

Form No. 36

Slip No.MU - 2055

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	f student:- HARSHAL SUKDEO PARADHI					
	2. Class & Branch: - Third Year B. Tech Mechanical Engineering						
	3. Exam Se	eat No:2016BTEME00010 4. Address		_		photograph	
	Email :	Phone No./Mobile No.:				X	
_	5. Details	of the courses for which I wish to appear for					
_		Courses	s of se	mester			
	1	Semester I		1	Semester II		
Sr.		Course Name	Sr	-	Course Na	me	
1	3ME302	Heat Transfer	1	3ME321	Machine Design II		
2	3ME303	Theory of Machines II	2	3ME322	Internal Combustion Engin	es	
3	3ME304	Metrology and Quality Control	3	3ME323	CAD - CAM		
4	4ME203	Strength of Materials	4				
5			5				
6			6				
7			7				
8			8				
9			9				
10			10				
	Exam Fee:- 7 X ` 300 /- Total Amount :- ` 2100/-						
		, Please accept the application form along water to: Examination fee(EXAM CELL) A/C	`		- + Exam Fee /-) o Thousand One Hundred On	nly)	
		Checked by		Cashier	Date		
		CEIPT (ACCOUNTS COPY)	<u> </u>		RECEIPT (STUDENT CO		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	<u> </u>	WALCHAN	ID COLLEGE OF ENGINEE	RING, SANGLI	
		(An Autonomous Institute)			(An Autonomous Institute	e)	
Pa	y Slip No.	:- MU - 2055] <u> </u> F	ay Slip No.	:- MU - 2055		
Ma	akeup Exar	nination June/July 2019		Makeup Exa	amination June/July 2019		
Na	Name:- HARSHAL SUKDEO PARADHI			Name:- HAR	SHAL SUKDEO PARADHI		
Cla	ass & Branc	h:- Third Year B.Tech Mechanical		Class & Bran	nch:- Third Year B. Tech Med	hanical	
	ineering			gineering			
Ex	am Seat No	:- 2016BTEME00010	<u> </u>	Exam Seat No:- 2016BTEME00010			
Ex	am. Fee Rs	Amount. : 2100/-] LE	Exam. Fee Rs Amount. : 2100/-			
In	Words:- ` T	Wo Thousand One Hundred Only	I	n Words:- `	Two Thousand One Hundre	d Only	
Da	to:		7 -	Jata:			

Signature of student:-

Checked by

Cashier

Cashier

Signature of student:-



Form No. 36

Slip No.MU - 1894

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	f student:- 2016BTEME00012 NEHA SANJIV	/ KININ	NGE				
		Branch: - Third Year B.Tech Mechanical Er				Affix recent		
	3. Exam Seat No:2016BTEME00012 4. Address							
						photograph x		
	Elliali	Flione No./Woone No						
	5. Details	of the courses for which I wish to appear fo	the ex	amination:				
		Courses	of sem	iester				
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
1	3ME301	Machine Design I	1					
2	3ME302	Heat Transfer	2					
3	3ME303	Theory of Machines II	3					
4	3ME304	Metrology and Quality Control	4					
5			5					
6			6					
7		İ	7					
8			8					
9		İ	9					
10		İ	10					
	•	Exam Fee:- 4 X ` 300	/-		Total	Amount :- ` 1200/-		
·	(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							
Rec	eipt of Exa	Checked by		Cashier	Date			
		Checked by		Casillei	Date			
	RE	CCEIPT (ACCOUNTS COPY)]	RECEIPT (STUDENT CO	PPY)		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		VALCHANI	O COLLEGE OF ENGINEE	RING, SANGLI		
		(An Autonomous Institute)			(An Autonomous Institute	e)		
Pay	y Slip No.	:- MU - 1894	Pa	y Slip No.	:- MU - 1894			
Ma	keup Exar	nination June/July 2019	M	akeup Exa	mination June/July 2019			
Na	me:- 2016B	TEME00012 NEHA SANJIV KININGE	Na	me:- 2016E	BTEME00012 NEHA SANJI	V KININGE		
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	Cla	ass & Branc	ch:- Third Year B.Tech Med	hanical		
Engi	Engineering			ineering				
Exam Seat No:- 2016BTEME00012			Ex	am Seat No	o:- 2016BTEME00012			
Ex	am. Fee Rs	Amount. : 1200/-	Ex	Exam. Fee Rs Amount.: 1200/-				
In	Words:- ` C	One Thousand Two Hundred Only	In	Words:- ` (One Thousand Two Hundre	d Only		
Da	te:-	-	Da	Date:-				
Sig	nature of st	tudent:-	Sig	Signature of student:-				

Checked by

Cashier

Cashier



Form No. 36

Slip No.MU - 1896

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 o	f student:- NEHA PRABHAKAR KAMBLE					
	2. Class &	Branch: - Third Year B. Tech Mechanical Er	gineerin	g		Affix recent	
	3. Exam Seat No:2016BTEME00018 4. Address						
	Email :						
	Ellian	Flione INO./Ividone INO	•••••				
	5. Details	of the courses for which I wish to appear fo	r the exa	amination:			
		Courses	of sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Sr. Code Course Name			
1	3ME301	Machine Design I	1				
2	3ME304	Metrology and Quality Control	2				
3			3				
4			4				
5			5				
6			6				
7			7				
8			8				
9			9				
10			10				
		Exam Fee:- 2 X ` 300	/-		Tota	al Amount :- ` 600 /-	
(Si		f student) Date: , Please accept the application form along wit to: Examination fee(EXAM CELL) A/C	(* Late		+ Exam Fee /-) Hundred Only)		
P ₀	eipt of Exa	am call					
Ku	cipt of Exa	Checked by		Cashier	Date		
				·····			
		ECEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT CO	PY)	
W	'ALCHAND	COLLEGE OF ENGINEERING, SANGLI	W	ALCHAN	D COLLEGE OF ENGINEE	ERING, SANGLI	
		(An Autonomous Institute)	<u> </u>		(An Autonomous Institut	e)	
Pa	y Slip No.	:- MU - 1896	Pag	y Slip No.	:- MU - 1896		
Ma	akeup Exai	mination June/July 2019	Ma	ikeup Exa	mination June/July 2019		
Na	me:- NEHA	PRABHAKAR KAMBLE	Na	me:- NEHA	A PRABHAKAR KAMBLE		
Cla	Class & Branch:- Third Year B.Tech Mechanical			ıss & Bran	ch:- Third Year B.Tech Med	chanical	
	Engineering			ineering			
-		:- 2016BTEME00018			o:- 2016BTEME00018		
-		Amount. : 600/-	-	Exam. Fee Rs Amount.: 600/-			
In	Words:- ` S	Six Hundred Only	In	Words:-`	Six Hundred Only		
	te:-		-	Date:-			
Sic	mature of c	tudent:	Sin	mature of	student:		

Checked by

Cashier

Cashier



Form No. 36

Slip No.MU - 1897

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	f student:- DURGADAS HARIDAS DHOKE					
	2. Class &	Branch: - Third Year B. Tech Mechanical E	ngineerir	ıg		Affix recent	
	3. Exam S		photograph				
		Phone No./Mobile No.:				X	
					•		
_	5. Details	of the courses for which I wish to appear for					
L			s of sem	ester	~		
	1	Semester I			Semester II		
Sr.		Course Name	Sr.	Code	Course Na	me	
1	3ME301	Machine Design I	1				
2	3ME302	Heat Transfer	2				
3	3ME303	Theory of Machines II	3				
4	3ME304	Metrology and Quality Control	4				
5			5				
6			6				
7			7				
8			8				
9			9				
10			10				
		Exam Fee:- 4 X ` 30	0 /-		Total	Amount :- ` 1200/-	
(Si		student) Date: Please accept the application form along w to: Examination fee(EXAM CELL) A/C	(* Late		+ Exam Fee /-) Thousand Two Hundred O	nly)	
Rec	eipt of Exa	nm cell:					
		Checked by		Cashier	Date		
	RI	ECEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT CO	PPY)	
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		VALCHAN	D COLLEGE OF ENGINER	ERING, SANGLI	
		(An Autonomous Institute)	1 [(An Autonomous Institut	e)	
Pa	y Slip No.	:- MU - 1897	Pa	y Slip No.	:- MU - 1897		
Ma	keup Exar	nination June/July 2019	M:	akeup Exa	mination June/July 2019		
Na	me:- DURC	GADAS HARIDAS DHOKE	Na	me:- DUR	GADAS HARIDAS DHOKE	,	
Cla	ıss & Branc	h:- Third Year B.Tech Mechanical	Cla	ass & Bran	ch:- Third Year B.Tech Med	chanical	
Eng	Engineering			ineering			
Exam Seat No:- 2016BTEME00033 Ex				am Seat N	o:- 2016BTEME00033		
Ex	am. Fee Rs	Amount. : 1200/-	Ex	Exam. Fee Rs Amount.: 1200/-			
In	Words:- ` (One Thousand Two Hundred Only	In	Words:- `	One Thousand Two Hundre	ed Only	
Da	te:-	-	Da	ite:-			
Sig	Signature of student:- Signature of student:-						

Checked by

Cashier

Cashier



Form No. 36

Cashier

Slip No.MU - 1899

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	f student:- UPMANYU KHAJURIA						
	2. Class & Branch: - Third Year B.Tech Mechanical Engineering							
	3. Exam Seat No:2016BTEME00071 4. Address							
						photograph x		
	Email :	Phone No./Mobile No.:						
	5. Details	of the courses for which I wish to appear fo	r the ex	kamination:				
		Courses	of ser	nester				
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Sr. Code Course Name				
1	3ME301	Machine Design I	1	3ME322	Internal Combustion Engin	ies		
2	3ME302	Heat Transfer	2					
3	3ME303	Theory of Machines II	3					
4	3ME304	Metrology and Quality Control	4					
5	4ME203	Strength of Materials	5					
6			6					
7			7					
8			8					
9			9					
10			10					
	Exam Fee:- 6 X ` 300 /- Total Amount :- ` 1800/-							
·		, Please accept the application form along witto: Examination fee(EXAM CELL) A/C	(* Late		+ Exam Fee /-) Thousand Eight Hundred O	nly)		
1101	v-pv v- 2	Checked by		Cashier	Date			
		Checked by		Casinci	Date			
	RE	CCEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT CO	PY)		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		WALCHAN	D COLLEGE OF ENGINEE	RING, SANGLI		
		(An Autonomous Institute)			(An Autonomous Institut	e)		
Pa	y Slip No.	:- MU - 1899	P	ay Slip No.	:- MU - 1899			
Ma	keup Exar	nination June/July 2019		lakeup Exa	mination June/July 2019			
Na	me:- UPMA	NYU KHAJURIA		ame:- UPM	ANYU KHAJURIA			
Cla	ss & Branc	h:- Third Year B.Tech Mechanical		lass & Bran	ch:- Third Year B.Tech Med	hanical		
Eng	Engineering			gineering				
Ex	am Seat No	:- 2016BTEME00071	E	xam Seat N	o:- 2016BTEME00071			
Ex	am. Fee Rs	Amount.: 1800/-	E	Exam. Fee Rs Amount. : 1800/-				
In	Words:- ` C	One Thousand Eight Hundred Only	Ir	In Words:- `One Thousand Eight Hundred Only				
Da	te:-			ate:-				
Sig	nature of st	tudent:-		Signature of student:-				

Checked by

Checked by



Form No. 36

Cashier

Slip No.MU - 1900

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	f student:- MAYUR SANJAY DESHPANDE						
	2. Class &	Branch: - Third Year B. Tech Mechanical En	gineerin	g		Affix recent		
			•			photograph		
		Phone No./Mobile No.:				X		
	Eman	Hone Ivosivione Ivo	•••••		•			
	5. Details	of the courses for which I wish to appear for	r the exa	amination:				
		Courses	of sem	ester				
	-	Semester I			Semester II			
Sr.		Course Name	Sr.	Sr. Code Course Name				
1	3ME303	Theory of Machines II	1					
2 3			2					
			3					
4			4					
5			5					
6			6					
7			7					
8			8					
9			9					
10			10					
		Exam Fee:- 1 X ` 300	/-		Tota	al Amount :- ` 300 /-		
(Si		Student) Date: , Please accept the application form along wit to: Examination fee(EXAM CELL) A/C	h amou	nt of (Thre	ee Hundred Only)			
Rec	ceipt of Exa	ım cell:						
		Checked by		Cashier	Date			
	RF	ECEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT CO	OPY)		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	V	ALCHAN	D COLLEGE OF ENGINER	ERING, SANGLI		
		(An Autonomous Institute)	<u> </u>		(An Autonomous Institut	e)		
Pa	y Slip No.	:- MU - 1900	Pa	y Slip No.	:- MU - 1900			
Ma	akeup Exar	nination June/July 2019	Ma	ikeup Exa	mination June/July 2019			
Na	me:- MAYU	JR SANJAY DESHPANDE	Na	me:- MAY	UR SANJAY DESHPANDE	,		
		h:- Third Year B.Tech Mechanical	Cla	ıss & Bran	ch:- Third Year B.Tech Med	chanical		
\vdash	Engineering			ineering				
		:- 2017BTEME00005	1 -		o:- 2017BTEME00005			
		Amount. : 300/-	-		s Amount. : 300 /-			
In	Words:- ` T	Three Hundred Only			Three Hundred Only			
	te:-			te:-				
Sig	gnature of st	tudent:-	Sig	nature of s	student:-			

Checked by

Cashier



Form No. 36

Slip No.MU - 1901

Makeup Examination June/July 2019

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

	1. Name of	student:- KUNAL NANDKUMAR VIBHUTE	E					
	2. Class & Branch: - Third Year B.Tech Mechanical Engineering							
	3. Exam Seat No:2017BTEME00008 4. Address							
		Phone No./Mobile No.:				X		
					•			
	5. Details of	of the courses for which I wish to appear for						
			of semester					
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
1	3ME303	Theory of Machines II	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/-							
·		Please accept the application form along wit o: Examination fee(EXAM CELL) A/C	(* Late	nt of (Six I	+ Exam Fee /-) Hundred Only)			
		Checked by		Cashier Date				
		CEIPT (ACCOUNTS COPY)	<u> </u>		RECEIPT (STUDENT CO			
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	<u> v</u>	VALCHAN]	D COLLEGE OF ENGINEE			
		(An Autonomous Institute)	<u> </u>		(An Autonomous Institute	e)		
Pay	/ Slip No.	:- MU - 1901	Pa	y Slip No.	:- MU - 1901			
Ma	keup Exan	nination June/July 2019	M	akeup Exa	mination June/July 2019			
Name:- KUNAL NANDKUMAR VIBHUTE		Na	me:- KUNA	AL NANDKUMAR VIBHUT	Е			
		h:- Third Year B.Tech Mechanical			ch:- Third Year B.Tech Med	hanical		
Engineering				ineering				
		- 2017BTEME00008	-	Exam Seat No:- 2017BTEME00008				
Exa	am. Fee Rs	Amount. : 600 /-	-	Exam. Fee Rs Amount.: 600/-				
In	Words:- `S	ix Hundred Only	In	Words:- `	Six Hundred Only			
Da	te:-		Da	ite:-				

Signature of student:-

Cashier

Checked by

Cashier

Signature of student:-



Form No. 36

Slip No.MU - 1903

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:- SUMIT KAILAS RANE					
	2. Class &	Branch: - Third Year B.Tech Mechanical En	gineerir	ng		Affix recent	
	3. Exam Seat No:2017BTEME00012 4. Address						
		Phone No./Mobile No.:				X	
	5 D.4. T.	C41	41				
	5. Details	of the courses for which I wish to appear for Courses					
\vdash		Semester I	or sem	iester	Semester II		
Sr.	Code	Course Name	Sr. Code Course Name				
1	3ME301	Machine Design I	1	Couc	Course Na	IIIC	
2	3ME303	Theory of Machines II	2				
3	3ME304	Metrology and Quality Control	3				
4		processes and comments	4				
5			5				
6			6				
7			7				
8			8				
9			9				
10			10				
	Exam Fee:- 3 X ` 300 /- Total Amount :- ` 900/-						
		Please accept the application form along wit to: Examination fee(EXAM CELL) A/C	(* Late		+ Exam Fee /-) Hundred Only) Date		
		Checked by		Casillei	Date		
	RE	CEIPT (ACCOUNTS COPY)]	RECEIPT (STUDENT CO	PY)	
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	V	VALCHANI	O COLLEGE OF ENGINEE	RING, SANGLI	
		(An Autonomous Institute)			(An Autonomous Institute	e)	
Pa	y Slip No.	:- MU - 1903	Pa	y Slip No.	:- MU - 1903		
		nination June/July 2019			mination June/July 2019		
		Γ KAILAS RANE	-		T KAILAS RANE		
		h:- Third Year B.Tech Mechanical			ch:- Third Year B.Tech Med	hanical	
	ineering	20157777 5700012		Engineering			
_		:- 2017BTEME00012	l —	Exam Seat No:- 2017BTEME00012			
_		Amount. : 900/-	-		Amount. : 900/-		
In Words:- ` Nine Hundred Only			In	Words:- ` 1	Nine Hundred Only		

Date:-

Checked by

Signature of student:-

Cashier

Cashier

Date:-

Checked by

Signature of student:-



Form No. 36

Slip No.MU - 1904

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:- ROSHAN DILIP SARODE					
	2. Class & 1	Branch: - Third Year B. Tech Mechanical En	gineerir	ıg		Affix recent	
	3. Exam Seat No:2017BTEME00022 4. Address						
		Phone No./Mobile No.:				X	
	Lilian	Hone two./Woone two			•		
	5. Details of	of the courses for which I wish to appear for	the exa	amination:			
		Courses	of sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Na	me	
1	3ME303	Theory of Machines II	1				
2 3			2				
3			3				
4			4				
5			5				
6			6				
7			7				
8			8				
9			9				
10			10				
		Exam Fee:- 1 X ` 300	/-		Tota	l Amount :- ` 300/-	
		Please accept the application form along wit to: Examination fee(EXAM CELL) A/C	h amou	nt of (Thre	e Hundred Only)		
		Checked by		Cashier	Date		
	RE	CEIPT (ACCOUNTS COPY)]	RECEIPT (STUDENT CO	PY)	
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	V	VALCHANI	D COLLEGE OF ENGINEE	RING, SANGLI	
		(An Autonomous Institute)			(An Autonomous Institute	e)	
Pay	y Slip No.	:- MU - 1904	Pa	y Slip No.	:- MU - 1904		
Ma	keup Exam	ination June/July 2019	Ma	akeup Exa	mination June/July 2019		
Na	me:- ROSHA	AN DILIP SARODE	Na	me:- ROSF	HAN DILIP SARODE		
Cla	ss & Branch	n:- Third Year B.Tech Mechanical	Cla	ass & Branc	ch:- Third Year B.Tech Med	hanical	
Engi	neering		Eng	ineering			
Exa	am Seat No:	- 2017BTEME00022	Ex	am Seat No	o:- 2017BTEME00022		
Exa	am. Fee Rs	Amount. : 300 /-	Ex	Exam. Fee Rs Amount.: 300/-			
In	Words:- ` T	hree Hundred Only	In	In Words:- ` Three Hundred Only			
Da	te:-		Da	ite:-			
Sig	nature of stu	udent:-	Sig	gnature of s	tudent:-		

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Cashier

Cashier



Form No. 36

Cashier

Slip No.MU - 1915

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	f student:- VISHWABHOOSHAN RAMTEKE						
2. Class & Branch: - Third Year B.Tech Mechanical Engineering								
	3. Exam Seat No:2017BTEME00048 4. Address							
	Email :							
	7 D . 1		41	· ,·				
	5. Details	of the courses for which I wish to appear for						
		Courses	of ser	nester	G 4 H			
		Semester I			Semester II	N		
Sr.		Course Name	Sr.		CAD CAM	e Name		
1	3ME301	Machine Design I		3ME323	CAD - CAM			
2	3ME302	Heat Transfer	2					
3	3ME303	Theory of Machines II	3					
4	3ME304	Metrology and Quality Control	4					
5	4ME204	Materials Engineering	5					
6			6					
7			7					
8			8					
9			9					
10			10					
	Exam Fee:- 6 X ` 300 /- Total Amount :- ` 1800/-							
Ì	(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							
Rec	eipt of Exa							
		Checked by		Cashier	Date			
	RE	CEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT	COPY)		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		WALCHAN	ID COLLEGE OF ENGIN	NEERING, SANGLI		
		(An Autonomous Institute)			(An Autonomous Inst	titute)		
Pay	y Slip No.	:- MU - 1915	P	ay Slip No.	:- MU - 1915			
Ma	keup Exan	nination June/July 2019	N	lakeup Exa	amination June/July 20	19		
Na	me:- VISHV	VABHOOSHAN RAMTEKE	N	ame:- VISI	HWABHOOSHAN RAMT	EKE		
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	C	lass & Bran	nch:- Third Year B.Tech	Mechanical		
	neering		-	gineering				
Exa	am Seat No	:- 2017BTEME00048	Е	xam Seat N	lo:- 2017BTEME00048			
Exa	am. Fee Rs	Amount.: 1800/-	E	Exam. Fee Rs Amount.: 1800/-				
In	Words:- ` C	One Thousand Eight Hundred Only	Ir	In Words:- `One Thousand Eight Hundred Only				
Da	te:-		D	ate:-				
Sig	nature of st	tudent:-		ignature of	student:-			

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Form No. 36

Slip No.MU - 1916

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	f student:- ASHUTOSH MAHESH ISLAMPU	RE					
	2. Class & Branch: - Third Year B.Tech Mechanical Engineering							
		eat No:2017BTEME00050 4. Address	•	•		Affix recent photograph		
						X		
	Email :	Phone No./Mobile No.:						
	5. Details	of the courses for which I wish to appear fo	r the ex	amination:				
		Courses	of sen	nester				
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Code	Course Na	ıme		
1	3ME301	Machine Design I	1					
2	3ME302	Heat Transfer	2					
3	3ME303	Theory of Machines II	3					
4	3ME304	Metrology and Quality Control	4					
5	3ME311	Professional Elective II Fluid and Turbo	5					
6	4ME203	Strength of Materials	6					
7			7					
8			8					
9			9					
10			10					
	,	Exam Fee:- 6 X ` 300	/-	·	Total	Amount :- ` 1800/-		
	and credit	, Please accept the application form along witto: Examination fee(EXAM CELL) A/C	(* Late		e Thousand Eight Hundred C	Only)		
Rec	eipt of Exa							
		Checked by		Cashier	Date			
	• • • • • • • • • • • • • • • • • • • •							
	RE	CCEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT CO	OPY)		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		WALCHAN	D COLLEGE OF ENGINER	ERING, SANGLI		
		(An Autonomous Institute)			(An Autonomous Institut	re)		
Pa	y Slip No.	:- MU - 1916	Pa	ay Slip No.	:- MU - 1916			
Ma	ıkeup Exar	nination June/July 2019		akeup Exa	amination June/July 2019			
Na	me:- ASHU	TOSH MAHESH ISLAMPURE	N	ame:- ASH	UTOSH MAHESH ISLAMP	URE		
Cla	ss & Branc	h:- Third Year B.Tech Mechanical		lass & Bran	nch:- Third Year B.Tech Med	chanical		
Eng	Engineering			gineering				
Ex	am Seat No	:- 2017BTEME00050	E	kam Seat N	lo:- 2017BTEME00050			
Ex	am. Fee Rs	Amount.: 1800/-	E	kam. Fee R	s Amount. : 1800/-			
In	Words:- ` C	One Thousand Eight Hundred Only	In	In Words:- `One Thousand Eight Hundred Only				
Da	te:-			Date:-				
Sig	nature of st	tudent:-	Si	gnature of	student:-			

Checked by

Cashier

Cashier



Form No. 36

Slip No.MU - 1917

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	f student:- ABHIJEET EKANATH KAMBLE					
	2. Class &	Branch: - Third Year B.Tech Mechanical En	gineerir	ıg		Affix recent	
	3. Exam Seat No:2017BTEME00052 4. Address						
		Phone No./Mobile No				X	
	Linui	Holie 130,/14looke 130					
	5. Details	of the courses for which I wish to appear for	the ex	amination:			
		Courses	of sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Na	me	
1	3ME301	Machine Design I	1				
2	3ME302	Heat Transfer	2				
3	3ME303	Theory of Machines II	3				
4	3ME304	Metrology and Quality Control	4				
5			5				
6			6				
7			7				
8			8				
9			9				
10		İ	10				
<u>, </u>		Exam Fee:- 4 X ` 300	/-		Total	Amount :- ` 1200/-	
ì		, Please accept the application form along wit to : Examination fee(EXAM CELL) A/C	h amou	nt of (One	Thousand Two Hundred Or	nly)	
		Checked by		Cashier	Date		
		•••••					
	RF	CCEIPT (ACCOUNTS COPY)]	RECEIPT (STUDENT CO	PY)	
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	V	VALCHANI	O COLLEGE OF ENGINEE	RING, SANGLI	
		(An Autonomous Institute)			(An Autonomous Institute	e)	
Pay	y Slip No.	:- MU - 1917	Pa	y Slip No.	:- MU - 1917		
Ma	keup Exan	nination June/July 2019	Ma	akeup Exai	mination June/July 2019		
Na	me:- ABHIJ	EET EKANATH KAMBLE	Na	me:- ABHI.	JEET EKANATH KAMBLE		
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	Cla	ass & Branc	ch:- Third Year B.Tech Med	hanical	
Engi	neering		Eng	ineering			
Exa	am Seat No	:- 2017BTEME00052	Ex	am Seat No	o:- 2017BTEME00052		
Exa	am. Fee Rs	Amount.: 1200/-	Ex	am. Fee Rs	Amount.: 1200/-		
In	Words:- ` C	One Thousand Two Hundred Only	In	In Words:- ` One Thousand Two Hundred Only			
Da	te:-		Da	ite:-			
Sig	nature of st	tudent:-	Sig	gnature of s	tudent:-		

Checked by

Cashier

Cashier



Form No. 36

Cashier

Slip No.MU - 1918

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	f student:- SUMEDH KUMDEO FUSATE						
2. Class & Branch: - Third Year B.Tech Mechanical Engineering							Affix recent	
	3. Exam Seat No:2017BTEME00058 4. Address							
		Phone No./Mobile No					X	
_	5. Details	of the courses for which I wish to appear f						
_		Course	s of se	meste	r			
	1	Semester I				Semester II		
Sr.		Course Name	Sr	: C	ode	Course Na	me	
1	3ME301	Machine Design I	1					
2	3ME303	Theory of Machines II	2					
3	3ME304	Metrology and Quality Control	3					
4	10E343	Open Elective I Electrical Machines	4					
5			5					
6			6					
7			7					
8			8					
9			9					
10			10					
		Exam Fee:- 4 X ` 30	0 /-			Total	Amount :- ` 1200/-	
		, Please accept the application form along w to: Examination fee(EXAM CELL) A/C	ith amo	ount of	(One	Thousand Two Hundred Or	nly)	
	cipt of Lixa	Checked by		Ca	shier	Date		
		CCEIPT (ACCOUNTS COPY)	IJ L	RECEIPT (STUDENT COPY)				
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	IJ L	WALCHAND COLLEGE OF ENGINEERING, SANGLI				
		(An Autonomous Institute)	J L			(An Autonomous Institute	e)	
Pay	y Slip No.	:- MU - 1918	_ P	Pay Slip	No.	:- MU - 1918		
Ma	ikeup Exar	nination June/July 2019		Makeu	p Exar	mination June/July 2019		
Na	me:- SUME	DH KUMDEO FUSATE		Vame:-	SUME	EDH KUMDEO FUSATE		
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	7 6	Class &	Branc	h:- Third Year B.Tech Med	hanical	
Engi	neering		En	ngineer	ing			
Exa	am Seat No	:- 2017BTEME00058		Exam S	eat No	:- 2017BTEME00058		
Exa	am. Fee Rs	Amount.: 1200/-] [E	Exam. Fee Rs Amount.: 1200/-				
In	Words:- ` C	One Thousand Two Hundred Only] [I	n Wor	ds:- ` (One Thousand Two Hundre	d Only	
Da	te:-	-		Date:-				
Signature of student:-				Signatu	re of s	tudent:-		

Checked by

Checked by



Form No. 36

Slip No.MU - 1920

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	f student:- POTDAR MAYUR RAJKUMAR						
	2. Class & Branch: - Third Year B. Tech Mechanical Engineering							
	3. Exam Se	eat No:2017BTEME00064 4. Address				photograph		
		Phone No./Mobile No.:				X		
	5. Details	of the courses for which I wish to appear for	the ex	amination:				
		Courses	of sem	ester				
		Semester I			Semester II			
Sr.		Course Name	Sr.	Code	Course Na	me		
1	3ME303	Theory of Machines II	1					
2			2					
3			3					
4			4					
5			5					
6			6					
7			7					
8			8					
9			9					
10			10					
		Exam Fee:- 1 X ` 300	/-		Tota	al Amount :- ` 300/-		
	(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			
		· · · · · · · · · · · · · · · · · · ·						
	RE	CEIPT (ACCOUNTS COPY)		RECEIPT (STUDENT COPY)				
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	<u> v</u>	WALCHAND COLLEGE OF ENGINEERING, SANGLI				
		(An Autonomous Institute)		(An Autonomous Institute)				
Pag	y Slip No.	:- MU - 1920	Pa	Pay Slip No. :- MU - 1920				
Ma	ıkeup Exan	nination June/July 2019	Ma	akeup Exai	mination June/July 2019			
Na	me:- POTD	AR MAYUR RAJKUMAR	Na	me:- POTE	OAR MAYUR RAJKUMAR			
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	Cla	ass & Branc	ch:- Third Year B.Tech Med	hanical		
Engineering			Eng	ineering				
Ex	am Seat No	:- 2017BTEME00064	Ex	Exam Seat No:- 2017BTEME00064				
Ex	am. Fee Rs	Amount. : 300/-	Ex	Exam. Fee Rs Amount. : 300/-				
In	Words:- ` T	hree Hundred Only	In	In Words:- ` Three Hundred Only				
Date:-			Da	Date:-				

Signature of student:-

Cashier

Checked by

Cashier

Signature of student:-



Form No. 36

Cashier

Slip No.MU - 2045

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 o	f student:- VEDANTHI NAGARJUNA JOSH	I						
	2. Class & Branch: - Third Year B.Tech Mechanical Engineering								
	3. Exam Seat No:2017BTEME00066 4. Address								
		Phone No./Mobile No.:				X			
					•				
_	5. Details	of the courses for which I wish to appear for							
		Course	s of sen	iester					
		Semester I		1	Semester II				
Sr.		Course Name	Sr.	Code	Course Na	me			
1	3ME301	Machine Design I	1						
2	3ME303	Theory of Machines II	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) /-		Tota	al Amount :- ` 900/-			
	and credit	, Please accept the application form along w to: Examination fee(EXAM CELL) A/C	ith amou	unt of (Nine	e Hundred Only)				
Rec	eipt of Exa	m cell:							
		Checked by		Cashier	Date				
	RI	ECEIPT (ACCOUNTS COPY)			RECEIPT (STUDENT CO	PPY)			
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI					
		(An Autonomous Institute)			(An Autonomous Institut	e)			
Pay	y Slip No.	:- MU - 2045	Pa	y Slip No.	:- MU - 2045				
Ma	ıkeup Exar	nination June/July 2019	M	akeup Exa	mination June/July 2019				
Na	me:- VEDA	NTHI NAGARJUNA JOSHI	N	ame:- VED	ANTHI NAGARJUNA JOSI	I I			
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	Cl	ass & Bran	ch:- Third Year B. Tech Med	chanical			
Engi	ineering		Eng	ineering					
Exa	am Seat No	:- 2017BTEME00066	Ex	am Seat N	o:- 2017BTEME00066				
Exa	am. Fee Rs	Amount.: 900/-	Ex	Exam. Fee Rs Amount.: 900/-					
In	Words:- ` N	Nine Hundred Only	In	In Words:- ` Nine Hundred Only					
Da	te:-		Da	ate:-	·				
Sig	nature of s	tudent:-	Si	gnature of	student:-				

Checked by

Checked by



Form No. 36

Slip No.MU - 2046

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	f student:- OMKAR SURESH DEVKAR							
	2. Class &	Branch: - Third Year B. Tech Mechanical Er	gineerir	ıg		Affix recent			
		eat No:2017BTEME00067 4. Address	•	•		photograph			
		Phone No./Mobile No.:				X			
	Lilian	Hone two./widone two			•				
	5. Details	of the courses for which I wish to appear fo	r the exa	amination:					
		Courses	of sem	ester					
		Semester I			Semester II				
Sr.	Code	Course Name	Sr.	Code	Course Na	me			
1	3ME303	Theory of Machines II	1						
2	4ME203	Strength of Materials	2						
3			3						
4			4						
5			5						
6			6						
7			7						
8			8						
9			9						
10			10						
<u>, </u>		Exam Fee:- 2 X ` 300	/-		Tota	l Amount :- ` 600 /-			
	(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				
	RE	CEIPT (ACCOUNTS COPY)		RECEIPT (STUDENT COPY)					
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	V	WALCHAND COLLEGE OF ENGINEERING, SANGLI					
		(An Autonomous Institute)			(An Autonomous Institute	e)			
Pay	y Slip No.	:- MU - 2046	Pa	Pay Slip No. :- MU - 2046					
Ma	keup Exan	nination June/July 2019	Ma	akeup Exa	mination June/July 2019				
Na	me:- OMKA	AR SURESH DEVKAR	Na	me:- OMK	AR SURESH DEVKAR				
Cla	ss & Branc	h:- Third Year B.Tech Mechanical	Cla	ass & Branc	ch:- Third Year B.Tech Med	hanical			
Engineering			Eng	ineering					
Exa	am Seat No	:- 2017BTEME00067	Ex	am Seat No	o:- 2017BTEME00067				
Exa	am. Fee Rs	Amount. : 600 /-	Ex	Exam. Fee Rs Amount.: 600/-					
In	Words:- ` S	ix Hundred Only	In	In Words:- ` Six Hundred Only					
Da	te:-		Da	te:-					
Sig	nature of st	udent:-	Sig	gnature of s	tudent:-				

Checked by

Cashier

Cashier



Form No. 36

Slip No.MU - 2047

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 o	f student:- PRANALI SUDHAKAR AVHAD						
	2. Class &	Branch: - Third Year B. Tech Mechanical En	gineerin	g		Affix recent		
	3. Exam Seat No:2018BTEME00201 4. Address							
		Phone No./Mobile No.:				X		
_	5. Details	of the courses for which I wish to appear for						
		Courses	of sem	ester				
		Semester I			Semester II			
Sr.		Course Name	Sr.	Code	Course Na	me		
1	3ME301	Machine Design I	1					
2	3ME303	Theory of Machines II	2					
3			3					
4			4					
5			5					
6			6					
7			7					
8			8					
9			9					
10			10					
		Exam Fee:- 2 X ` 300	/-		Tota	l Amount :- ` 600 /-		
(Si		f student) Date: , Please accept the application form along wit to: Examination fee(EXAM CELL) A/C	h amou	nt of (Six I	Hundred Only)			
Rec	eipt of Exa	nm cell:						
		Checked by		Cashier	Date			
		ECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)					
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	W	WALCHAND COLLEGE OF ENGINEERING, SANGLI				
		(An Autonomous Institute)		(An Autonomous Institute)				
_	y Slip No.	:- MU - 2047	Pag	Pay Slip No. :- MU - 2047				
		mination June/July 2019			mination June/July 2019			
Na	me:- PRAN	IALI SUDHAKAR AVHAD	Na	me:- PRAN	VALI SUDHAKAR AVHAD			
		ch:- Third Year B.Tech Mechanical	I I		ch:- Third Year B.Tech Med	chanical		
	ineering		·	ineering				
		o:- 2018BTEME00201	l —		o:- 2018BTEME00201			
		Amount. : 600 /-	-		Amount. : 600 /-			
		Six Hundred Only	_	In Words:- ` Six Hundred Only				
	te:-		· -	Date:-				
Sig	gnature of s	tudent:-	Sig	nature of s	student:-			

Checked by

Cashier

Cashier



Form No. 36

Cashier

Slip No.MU - 2048

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	f student:- SMITA CHANDRABHAN KALE							
	2. Class & Branch: - Third Year B.Tech Mechanical Engineering								
	3. Exam Seat No:2018BTEME00202 4. Address								
		Phone No./Mobile No				X			
					•				
_	5. Details	of the courses for which I wish to appear for							
		Courses	of sem	iester	C 4 II				
		Semester I			Semester II				
Sr.		Course Name	Sr.	Code	Course Na	ime			
	3ME303	Theory of Machines II							
3			2		<u> </u>				
4			3 4		<u> </u>				
5			5		<u> </u>				
6		-	$\frac{3}{6}$						
7			7						
8			8		1				
9			9		1				
10		+	10						
		Exam Fee:- 1 X ` 300			Tota	al Amount :- ` 300 /-			
(Si		student) Date: , Please accept the application form along witto: Examination fee(EXAM CELL) A/C	(* Late th amou		+ Exam Fee /-) ee Hundred Only)				
Rec	eipt of Exa	nm cell:							
	1	Checked by		Cashier	Date				
	RF	ECEIPT (ACCOUNTS COPY)	П	RECEIPT (STUDENT COPY)					
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI					
		(An Autonomous Institute)		(An Autonomous Institute)					
Pa	y Slip No.	:- MU - 2048	Pa	y Slip No.	:- MU - 2048				
Ma	akeup Exar	nination June/July 2019	Ma	akeup Exa	mination June/July 2019				
Na	me:- SMIT.	A CHANDRABHAN KALE	Na	me:- SMIT	ΓA CHANDRABHAN KALE				
Cla	ıss & Branc	h:- Third Year B.Tech Mechanical	Cla	ass & Bran	ch:- Third Year B.Tech Med	chanical			
	ineering			ineering					
		:- 2018BTEME00202	-		o:- 2018BTEME00202				
		Amount. : 300/-	-		s Amount. : 300/-				
In	Words:- ` T	Three Hundred Only	In	In Words:- ` Three Hundred Only					
_	te:-		-	ite:-					
Signature of student:-				Signature of student:-					

Checked by

Checked by



Form No. 36

Slip No.MU - 2049

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	f student:- MANISH SUNIL BADGUJAR							
	2. Class &	Branch: - Third Year B. Tech Mechanical	Enginee	ering	3		Affix recent		
							photograph		
		Phone No./Mobile No.:					X		
	5 D.4.1.	. C. d	C						
	5. Details	of the courses for which I wish to appear							
			es of s	eme	ester	C II			
	C 1	Semester I			G 1	Semester II			
Sr.		Course Name		r.	Code	Course Na	me		
1	3ME303	Theory of Machines II		_					
2 3			$\frac{2}{3}$	-					
4			3	_					
5				_		<u> </u>			
6			$\frac{3}{6}$	_		<u> </u>			
7			$ \frac{0}{7}$	_		<u> </u>			
8				\dashv					
9			9	\dashv					
10			10	+					
10		Exam Fee:- 1 X ` 3		<i>,</i>		Т-4-	1 4		
		Exam ree:- 1 A 3					al Amount :- ` 300/-		
(Si	gnature of	student) Date:	(* La	ate F	ee /-	+ Exam Fee /-)			
(5)	_	•	*/1		. C.(TEI	п 1 10 1)			
		, Please accept the application form along to: Examination fee(EXAM CELL) A/C	wiin am	ioun	n or (Thre	e Hundred Omy)			
Rec	eipt of Exa	m cell:							
	•	Checked by			Cashier	Date			
		Checked by			Casinei				
	RE	CCEIPT (ACCOUNTS COPY)		RECEIPT (STUDENT COPY)					
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI		WALCHAND COLLEGE OF ENGINEERING, SANGLI					
		(An Autonomous Institute)		(An Autonomous Institute)					
Pay	y Slip No.	:- MU - 2049		Pay Slip No. :- MU - 2049					
Ma	ıkeup Exar	nination June/July 2019		Makeup Examination June/July 2019					
Na	me:- MANI	SH SUNIL BADGUJAR		Nar	ne:- MAN	ISH SUNIL BADGUJAR			
Class & Branch:- Third Year B.Tech Mechanical				Clas	ss & Branc	ch:- Third Year B.Tech Med	hanical		
	Engineering				neering				
_		:- 2018BTEME00205		Exam Seat No:- 2018BTEME00205					
		Amount. : 300/-	_ L	Exam. Fee Rs Amount. : 300/-					
In	Words:- ` T	Three Hundred Only	_	In V	Words:- `	Three Hundred Only			
Da	te:-		٦Γ	Dat	e:-				

Signature of student:-

Cashier

Checked by

Cashier

Signature of student:-



Form No. 36

Cashier

Slip No.MU - 2050

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:- KAIVALYA KEDARNATH JOSHI					
	2. Class &	Branch: - Third Year B.Tech Mechanical Eng	ineeri	ng		Affix recent	
		eat No:2018BTEME00208 4. Address	,	C		photograph	
		Phone No./Mobile No.:				X	
	5 D-4-il-	- 6 4h	41				
	5. Details (of the courses for which I wish to appear for					
		Courses (or ser	nester	Semester II		
C	C. J.	Course Name	C	C-J-	Course Na		
Sr. 1	Code 3ME301	Machine Design I	Sr.	Code 3ME322	Internal Combustion Engin		
2	3ME302	Heat Transfer	2	SIVIESZZ	Internal Combustion Engin	.cs	
3	3ME302	Theory of Machines II	$\frac{2}{3}$				
4	4ME201	Applied Mathematics for Mechanical Engin	4				
5	4ME203	Strength of Materials	5				
6	HIVIL 203	Strength of Waterials	$\frac{3}{6}$				
7			7				
8			8				
9			9				
10			10		<u> </u>		
10		Exam Fee:- 6 X ` 300 /	4		Total	Amount :- ` 1800 /-	
Ì	(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						
	RE	CEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)				
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI				
		(An Autonomous Institute)			(An Autonomous Institute	e)	
Pay	y Slip No.	:- MU - 2050	Pay Slip No. :- MU - 2050				
Ma	keup Exan	nination June/July 2019	LN.	lakeup Exa	mination June/July 2019		
Na	me:- KAIVA	ALYA KEDARNATH JOSHI	N	ame:- KAIV	ALYA KEDARNATH JOSH	I	
	ss & Branc neering	h:- Third Year B.Tech Mechanical		lass & Bran gineering	ch:- Third Year B.Tech Med	hanical	
		:- 2018BTEME00208	_		o:- 2018RTEME00208		
		Amount.: 1800/-	Exam Seat No:- 2018BTEME00208 Exam. Fee Rs Amount.: 1800/-				
		One Thousand Eight Hundred Only					
	te:-	Thousand Light Handred Only		In Words:- ` One Thousand Eight Hundred Only Date:-			
	nature of st	udent:-		Signature of student:-			

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Form No. 36

Slip No.MU - 2051

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	f student:- KUNAL JAYWANTRAO ARKE						
	2. Class &	Branch: - Third Year B. Tech Mechanical Eng	gineerin	ıg		Affix recent		
		eat No:2018BTEME00210 4. Address		•		photograph		
		Phone No./Mobile No.:				X		
	Lilian	Hone 140./14100he 140		• • • • • • • • • • • • • • • • • • • •				
	5. Details	of the courses for which I wish to appear for	the exa	amination:				
		Courses	of sem	ester				
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
1	3ME301	Machine Design I	1					
2	3ME302	Heat Transfer	2					
3	3ME303	Theory of Machines II	3					
4	3ME304	Metrology and Quality Control	4					
5	4ME201	Applied Mathematics for Mechanical Engin	5					
6	4ME203	Strength of Materials	6					
7			7					
8			8					
9			9					
10			10					
		Exam Fee:- 6 X ` 300	<u>'-</u>		Total	Amount :- ` 1800/-		
	(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			
		Checked by			Duc			
	RE	CCEIPT (ACCOUNTS COPY)	\top]	RECEIPT (STUDENT CO	PY)		
W	ALCHAND	COLLEGE OF ENGINEERING, SANGLI	WALCHAND COLLEGE OF ENGINEERING, SANGLI					
		(An Autonomous Institute)			(An Autonomous Institute	e)		
Pay	y Slip No.	:- MU - 2051	Pa	y Slip No.	:- MU - 2051			
Ma	keup Exan	nination June/July 2019	Ma	ıkeup Exa	mination June/July 2019			
Na	me:- KUNA	L JAYWANTRAO ARKE	Na	me:- KUNA	AL JAYWANTRAO ARKE			
Cla	Class & Branch:- Third Year B.Tech Mechanical			ıss & Branc	ch:- Third Year B.Tech Med	hanical		
	neering			ineering				
	Exam Seat No:- 2018BTEME00210			Exam Seat No:- 2018BTEME00210				
		Amount.: 1800/-	Exam. Fee Rs Amount.: 1800/-					
In	Words:- ` C	One Thousand Eight Hundred Only	In Words:- `One Thousand Eight Hundred Only					
Da			_	te:-				
Signature of student:								

Checked by

Cashier

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