



Slip No.MU - 1975

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.

- Name of student:- MRUNAL SAHEBRAO GUTTE
- Class & Branch : - Final Year B.Tech Electronics Engineering
- Exam Seat No:2015BEN013 4. Address \_\_\_\_\_
- Email :.....Phone No./Mobile No.:.....
- 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	2EN401	Real Time Operating System	1		
2	2EN402	Computer Network and Protocols	2		
3	2EN413	Professional Elective-IV : Microwave Com	3		
4	1OE443	Open Elective III: Industrial Automation	4		
5	2EN451	Real Time Operating System Lab	5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 5 X ` 300 /-</b>			<b>Total Amount :- ` 1500/-</b>		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by \_\_\_\_\_ Cashier \_\_\_\_\_ Date \_\_\_\_\_

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1975	Pay Slip No. :- MU - 1975
<b>Makeup Examination June/July 2019</b>	<b>Makeup Examination June/July 2019</b>
Name:- MRUNAL SAHEBRAO GUTTE	Name:- MRUNAL SAHEBRAO GUTTE
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2015BEN013	Exam Seat No:- 2015BEN013
Exam. Fee Rs Amount. : 1500/-	Exam. Fee Rs Amount. : 1500/-
In Words:- ` One Thousand Five Hundred Only	In Words:- ` One Thousand Five Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by _____ Cashier _____	Checked by _____ Cashier _____

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



Slip No.MU - 1976

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.

- Name of student:- MOHIT MANIKRAO KARPATE
- Class & Branch : - Final Year B.Tech Electronics Engineering
- Exam Seat No:2015BEN036 4. Address \_\_\_\_\_
- Email :.....Phone No./Mobile No.:.....
- 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	2EN401	Real Time Operating System	1		
2	2EN402	Computer Network and Protocols	2		
3	2EN413	Professional Elective-IV : Microwave Com	3		
4	2EN415	Professional Elective-V : Mobile Communi	4		
5	1OE443	Open Elective III: Industrial Automation	5		
6	2EN451	Real Time Operating System Lab	6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 6 X ` 300 /-</b>			<b>Total Amount :- ` 1800/-</b>		

(\* 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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1976	Pay Slip No. :- MU - 1976
<b>Makeup Examination June/July 2019</b>	<b>Makeup Examination June/July 2019</b>
Name:- MOHIT MANIKRAO KARPATE	Name:- MOHIT MANIKRAO KARPATE
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2015BEN036	Exam Seat No:- 2015BEN036
Exam. Fee Rs Amount. : <b>1800/-</b>	Exam. Fee Rs Amount. : <b>1800/-</b>
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**



Slip No.MU - 1977

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:- RANAJIT RAJARAM VADAR
2. Class & Branch : - Final Year B.Tech Electronics Engineering
3. Exam Seat No:2015BEN215 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	2EN402	Computer Network and Protocols	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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1977	Pay Slip No. :- MU - 1977
<b>Makeup Examination June/July 2019</b>	<b>Makeup Examination June/July 2019</b>
Name:- RANAJIT RAJARAM VADAR	Name:- RANAJIT RAJARAM VADAR
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2015BEN215	Exam Seat No:- 2015BEN215
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by _____ Cashier _____	Checked by _____ Cashier _____

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



Slip No.MU - 1978

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:- PALLAVI SANJAY SHIROLKAR
2. Class & Branch : - Final Year B.Tech Electronics Engineering
3. Exam Seat No:2016BTEEN00010 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	2EN401	Real Time Operating System	1		
2	2EN402	Computer Network and Protocols	2		
3	2EN413	Professional Elective-IV : Microwave Com	3		
4			4		
5			5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 3 X ` 300 /-</b>			<b>Total Amount :- ` 900/-</b>		

(\* 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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1978	Pay Slip No. :- MU - 1978
<b>Makeup Examination June/July 2019</b>	<b>Makeup Examination June/July 2019</b>
Name:- PALLAVI SANJAY SHIROLKAR	Name:- PALLAVI SANJAY SHIROLKAR
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2016BTEEN00010	Exam Seat No:- 2016BTEEN00010
Exam. Fee Rs Amount. : 900/-	Exam. Fee Rs Amount. : 900/-
In Words:- ` Nine Hundred Only	In Words:- ` Nine Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by Cashier	Checked by Cashier

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



Slip No.MU - 1979

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.

- Name of student:- ABHAY SIDHARTH MOON
- Class & Branch : - Final Year B.Tech Electronics Engineering
- Exam Seat No:2016BTEEN00029 4. Address \_\_\_\_\_
- Email : ..... Phone No./Mobile No.: .....
- 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	2EN401	Real Time Operating System	1		
2	2EN402	Computer Network and Protocols	2		
3	2EN413	Professional Elective-IV : Microwave Com	3		
4	1OE443	Open Elective III: Industrial Automation	4		
5	2EN451	Real Time Operating System Lab	5		
6			6		
7			7		
8			8		
9			9		
10			10		
<b>Exam Fee:- 5 X ` 300 /-</b>			<b>Total Amount :- ` 1500/-</b>		

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

(Signature of student) Date:

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

Receipt of Exam cell:

Checked by \_\_\_\_\_ Cashier \_\_\_\_\_ Date \_\_\_\_\_

RECEIPT (ACCOUNTS COPY)	RECEIPT (STUDENT COPY)
WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1979	Pay Slip No. :- MU - 1979
<b>Makeup Examination June/July 2019</b>	<b>Makeup Examination June/July 2019</b>
Name:- ABHAY SIDHARTH MOON	Name:- ABHAY SIDHARTH MOON
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2016BTEEN00029	Exam Seat No:- 2016BTEEN00029
Exam. Fee Rs Amount. : 1500/-	Exam. Fee Rs Amount. : 1500/-
In Words:- ` One Thousand Five Hundred Only	In Words:- ` One Thousand Five Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by _____ Cashier _____	Checked by _____ Cashier _____

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



Slip No.MU - 1982

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.

- Name of student:- SHREYAS ANIL KOSHTI
- Class & Branch : - Final Year B.Tech Electronics Engineering
- Exam Seat No:2016BTEEN00031 4. Address \_\_\_\_\_
- Email :.....Phone No./Mobile No.:.....
- 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	2EN451	Real Time Operating System Lab	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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1982	Pay Slip No. :- MU - 1982
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- SHREYAS ANIL KOSHTI	Name:- SHREYAS ANIL KOSHTI
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2016BTEEN00031	Exam Seat No:- 2016BTEEN00031
Exam. Fee Rs Amount. : 300/-	Exam. Fee Rs Amount. : 300/-
In Words:- ` Three Hundred Only	In Words:- ` Three Hundred Only
Date:-	Date:-
Signature of student:-	Signature of student:-
Checked by _____ Cashier _____	Checked by _____ Cashier _____

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



Slip No.MU - 1980

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.

- Name of student:- VINAYAK VAIJANATH PARATKAR
- Class & Branch : - Final Year B.Tech Electronics Engineering
- Exam Seat No:2016BTEEN00048 4. Address \_\_\_\_\_
- Email :.....Phone No./Mobile No.:.....
- 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	2EN451	Real Time Operating System Lab	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 (An Autonomous Institute)	WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute)
Pay Slip No. :- MU - 1980	Pay Slip No. :- MU - 1980
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- VINAYAK VAIJANATH PARATKAR	Name:- VINAYAK VAIJANATH PARATKAR
Class & Branch:- Final Year B.Tech Electronics Engineering	Class & Branch:- Final Year B.Tech Electronics Engineering
Exam Seat No:- 2016BTEEN00048	Exam Seat No:- 2016BTEEN00048
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