WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)

Form No. 36

Makeup Examination June/July 2019

Slip No.MU - 1837

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:- PRINCE SATYENDRA SINGH

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2014BCS092 4. Address_____

Email :…………………….Phone No./Mobile No.:……………………..

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester						
Semester I			**Semester II**			
Sr.	**Code**	**Course Name**	**Sr.**	**Code**	**Course Name**	
1	4CS203	Data Structures	1	3CS321	Distributed and Cloud Computing	
2	3CS301	Computer Architecture	2	3CS322	Advanced Database System	
3	3CS302	Principles of Compiler Design	3	3CS334	Professional Elective IV Soft Computing	
4	3CS312	Professional Elective I : Advanced Data	4	1OE392	Open Elective II Web Design and Applicat	
5			5			
6			6			
7			7			
8			8			
9			9			
10			10			

Exam Fee:- 8 X ` 300 /-** | Total Amount :- ` **2400/-

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

(**Signature of student**)   Date:

Accounts, Please accept the application form along with amount of (Two Thousand Four 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 - 1837**	Pay Slip No**.** :- **MU - 1837**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- PRINCE SATYENDRA SINGH	Name:- PRINCE SATYENDRA SINGH
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2014BCS092	Exam Seat No:- 2014BCS092
Exam. Fee Rs Amount. : **2400/-**	Exam. Fee Rs Amount. : **2400/-**
In Words:- ` Two Thousand Four Hundred Only	In Words:- ` Two Thousand Four 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 - 1841

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:- 2015BCS024 MANGESH RAMESHWAR CHEKE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2015BCS024 4. Address_____

Email :…………………….Phone No./Mobile No.:………………………..

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester					
Semester I			**Semester II**		
Sr.	**Code**	**Course Name**	**Sr.**	**Code**	**Course Name**
1	3CS301	Computer Architecture	1	3CS322	Advanced Database System
2	3CS312	Professional Elective I : Advanced Data	2		
3	4CS203	Data Structures	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 - 1841**	Pay Slip No**.** :- **MU - 1841**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- 2015BCS024 MANGESH RAMESHWAR CHEKE	Name:- 2015BCS024 MANGESH RAMESHWAR CHEKE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2015BCS024	Exam Seat No:- 2015BCS024
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 - 1842

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:- KALPANA BABURAO NILEWAD

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2015BCS078 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	1OE343	Open Elective I Electrical Machines	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 - 1842**	Pay Slip No**.** :- **MU - 1842**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- KALPANA BABURAO NILEWAD	Name:- KALPANA BABURAO NILEWAD
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2015BCS078	Exam Seat No:- 2015BCS078
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**

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:- RAIS ESA SHAIKH

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2015BCS218 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	3CS302	Principles of Compiler Design		1	3CS322	Advanced Database System
2	3CS303	Design and Analysis of Algorithm		2		
3				3		
4				4		
5				5		
6				6		
7				7		
8				8		
9				9		
10				10		
Exam Fee:- 3 X ` 300 /-				**Total Amount :- ` 900/-**		

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

(**Signature of student**)   Date:

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

Receipt of Exam cell:

Checked by   Cashier   Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No**.** :- **MU - 1843**	Pay Slip No**.** :- **MU - 1843**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- RAIS ESA SHAIKH	Name:- RAIS ESA SHAIKH
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2015BCS218	Exam Seat No:- 2015BCS218
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**

Makeup Examination June/July 2019

Slip No.MU - 1844

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:- 2016BTECS00007 PRIYANKA HANMANT SHENDAGE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2016BTECS00007 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	1OE343	Open Elective I Electrical Machines	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 - 1844**	Pay Slip No**.** :- **MU - 1844**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- 2016BTECS00007 PRIYANKA HANMANT SHENDAGE	Name:- 2016BTECS00007 PRIYANKA HANMANT SHENDAGE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2016BTECS00007	Exam Seat No:- 2016BTECS00007
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**

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:- SHUBHANGI RAJARAM DASARE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2016BTECS00026 4. Address_____

Email :…………………….Phone No./Mobile No.:……………………..

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
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Courses of semester					
Semester I			**Semester II**		
Sr.	**Code**	**Course Name**	**Sr.**	**Code**	**Course Name**
1	1OE330	Open Elective I Energy 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 - 1845**	Pay Slip No**.** :- **MU - 1845**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- SHUBHANGI RAJARAM DASARE	Name:- SHUBHANGI RAJARAM DASARE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2016BTECS00026	Exam Seat No:- 2016BTECS00026
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)

Makeup Examination June/July 2019

Slip No.MU - 1846

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:- MANOJ JITENDRA SALUNKE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2016BTECS00037 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	3CS303	Design and Analysis of Algorithm		1	3CS321	Distributed and Cloud Computing
2	3CS311	Professional Electives I Advanced Operat		2	3CS322	Advanced Database System
3	1OE385	Open Elective I Internet of Things		3	3CS334	Professional Elective IV Soft Computing
4				4		
5				5		
6				6		
7				7		
8				8		
9				9		
10				10		
Exam Fee:- 6 X ` 300 /-				**Total Amount :- ` 1800/-**		

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

(Signature of student)   Date:

Accounts, Please accept the application form along with amount of (One Thousand Eight 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 - 1846**	Pay Slip No**.** :- **MU - 1846**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- MANOJ JITENDRA SALUNKE	Name:- MANOJ JITENDRA SALUNKE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2016BTECS00037	Exam Seat No:- 2016BTECS00037
Exam. Fee Rs Amount. : **1800/-**	Exam. Fee Rs Amount. : **1800/-**
In Words:- ` One Thousand Eight Hundred Only	In Words:- ` One Thousand Eight 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)

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:- DIGVIJAY SUNIL CHAVAN

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2016BTECS00104   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	3CS301	Computer Architecture	1			
2	3CS312	Professional Elective I : Advanced Data	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 - 1847**	Pay Slip No**.** :- **MU - 1847**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- DIGVIJAY SUNIL CHAVAN	Name:- DIGVIJAY SUNIL CHAVAN
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2016BTECS00104	Exam Seat No:- 2016BTECS00104
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

Makeup Examination June/July 2019

Slip No.MU - 1850

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 BHAGWAN KAMBLE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2017BTECS00003 4. Address_____

Email :………………………Phone No./Mobile No.:……………………….

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester						
Semester I			**Semester II**			
Sr.	Code	Course Name	Sr.	Code	Course Name	
1	3CS312	Professional Elective I : Advanced Data	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 - 1850**	Pay Slip No**.** :- **MU - 1850**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- SHUBHAM BHAGWAN KAMBLE	Name:- SHUBHAM BHAGWAN KAMBLE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00003	Exam Seat No:- 2017BTECS00003
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**

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:- KARTIKKUMAR BABUBHAI CHOUDHARI

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2017BTECS00010   4. Address_____

Email :…………………………Phone No./Mobile No.:……………………….

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester					
Semester I			**Semester II**		
Sr.	**Code**	**Course Name**	**Sr.**	**Code**	**Course Name**
1	3CS301	Computer Architecture	1	3CS322	Advanced Database System
2	3CS302	Principles of Compiler Design	2		
3	3CS303	Design and Analysis of Algorithm	3		
4	3CS311	Professional Electives I Advanced Operat	4		
5	1OE343	Open Elective I Electrical Machines	5		
6	4CS203	Data Structures	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 - 1851**	Pay Slip No**.** :- **MU - 1851**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- KARTIKKUMAR BABUBHAI CHOUDHARI	Name:- KARTIKKUMAR BABUBHAI CHOUDHARI
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00010	Exam Seat No:- 2017BTECS00010
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

Makeup Examination June/July 2019

Slip No.MU - 1852

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:- SACHIN SHRIPATI MORE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2017BTECS00025 4. Address_____

Email :………………………Phone No./Mobile No.:……………………….

Affix recent photograph
----x----

5. Details of the courses for which I wish to appear for the examination:

Courses of semester						
Semester I				**Semester II**		
Sr.	**Code**	**Course Name**		**Sr.**	**Code**	**Course Name**
1	4CS204	Data Communication		1		
2				2		
3				3		
4				4		
5				5		
6				6		
7				7		
8				8		
9				9		
10				10		
Exam Fee:- 1 X ` 300 /-				**Total Amount :- ` 300/-**		

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

(**Signature of student**)   Date:

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

Receipt of Exam cell:

Checked by   Cashier   Date

RECEIPT (ACCOUNTS COPY)	**RECEIPT (STUDENT COPY)**
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No**.** :- **MU - 1852**	Pay Slip No**.** :- **MU - 1852**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- SACHIN SHRIPATI MORE	Name:- SACHIN SHRIPATI MORE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00025	Exam Seat No:- 2017BTECS00025
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**

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:- HAVALE TEJAS MAHAVEER

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2017BTECS00051 4. Address_____

Email :…………………….Phone No./Mobile No.:…………………….

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester					
Semester I			**Semester II**		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	3CS301	Computer Architecture	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			**Total Amount :- ` 300/-**		

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

(**Signature of student**)   Date:

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

Receipt of Exam cell:

Checked by   Cashier   Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No. :- **MU - 1853**	Pay Slip No. :- **MU - 1853**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- HAVALE TEJAS MAHAVEER	Name:- HAVALE TEJAS MAHAVEER
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00051	Exam Seat No:- 2017BTECS00051
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**

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 PRASHANT ARAGE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2017BTECS00057 4. Address_____

Email :…………………………Phone No./Mobile No.:……………………….

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester					
Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Name
1	4CS203	Data Structures	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` 300/-		

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

(**Signature of student**)   Date:

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

Receipt of Exam cell:

Checked by   Cashier   Date

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No**.** :- **MU - 1863**	Pay Slip No**.** :- **MU - 1863**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- PRAJWAL PRASHANT ARAGE	Name:- PRAJWAL PRASHANT ARAGE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00057	Exam Seat No:- 2017BTECS00057
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**

Makeup Examination June/July 2019

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

1. Name of student:- VAIBHAV VINOD KULKARNI

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2017BTECS00087 4. Address_____

Email :…………………….Phone No./Mobile No.:…………………….

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester						
Semester I			**Semester II**			
Sr.	Code	Course Name	Sr.	Code	Course Name	
1	3CS351	Design and Analysis of Algorithm Lab	1			
2	3CS352	Object Oriented Modeling and Design	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 - 1855**	Pay Slip No. :- **MU - 1855**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- VAIBHAV VINOD KULKARNI	Name:- VAIBHAV VINOD KULKARNI
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2017BTECS00087	Exam Seat No:- 2017BTECS00087
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**

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:- PRANALI KISHOR NARNAWARE

2. Class & Branch : - Third Year B.Tech Computer Science and Engineering

3. Exam Seat No:2018BTECS00219 4. Address_____

Email :………………………Phone No./Mobile No.:………………………..

5. Details of the courses for which I wish to appear for the examination:

Affix recent photograph
----x----

Courses of semester					
Semester I			**Semester II**		
Sr.	**Code**	**Course Name**	**Sr.**	**Code**	**Course Name**
1	3CS301	Computer Architecture	1		
2			2		
3			3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
Exam Fee:- 1 X ` 300 /-			Total Amount :- ` **300/-**		

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

(**Signature of student**)   Date:

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

Receipt of Exam cell:

Checked by   Cashier   Date

RECEIPT (ACCOUNTS COPY)	**RECEIPT (STUDENT COPY)**
WALCHAND COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI
(An Autonomous Institute)	(An Autonomous Institute)
Pay Slip No**.** :- **MU - 1856**	Pay Slip No**.** :- **MU - 1856**
Makeup Examination June/July 2019	**Makeup Examination June/July 2019**
Name:- PRANALI KISHOR NARNAWARE	Name:- PRANALI KISHOR NARNAWARE
Class & Branch:- Third Year B.Tech Computer Science and Engineering	Class & Branch:- Third Year B.Tech Computer Science and Engineering
Exam Seat No:- 2018BTECS00219	Exam Seat No:- 2018BTECS00219
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**