Checked by

Cashier

Date

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. :- <b>MU - 1790</b>		Pay Slip No. :- <b>MU - 1790</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- GANESH DATTATRAYA YEDAVE		Name:- GANESH DATTATRAYA YEDAVE	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00040		Exam Seat No:- 2017BTECV00040	
Exam. Fee Rs Amount. : <b>600/-</b>		Exam. Fee Rs Amount. : <b>600/-</b>	
In Words:- ` Six Hundred Only		In Words:- ` Six Hundred Only	
Date:-		Date:-	
Signature of student:-		Signature of student:-	
Checked by	Cashier	Checked by	Cashier

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



Makeup Examination June/July 2019

Slip No.MU - 1791

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:- OMKAR SUKHDEO GARANDE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00046 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	3CV303	Soil 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 - 1791	Pay Slip No. :- MU - 1791
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- OMKAR SUKHDEO GARANDE	Name:- OMKAR SUKHDEO GARANDE
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00046	Exam Seat No:- 2017BTECV00046
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



Makeup Examination June/July 2019

Slip No.MU - 1792

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

1. Name of student:- ATHARVA TEJKUMAR KAMBLE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00059 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
3	3CV302	Water Supply and Treatment Technology	3		
7	3CV351	Environmental Engineering Lab	7		
9	3CV341	Seminar	9		
Exam Fee:- 9 X ` 300 /-			Total Amount :- ` 2700/-		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by

Cashier

Date

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 - 1792	Pay Slip No. :- MU - 1792
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ATHARVA TEJKUMAR KAMBLE	Name:- ATHARVA TEJKUMAR KAMBLE
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00059	Exam Seat No:- 2017BTECV00059
Exam. Fee Rs Amount. : 2700/-	Exam. Fee Rs Amount. : 2700/-
In Words:- ` Two Thousand Seven Hundred Only	In Words:- ` Two Thousand Seven Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



Makeup Examination June/July 2019

Slip No.MU - 1793

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

1. Name of student:- YASH MADHAV MANDADE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00062 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	3AM301	Design of Steel 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 - 1793	Pay Slip No. :- MU - 1793
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- YASH MADHAV MANDADE	Name:- YASH MADHAV MANDADE
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTECV00062	Exam Seat No:- 2017BTECV00062
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



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

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1794**

**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:- CHINMAYAI AJAY BOBADE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00064 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	3AM301	Design of Steel Structures	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1794</b>		Pay Slip No.    :- <b>MU - 1794</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- CHINMAYAI AJAY BOBADE		Name:- CHINMAYAI AJAY BOBADE	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00064		Exam Seat No:- 2017BTECV00064	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

**Makeup Examination June/July 2019**

**Slip No.MU - 1796**

**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:- RITU VIKRANT KHABADE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00065 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	3AM301	Design of Steel Structures	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1796</b>		Pay Slip No.    :- <b>MU - 1796</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- RITU VIKRANT KHABADE		Name:- RITU VIKRANT KHABADE	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00065		Exam Seat No:- 2017BTECV00065	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

**Makeup Examination June/July 2019**

**Slip No.MU - 1798**

**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:- SWAPNIL SURYAKANT VENKATPURWAR  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00071 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	3CV303	Soil Mechanics	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1798</b>		Pay Slip No.    :- <b>MU - 1798</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- SWAPNIL SURYAKANT VENKATPURWAR		Name:- SWAPNIL SURYAKANT VENKATPURWAR	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00071		Exam Seat No:- 2017BTECV00071	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

**Makeup Examination June/July 2019**

**Slip No.MU - 1800**

**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:- RUTUJA RAJGONDA PATIL  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00075 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	3CV303	Soil Mechanics	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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.    :- <b>MU - 1800</b>		Pay Slip No.    :- <b>MU - 1800</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- RUTUJA RAJGONDA PATIL		Name:- RUTUJA RAJGONDA PATIL	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00075		Exam Seat No:- 2017BTECV00075	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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

**Makeup Examination June/July 2019**

**Slip No.MU - 1803**

**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:- PRASAD DAYANAND VATHARE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTECV00076 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	3CV303	Soil Mechanics	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 1 X ` 300 /-</b>			<b>Total Amount :- ` 300/-</b>		

(\* 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. :- <b>MU - 1803</b>		Pay Slip No. :- <b>MU - 1803</b>	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- PRASAD DAYANAND VATHARE		Name:- PRASAD DAYANAND VATHARE	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2017BTECV00076		Exam Seat No:- 2017BTECV00076	
Exam. Fee Rs Amount. : <b>300/-</b>		Exam. Fee Rs Amount. : <b>300/-</b>	
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**



Makeup Examination June/July 2019

Slip No.MU - 1806

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:- AARATI NARESH NANWANI  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2017BTEME00037 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	3AM301	Design of Steel 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 - 1806	Pay Slip No. :- MU - 1806
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- AARATI NARESH NANWANI	Name:- AARATI NARESH NANWANI
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2017BTEME00037	Exam Seat No:- 2017BTEME00037
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



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

Form No. 36

**Makeup Examination June/July 2019**

**Slip No.MU - 1807**

**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:- PALLAVI BHIKCHAND KULLARKAR  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2018BTECV00202 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
3	3CV302	Water Supply and Treatment Technology	3		
7	3CV351	Environmental Engineering Lab	7		
9	3CV341	Seminar	9		
10			10		
<b>Exam Fee:- 9 X ` 300 /-</b>			<b>Total Amount :- ` 2700/-</b>		

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

(Signature of student)      Date:

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

**Receipt of Exam cell:**

Checked by

Cashier

Date

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 - 1807		Pay Slip No. :- MU - 1807	
<b>Makeup Examination June/July 2019</b>		<b>Makeup Examination June/July 2019</b>	
Name:- PALLAVI BHIKCHAND KULLARKAR		Name:- PALLAVI BHIKCHAND KULLARKAR	
Class & Branch:- Third Year B.Tech Civil Engineering		Class & Branch:- Third Year B.Tech Civil Engineering	
Exam Seat No:- 2018BTECV00202		Exam Seat No:- 2018BTECV00202	
Exam. Fee Rs Amount. : 2700/-		Exam. Fee Rs Amount. : 2700/-	
In Words:- ` Two Thousand Seven Hundred Only		In Words:- ` Two 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**



Makeup Examination June/July 2019

Slip No.MU - 1808

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:- POURNIMA RAMESH KAMBLE  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2018BTECV00203 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	3CV302	Water Supply and Treatment Technology	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 - 1808	Pay Slip No. :- MU - 1808
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- POURNIMA RAMESH KAMBLE	Name:- POURNIMA RAMESH KAMBLE
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00203	Exam Seat No:- 2018BTECV00203
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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



WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1809

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:- ROHINI RAJENDRA SAWARKAR  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2018BTECV00209 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	3CV303	Soil 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 - 1809	Pay Slip No. :- MU - 1809
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- ROHINI RAJENDRA SAWARKAR	Name:- ROHINI RAJENDRA SAWARKAR
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00209	Exam Seat No:- 2018BTECV00209
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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







WALCHAND COLLEGE OF ENGINEERING, SANGLI  
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1812

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:- PRASHANT PRAKASH KOSHTI  
2. Class & Branch : - Third Year B.Tech Civil Engineering  
3. Exam Seat No:2018BTECV00219 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	3AM302	Structural Mechanics II	1		
2	3CV303	Soil Mechanics	2		
3	4CV201	Applied Mathematics for Civil Engineers	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 - 1812	Pay Slip No. :- MU - 1812
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- PRASHANT PRAKASH KOSHTI	Name:- PRASHANT PRAKASH KOSHTI
Class & Branch:- Third Year B.Tech Civil Engineering	Class & Branch:- Third Year B.Tech Civil Engineering
Exam Seat No:- 2018BTECV00219	Exam Seat No:- 2018BTECV00219
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
In Words:- ` Nine Hundred Only	In Words:- ` Nine Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by	Checked by
Cashier	Cashier

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