

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:- 2014BIT009 ANAGHA AVINASH S				
	2. Class & Branch : - Final Year B.Tech Information Technology					Affix recent
	3. Exam Sea	at No:2014BIT009 4. Address				photograph
	Email :	Phone No./Mobile No.:				X
	5. Details o	f the courses for which I wish to appear for the	he exa	mination:		
		Courses of	f sem	ester		
		Semester I			Semester II	
Sr.	Code	Course Name	Sr.	Code	Course Na	me
1	3IT453	Data Mining 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 /-			Tota	l 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 - 1991	Pay Slip No. :- MU - 1991
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- 2014BIT009 ANAGHA AVINASH SHITOLE	Name:- 2014BIT009 ANAGHA AVINASH SHITOLE
Class & Branch:- Final Year B.Tech Information	Class & Branch:- Final Year B.Tech Information
Technology	Technology
Exam Seat No:- 2014BIT009	Exam Seat No:- 2014BIT009
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

Slip No.MU - 1991



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:- VRUSHABH SANJAY KELKAR Class & Branch : - Final Year B.Tech Information Technology Exam Seat No:2014BIT049 4. Address Email :Phone No./Mobile No.: Details of the courses for which I wish to appear for the examination: 						
		Courses of	of sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Na	me	
1	3IT402	Data Mining	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) :- MU - 1992 :- MU - 1992 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- VRUSHABH SANJAY KELKAR Name:- VRUSHABH SANJAY KELKAR Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2014BIT049 Exam Seat No:- 2014BIT049 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



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	 Name of student:- GURUSHANT PARSHURAM KOLATI Class & Branch : - Final Year B. Tech Information Technology Exam Seat No:2016BTEIT00004 4. Address Email :						
		Courses of	f sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Na	me	
l	3IC401	Engineering Management and Ethics	1				
2	3IT453	Data Mining Lab	2				
3			3				
1			4				
5			5				
5			6				
7			7				
3			8				
)			9				
0			10				
		Exam Fee:- 2 X ` 300 /-			Tota	ll 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

Date

RECEIPT (ACCOUNTS COPY) RECEIPT (STUDENT COPY) WALCHAND COLLEGE OF ENGINEERING, SANGLI WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute) (An Autonomous Institute) :- MU - 1993 :- MU - 1993 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- GURUSHANT PARSHURAM KOLATI Name:- GURUSHANT PARSHURAM KOLATI Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2016BTEIT00004 Exam Seat No:- 2016BTEIT00004 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

(* Late Fee

/- + Exam Fee

/-)

Cashier



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	 Name of student:- MAHENDRA UTTAM DHAWSE Class & Branch : - Final Year B.Tech Information Technology Exam Seat No:2016BTEIT00007 4. Address Email :					
		Courses of	f sem	ester		
		Semester I			Semester II	
Sr.	Code	Course Name	Sr.	Code	Course Na	me
1	3IT402	Data Mining	1			
2	3IT451	Open Source S/W Lab	2			
3			3			
4			4			
5			5			
5			6			
7			7			
8			8			
9			9			
10			10			
Exam Fee:- 2 X ` 300 /-					Tota	ll 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) :- MU - 1994 :- MU - 1994 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- MAHENDRA UTTAM DHAWSE Name:- MAHENDRA UTTAM DHAWSE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2016BTEIT00007 Exam Seat No:- 2016BTEIT00007 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



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:- NIKITA DADASAHEB KHARAT Class & Branch : - Final Year B. Tech Information Technology Exam Seat No:2016BTEIT00018 4. Address Email :						
		Courses o	f sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Na	me	
1	3IT452	Software Testing and Quality Analysis La	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 - 1995	Pay Slip No. :- MU - 1995
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- NIKITA DADASAHEB KHARAT	Name:- NIKITA DADASAHEB KHARAT
Class & Branch:- Final Year B.Tech Information	Class & Branch:- Final Year B. Tech Information
Technology	Technology
Exam Seat No:- 2016BTEIT00018	Exam Seat No:- 2016BTEIT00018
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



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 FFS grade for concerned course/s.

	1. Name of	student:- ANIKET MAHADEV SUDKE				
	2. Class & Branch : - Final Year B.Tech Information Technology					
	3. Exam Se	at No:2016BTEIT00031 4. Address				photograph
	Email :	Phone No./Mobile No.:				X
	5. Details o	of the courses for which I wish to appear for t	he exa	mination:		
		Courses o	f sem	ester		
		Semester I			Semester II	
Sr.	Code	Course Name	Sr.	Code	Course Na	me
1	3IT402	Data Mining	1			
	3IT453	Data Mining Lab	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/-

(* Late Fee /- + Exam Fee

ee /-)

(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) :- MU - 1996 :- MU - 1996 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- ANIKET MAHADEV SUDKE Name:- ANIKET MAHADEV SUDKE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2016BTEIT00031 Exam Seat No:- 2016BTEIT00031 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



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	1. Name of student:- SUNIL VITTHAL MISAL						
	2. Class & Branch : - Final Year B.Tech Information Technology						
	3. Exam Se	at No:2016BTEIT00033 4. Address				photograph	
	Email :	Phone No./Mobile No.:				X	
	5. Details o	of the courses for which I wish to appear for t	he exa	amination:			
		Courses o	f sem	ester			
		Semester I			Semester II		
Sr.	Code	Course Name	Sr.	Code	Course Na	me	
1	3IT402	Data Mining	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	l 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 (A	CCOUNTS COPY)		RECEIPT	(STUDENT COPY)
WALCHAND COLLEGE	OF ENGINEERING, SANGLI	1	WALCHAND COLLEC	GE OF ENGINEERING, SANGLI
(An Autono	omous Institute)		(An Aut	onomous Institute)
Pay Slip No. :- MU - 19	97		Pay Slip No. :- MU -	1997
Makeup Examination Ju	ne/July 2019		Makeup Examination	June/July 2019
Name:- SUNIL VITTHAL	MISAL		Name:- SUNIL VITTHA	AL MISAL
Class & Branch:- Final Yea	ar B.Tech Information		Class & Branch:- Final Y	Year B.Tech Information
Technology			Technology	
Exam Seat No:- 2016BTEI	T00033		Exam Seat No:- 2016BT	TEIT00033
Exam. Fee Rs Amount. : 3	00/-		Exam. Fee Rs Amount.	: 300/-
In Words:- ` Three Hundre	ed Only		In Words:- ` Three Hund	dred Only
Date:-			Date:-	
Signature of student:-			Signature of student:-	
Checked by	Cashier		Checked by	Cashier



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2. Class & Branch : - Final Year B. Tech Information Technology						Affix recent
	3. Exam Se	at No:2016BTEIT00054 4. Address				photograph
	Email :	Phone No./Mobile No.:				X
	5. Details	of the courses for which I wish to appear for	the exa	mination:		
		Courses	of sem	ester		
		Semester I			Semester II	
Sr.	Code	Course Name	Sr.	Code	Course Na	me
1	3IT402	Data Mining	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	l Amount :- ` 300/-

(* Late Fee /- + Exam Fee

'ee /-)

(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) :- MU - 1998 :- MU - 1998 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- ADITYA PRAMOD BONDE Name:- ADITYA PRAMOD BONDE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2016BTEIT00054 Exam Seat No:- 2016BTEIT00054 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

збу



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 FFS grade for concerned course/s.

	1. Name of student:- SAUMITRA SUSHIL DUBE							
	2. Class & Branch : - Final Year B.Tech Information Technology							
	3. Exam Se	eat No:2016BTEIT00057 4. Address				photograph		
	Email :	Phone No./Mobile No.:				X		
	5. Details	of the courses for which I wish to appear for	the exa	mination:				
		Courses	of sem	ester				
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
	3IT452	Software Testing and Quality Analysis La	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	ll Amount :- ` 300/-		

(* Late Fee /- + Exam Fee

ee /-)

(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) :- MU - 1999 :- MU - 1999 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- SAUMITRA SUSHIL DUBE Name:- SAUMITRA SUSHIL DUBE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2016BTEIT00057 Exam Seat No:- 2016BTEIT00057 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



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	1. Name of student:- RUTUJA VASUDEV SHINDE							
	2. Class & Branch : - Final Year B.Tech Information Technology							
	3. Exam Se	at No:2016BTEIT00069 4. Address				photograph		
	Email :	Phone No./Mobile No.:				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 Na	me		
1	3IT452	Software Testing and Quality Analysis La	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	l 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 - 2000	Pay Slip No. :- MU - 2000
Makeup Examination June/July 2019	Makeup Examination June/July 2019
Name:- RUTUJA VASUDEV SHINDE	Name:- RUTUJA VASUDEV SHINDE
Class & Branch:- Final Year B. Tech Information	Class & Branch:- Final Year B. Tech Information
Technology	Technology
Exam Seat No:- 2016BTEIT00069	Exam Seat No:- 2016BTEIT00069
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



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Second	1. Name of student:- MADANE UMA ASHOK									
Email :Phone No./Mobile No.: 5. Details of the courses for which I wish to appear for the examination: Courses of semester Semester I Semester I Semester I Semester I Semester I Semester I Semester I Semester I Semester I Semester II Semester		2. Class & Branch : - Final Year B. Tech Information Technology								
Email :Phone No./Mobile No.: 5. Details of the courses for which I wish to appear for the examination: Courses of semester Semester I Semester I Semester I Semester II Semester II Semester II Semester II 2 3IT401 Cryptography and Network Security 1 2 3IT415 Professional Elective-IV Software Define 3		3. Exam Se	at No:2016BTEIT00209 4. Address							
Courses of semester Semester I Semester I Semester II Sr. Code Course Name Sr. Code Course Name 1 3IT401 Cryptography and Network Security 1 Image: Course Name So Course Name Course Name Course Name So So So		Email :	Phone No./Mobile No.:				X			
Semester ISemester IISr.CodeCourse NameSr.CodeCourse Name13IT401Cryptography and Network Security123IT402Data Mining2233IT415Professional Elective-IV Software Define343IT451Open Source S/W Lab453IT452Software Testing and Quality Analysis La563IT453Data Mining Lab67 </td <td></td> <td colspan="9"></td>										
Sr.CodeCourse NameSr.CodeCourse Name13IT401Cryptography and Network Security11123IT402Data Mining22133IT415Professional Elective-IV Software Define31143IT451Open Source S/W Lab41153IT452Software Testing and Quality Analysis La51163IT453Data Mining Lab61117111111181111011110101011111		Courses of semester								
13IT 401Cryptography and Network Security1I23IT 402Data Mining2233IT 415Professional Elective-IV Software Define3343IT 451Open Source S/W Lab4453IT 452Software Testing and Quality Analysis La5563IT 453Data Mining Lab667788910			Semester I			Semester II				
23IT402Data Mining233IT415Professional Elective-IV Software Define343IT451Open Source S/W Lab453IT452Software Testing and Quality Analysis La563IT453Data Mining Lab67788991010	Sr.	Code	Course Name	Sr.	Code	Course Na	me			
33IT415Professional Elective-IV Software Define343IT451Open Source S/W Lab453IT452Software Testing and Quality Analysis La563IT453Data Mining Lab677889910	1	3IT401	Cryptography and Network Security	1						
43IT451Open Source S/W Lab453IT452Software Testing and Quality Analysis La563IT453Data Mining Lab67789910	2	3IT402	Data Mining	2						
53IT452Software Testing and Quality Analysis La5Image: Software Testing and Quality Analysis La63IT453Data Mining Lab6Image: Software Testing and Quality Analysis La7Image: Software Testing and Quality Analysis La6Image: Software Testing and Quality Analysis La7Image: Software Testing and Quality Analysis La6Image: Software Testing and Quality Analysis La7Image: Software Testing and Quality Analysis La6Image: Software Testing and Quality Analysis La7Image: Software Testing and Quality Analysis La6Image: Software Testing analysis La7Image: Software Testing and Quality Analysis La7Image: Software Testing analysis La8Image: Software Testing analysis La8Image: Software Testing analysis La9Image: Software Testing analysis La10Image: Software Testing analysis La10Image: Software Testing and Quality Analysis La10Image: Software Testing analysis La	3	3IT415	Professional Elective-IV Software Define	3						
6 3IT453 Data Mining Lab 6 6 7 0 7 0 8 0 8 0 9 0 9 0 10 0 0 0	4	3IT451	Open Source S/W Lab	4						
7 0 7 7 8 0 8 0 9 0 9 0 10 0 0 0	5	3IT452	Software Testing and Quality Analysis La	5						
N N	6	3IT453	Data Mining Lab	6						
9 9 9 10 0 10 0	7			7						
10 10 10 10 10 10 10 10 10 10 10 10 10 1	8			8						
	9			9						
	10			10						
Exam Fee:- 6 X ` 300 /- Total Amount :- ` 1800/-			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

Date

RECEIPT (ACCOUNTS COPY) RECEIPT (STUDENT COPY) WALCHAND COLLEGE OF ENGINEERING, SANGLI WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute) (An Autonomous Institute) :- MU - 2001 :- MU - 2001 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- MADANE UMA ASHOK Name:- MADANE UMA ASHOK Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2016BTEIT00209 Exam Seat No:- 2016BTEIT00209 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

Cashier



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	 Name of student:- POONAM DEVENDRA TODKARI Class & Branch : - Final Year B.Tech Information Technology Exam Seat No:2017BTEIT00201 4. Address Email :							
	Courses of semester							
Semester I Semester II								
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
1	3IT402	Data Mining	1					
2	3IT415	Professional Elective-IV Software Define	2					
3			3					
4			4					
5			5					
5			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:

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Date

RECEIPT (A	CCOUNTS COPY)		RECEIPT	(STUDENT COPY)		
WALCHAND COLLEGE	OF ENGINEERING, SANGLI		WALCHAND COLLE	GE OF ENGINEERING, SANGLI		
(An Autono	omous Institute)		(An Au	tonomous Institute)		
Pay Slip No. :- MU - 20	02		Pay Slip No. :- MU -	- 2002		
Makeup Examination Ju	ne/July 2019		Makeup Examination June/July 2019			
Name:- POONAM DEVEN	DRA TODKARI		Name:- POONAM DEV	VENDRA TODKARI		
Class & Branch:- Final Yea	r B.Tech Information		Class & Branch:- Final	Year B.Tech Information		
Technology			Technology			
Exam Seat No:- 2017BTEI	T00201		Exam Seat No:- 2017BTEIT00201			
Exam. Fee Rs Amount. : 6	00/-		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		



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:- AISHWARYA RAJVILAS KENDRE Class & Branch : - Final Year B. Tech Information Technology Exam Seat No:2017BTEIT00202 4. Address Email :							
	Courses of semester							
		Semester I	Semester II					
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
l	3IT401	Cryptography and Network Security	1					
2	3IT402	Data Mining	2					
3	3IT414	Professional Elective-IV Digital Image P	3					
1	3IT303	Operating System	4					
5	3IT451	Open Source S/W Lab	5					
5	3IT452	Software Testing and Quality Analysis La	6					
7	3IT453	Data Mining Lab	7					
3			8					
)			9					
0			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) :- MU - 2003 :- MU - 2003 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- AISHWARYA RAJVILAS KENDRE Name:- AISHWARYA RAJVILAS KENDRE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2017BTEIT00202 Exam Seat No:- 2017BTEIT00202 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



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 FFS grade for concerned course/s.

	1. Name of	student:- SUMIT BHIMRAO LOHAR						
	2. Class & Branch : - Final Year B. Tech Information Technology							
	3. Exam Se	eat No:2017BTEIT00207 4. Address				photograph		
	Email :	Phone No./Mobile No.:				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 Na	me		
	3IT453	Data Mining 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

Tee /-)

(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) :- MU - 2004 :- MU - 2004 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- SUMIT BHIMRAO LOHAR Name:- SUMIT BHIMRAO LOHAR Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2017BTEIT00207 Exam Seat No:- 2017BTEIT00207 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

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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:- SHRUTI VIJAYKUMAR ASHTEKAR Class & Branch : - Final Year B. Tech Information Technology Exam Seat No:2017BTEIT00208 4. Address Email :							
	Courses of semester							
		Semester I			Semester II			
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
1	3IT402	Data Mining	1					
2			2					
3			3					
4			4					
5			5					
5			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) :- MU - 2005 :- MU - 2005 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- SHRUTI VIJAYKUMAR ASHTEKAR Name:- SHRUTI VIJAYKUMAR ASHTEKAR Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2017BTEIT00208 Exam Seat No:- 2017BTEIT00208 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



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	1. Name of	f student:- JYOTI BABASAHEB SHELKE						
	2. Class & Branch : - Final Year B. Tech Information Technology							
	3. Exam Se	eat No:2017BTEIT00209 4. Address				photograph		
	Email :	Phone No./Mobile No.:				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 Na	me		
1	3IT451	Open Source S/W 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 WALCHAND COLLEGE OF ENGINEERING, SANGLI (An Autonomous Institute) (An Autonomous Institute) :- MU - 2006 :- MU - 2006 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- JYOTI BABASAHEB SHELKE Name:- JYOTI BABASAHEB SHELKE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2017BTEIT00209 Exam Seat No:- 2017BTEIT00209 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



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 FFS grade for concerned course/s.

	 Name of student:- DARSHAN RAVINDRA MAGARE Class & Branch : - Final Year B.Tech Information Technology Exam Seat No:2017BTEIT00212 4. Address Email :							
	Courses of semester							
Semester I Semester II								
Sr.	Code	Course Name	Sr.	Code	Course Na	me		
1	3IT402	Data Mining	1					
2	3IT453	Data Mining Lab	2					
3			3					
4			4					
5			5					
5			6					
7			7					
8			8					
9			9					
10			10					
	Exam Fee:- 2 X ` 300 /- Total Amount :- ` 600/-							

(* Late Fee /- + Exam Fee

e /-)

(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) :- MU - 2007 :- MU - 2007 Pay Slip No. Pay Slip No. Makeup Examination June/July 2019 Makeup Examination June/July 2019 Name:- DARSHAN RAVINDRA MAGARE Name:- DARSHAN RAVINDRA MAGARE Class & Branch:- Final Year B.Tech Information Class & Branch:- Final Year B.Tech Information **Fechnology Fechnology** Exam Seat No:- 2017BTEIT00212 Exam Seat No:- 2017BTEIT00212 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

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