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				Application Form	for Examination of Sum	nmer Sessio	n 2020 event.						
			B.Com. (A	and F.)(with Credit	ts)-Regular-Rev16-T.Y.	B.Com. (A. a	and F.)-Sem VI [2C0	0456]					
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Student	t's Name	SIKOT	ARA PARTH	MUKESHKUMAR			Mother's Name: P	ARUL	C	Gender: Male			
Name ir	n Verna	cular Langua	ane मिकोत्रा पा	र्थ मकेशकमार				_					
	vame in Vernacular Language:सिकोत्रा पार्थ मुकेशकुमार Address: M-102 VARDHMAN NAGAR DR RP ROAD MULUND(W) MUMBAI-80												
,	City: MULUND, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080 Telephone no.: Mobile no: 918286144828 Email : PARTHSIKOTRA33@GMAIL.COM												
	DOB: Aug 17, 1996 Category: Open Physically Handicap: No												
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5		607		aper III (Indian Eco	nomy)				h-UA [] ;Th-				
6		FSVI.8	Project Work						w-UA [] ;Pw				
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	S.	То ехріо	•	S. K. Somaiy Application For A.and F.)(with Cre	niversity of Mumba http://mum.digitaluniver ya College of Arts, Scien rm for Examination of Su edits)-Regular-Rev16-T.Y Competitive Exams, Career Fairs	<u>rsity.ac/</u> nce and Comm ummer Session 7. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem V	'l [2C00456] 'e-Suvidha' acco	bunt on	
				http://mum.digitalur	Competitive Exams, Career Fairs niversity.ac/. Activate your 'e-Su		d login today!		u	
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Instruct	tion Med	lium:					Nationality:	India		
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	t's Name		A KASHVI RA				Mother's Nar	ne: DIPTI		Gender: Female
Name in Vernacular Language:देढिया काश्वी रमणिक										
Address: A/202, NEW JALARAM KRUPA NEHRU ROAD DOMBIVLI EAST										
City: DC	OMBIVL	.I , Taluka: K	alyan, District		Naharashtra, PIN: 421201	1				
	Telephone no.: Mobile no: 919930311993 Email : ROCKZZKASHVI@GMAIL.COM									
	Apr 11, 2			tegory: Open			Handicap: No	1		
				m IV(Regular-Rev	/16)	Exam Even	t: Apr-2019		Seat No: 05	506894 (Status: Pass)
Exam form appearance type: Fresher										
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	To explo	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today!											
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Instruction I	Medium:					Nationality:	India						
				Student's Perse	onal Informati	on							
Student's N	lame: SHAH	MIHIKA PAR	AG			Mother's Name: Bl	NA	0	Gender: Female				
Name in Ve	ernacular Langua	age:MIHIKA											
Address: J/	Address: J/203, LOK DARSHAN SOCIETY, MAROL, MILITARY ROAD, ANDHERI EAST												
City: MUME	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400059												
Telephone	Telephone no.: 29202372 Mobile no: 918108008308 Email : MIHIKA46@GMAIL.COM												
DOB: Nov (DOB: Nov 03, 1999 Category: Open Physically Handicap: No												
Previous La	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506988 (Status: Pass)												
Exam form	appearance type	e: Fresher		·					· · · ·				
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1	85601	Financial Ac	counting VII				Th-U	A [] ;Th-	CA[]				
2	85602	Cost Accoun	iting IV					A[];Th-					
3	85603		inagement III					A[];Th-					
4	85604		Indirect Taxes III)					A[];Th-					
5	85607		Paper III (Indian Eco	nomy)				A[];Th-					
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	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be												
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	To expl	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status: Division/Section: Roll No.:										
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Instruction	n Medium:					Nationality:	India					
				Student's Pers	onal Informati	on						
Student's	Name: GADA	NEHA SANJE	EEV			Mother's Name: R	ANJAN	C	Gender: Female			
Name in \	Vernacular Langu	age:ગાળા નેહા	SANJEEV									
Address:	Address: 207/208 ,CHANDRA APT, SARVODAYA NAGAR, MULUND WEST ,											
City: MUN	Sity: MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400080											
Telephon	Felephone no.: Mobile no: 919819991013 Email : nehagada999@gmail.com											
DOB: Oct	OB: Oct 13, 1999 Category: Open Physically Handicap: No											
Previous	Latest Examinati	on Details: Ser	n IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	eat No: 050	06904 (Status: Pass)			
Exam form appearance type: Fresher												
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declare th	nat all statement r	nade in this ap	plication are true,	ination. I have remitted complete and correct to bed for the examination	o the best of m	ny knowledge and be	elief. I	Date:				
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					Student's Perso	onal Informati	-		,	1			
	t's Name		H NIKET SAN				Mother's Nar	ne: BIJAL		Gender: Male			
Name in Vernacular Language:पारिख निकेत संजय													
Address: t-3 venkyatesh vijay appartment opposite aksharam hotel college corner													
	City: kolhapur , Taluka: Miraj, District: Sangli, State: Maharashtra, PIN: 416416												
•	Telephone no.: 2621333 Mobile no: 919518914982 Email : niketparikh98@gmail.com												
	DOB: Dec 08, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506966 (Status: Pass)												
				n IV(Regular-Rev	/16)	Exam Even	t: Apr-2019		Seat No: 05	506966 (Status: Pass)			
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respons	sibility of	of fulfillment/r	rectification of		by me. The information p He/she is regular student								
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		To explor	e your personaliz	ed Job Opportunities, Co http://mum.digitaluni	mpetitive Exams, Career Fain versity.ac/. Activate your 'e-S	s etc., click on 'EAs uvidha' account an	SY' link in your 'e-Suv d login today!	vidha' account c	on	
2	PR 01701640		Eligi	bility Status: rovisional	Examination for 084421	m No.:	Division/Section:	Roll 1 39	-	(Munta.
Instruc	ction Med	ium:					Nationality:	India		
					Student's Pers	onal Informati	,			
Stude	nt's Name	E: GUPTA	MANISHKU	MAR SARVESHK	UMAR		Mother's Name: SI	UNITA	0	Gender: Male
Name	in Verna	cular Langua	age:गुप्ता मनी	षकुमार सर्वेशकुमार					I	
			•	с с	ir anita kirana store					
	/: ulhasnagar, Taluka: Ulhasnagar, District: Thane, State: Maharashtra, PIN: 421003									
-	elephone no.: Mobile no: 918983829370 Email : manishgupta5898@gmail.com									
DOB:	Nov 10, 1	998	Cat	egory: Open		Physically	Handicap: No			
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506917 (Status: Pass)									
Exam form appearance type: Fresher										
Paper	r Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
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1			Financial Aco						-UA [] ;Th-	
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6			Project Work		onomy)				-UA[];III-	
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Instruction	n Medium:							Nationality:	India			
						Student's Perso	onal Informati	-				
Student's				ISURESH				Mother's Nar	me: SNEHA		G	Gender: Female
Name in \	Name in Vernacular Language:ठक्कर भक्ती सुरेश											
Address: VEER BHUVAN CHAWADI NAKA												
City: PEN, Taluka: Pen, District: Raigad, State: Maharashtra, PIN: 402107												
	Felephone no.: Mobile no: 917058454469 Email : bhaktithakkar999@gmail.com											
	ır 13, 1999			ategory: Open	2: 10			Handicap: No	1	0+ N	050	
				em IV(Regular-F	Revib)	Exam Even	t: Apr-2019		Seating	0: 050	07002 (Status: Pass)
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3		University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]										
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2	PR 0170164	N: 00839464	_	bility Status: rovisional	Examination forr 084423		Division/Section: B	_	ll No.: 145	quertari		
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					Student's Pers	onal Informati	,					
Stude	nt's Nam	e: ZARIN	ISBAH MAKE	BUL			Mother's Name: M	EHRUNN	ISA (Gender: Female		
			age:MISBAH									
			0	0.501 'B' THAKUF	RPADA, MUMBRA THA	NE-400612						
	City: MUMBRA, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400612											
,	Telephone no.: Mobile no: 919664736875 Email : makbulzari1234@gmail.com											
DOB:	DOB: Feb 08, 1999 Category: Reserved (OBC) Physically Handicap: No											
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0507013 (Status: Pass)											
	xam form appearance type: Fresher											
Paper	Details:	Plea	ase select Par	per details which yo	ou want to appear (UA	- University A	Assessment,CA - Co	llege Asse	essment)			
SN	Pape	r Code			Paper Name				· · ·	AM - AT		
1	85	601	Financial Acc	counting VII	-			Т	h-UA [] ;Th-	CA[]		
2	85	602	Cost Account	ting IV				Т	h-UA [] ;Th-	CA[]		
3	85	603	Financial Ma	nagement III				Т	h-UA [] ;Th-	CA[]		
4	85	604	Taxation V (I	ndirect Taxes III)				Т	h-UA [] ;Th-	CA[]		
5	85	607	Economics P	aper III (Indian Eco	onomy)			Т	h-UA [] ;Th-	CA[]		
6	UA_F	FSVI.8	Project Work					Р	w-UA[];Pw	-CA[]		
Convo	ocation Fe	e		Exam Form Late F	ee	Exam Form	Super Late Fee		Examination	Fees		
Mark	Statemen	t Fee		Total:								
Paym	ent Detai	s: /	Amount Recei	ved:	Col	lege Receipt	No. and Date:					
DD N	0:	I		MICR No:		DD Date:		B	Bank:			
Cente	r Prefere	nce (Code/N	ame):			•		•				
Venue	e Preferei	nce (Code/N	ame):									
		ller of Exami							Place:	Vidyavihar		
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reque other	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be											
cance	elled or re	ected.							St	udent's Signature		
Decla	ration by	Principal/HC	D/Chairperso	n								
respo	nsibility o	f fulfillment/r		the information. He	me. The information p e/she is regular student							
Place	:				_							
Date:	ate: College Staff Signature Principal/HOD/Chairperson											

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6			S. K. Soma	iya College of Arts, Scie	-	nerce (540)				
	7			orm for Examination of S					Sec.	
		B Com		edits)-Regular-Rev16-T			04561			
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	PRN:	EI	ligibility Status:	Examination fo 084424		Division/Section:	Roll	No.:	149 IS	
201701	16400839603		Eligible			А	4	4	Sharent	
Instruction N	Medium:					Nationality:	India			
				Student's Pe	rsonal Informat	ion				
Student's N	lame: BHAT S	SHREYA G	JURURAJ			Mother's Name: AN		(Gender: Female	
Name in Ve	Name in Vernacular Language:भट श्रेया गुरुराज									
Address: A-	Address: A-103 NIRANJAN APTS CHS HIRANAGAR, LINK ROAD MULUND WEST, MUMBAI									
City: MUMB	3AI, Taluka: Kurl	a, District:	Mumbai Suburban	, State: Maharashtra, P	IN: 400080					
Telephone	no.: 25904866			obile no: 91720883296			I:shreya.t	bhat1799@	gmail.com	
DOB: Nov 17, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506883 (Status: Pass)										
	Exam form appearance type: Fresher									
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SN P	Paper Code 85601	Financial (Accounting VII	Paper Nam	le		T		AM - AT	
2	85602	Cost Accor	•					h-UA [] ;Th- h-UA [] ;Th-		
3			Management III					h-UA[];Th-		
4			V (Indirect Taxes III))				h-UA[];Th-		
5			s Paper III (Indian E	,				h-UA [] ;Th-		
6 U/		Project Wo						w-UA[];Pw		
Convocatio	n Fee		Exam Form Lat	.e Fee	Exam Form	Super Late Fee	E	Examination	Fees	
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	ontroller of Exami							Place:	Vidyavihar	
I request pe declare that	ermission to pres It all statement m	sent myself ade in this	application are true	amination. I have remitt e, complete and correct	t to the best of n	ny knowledge and be	elief. I	Date:		
				cribed for the examinat ie or day fixed for unive						
other groun	ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancelled or	r rejectea.							St	udent's Signature	
Declaration	n by Principal/HO	D/Chairper	rson							
responsibili		rectification	of the information.	by me. The information He/she is regular stude						
Place:										
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									

		University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ N: University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A. and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on "EASY' link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status: Examination form No.: 084425 Division/Section:											
	PRN				Examination for			Ro	ll No.:	\bigcirc 1			
201	701640	0839626	Ů	Eligible			В		127	Planshad			
Instructio	on Medii	um:			-		Nationality:	India					
					Student's Pers	onal Informati	on						
Student's	s Name:	SHETT	'Y HARSHAD	GANESH			Mother's Name: RI	EKHA	(Gender: Male			
Name in	Vernac	ular Langua	age:शेट्टी हर्षट	र गणेश									
Address:	ddress: A/804, New Usha Nagar Village Road, Bhandup (w), Mumbai												
City: MU	y: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078												
Telephor	Felephone no.: 25661750 Mobile no: 919892881779 Email : harshadshetty299@gmail.com												
DOB: Oc	DOB: Oct 03, 1999 Category: Open Physically Handicap: No												
Previous	Latest	Examinatio	n Details: Se	m IV(Regular-Rev	v16)	Exam Even	t: Apr-2019		Seat No: 050	06996 (Status: Pass)			
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2	856		Cost Accoun	0					[h-UA [] ;Th-				
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4	856			Indirect Taxes III)					[h-UA [] ;Th-				
5	856			Paper III (Indian E	.conomy)				[h-UA [] ;Th-				
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Center P	referen	ce (Code/N	ame):										
		ce (Code/Na	,										
I request declare t have gor request f other gro	Fo, The Controller of Examination, request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be												
cancelle	d or reje	cted.							St	udent's Signature			
Declarati	ion by P	rincipal/HO	D/Chairperso	on									
responsi	ibility of	fulfillment/re	ectification of		by me. The information p He/she is regular studen								
Place:													
Date:	ate: College Staff Signature Principal/HOD/Chairperson												

	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/											
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		To explor	re your personaliz	ed Job Opportunities, Co. http://mum.digitaluniv	ompetitive Exams, Career Fairs versity.ac/. Activate your 'e-S	s etc., click on 'EA: Juvidha' account an	ኝY' link in your 'e-Suv d login today!	/idha' accour	nt on			
	PR	N:	Eligi	ibility Status:	Examination for 084426	m No.:	Division/Section:	Ro	oll No.:	Bartal		
20	170164(00839657		Eligible			В		142	Aluty		
Instruct	tion Med	lium:	_				Nationality:	India				
					Student's Pers	sonal Informati	on					
Studen	nt's Name	e: VERM/	A NEETU AS	НОК			Mother's Name: PF	REMA	(Gender: Female		
Name in Vernacular Language:वर्मा नीत् अशोक												
Address: room no. 35, 3rd floor, b wing, om sai charan co-op society nemade lane, dombivli(w)												
City: do	ombivli, T	Faluka: Thar	ne, District: Th	nane, State: Mahar	ashtra, PIN: 421201							
Telepho	one no.:				bile no: 919769397319			l : ineetuv	v123@gmail.	.com		
	Jan 14, 2			tegory: Open			Handicap: No					
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0507010 (Status: Pass)									07010 (Status: Pass)		
		bearance type										
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1			Financial Acc						Th-UA [] ;Th-			
2			Cost Accoun	anagement III					Th-UA [] ;Th- Th-UA [] :Th-			
3				Indirect Taxes III)					Th-UA [] ;Th- Th-UA [] ;Th-			
5				Paper III (Indian Eco					Th-UA [] ;Th-			
6			Project Work						Pw-UA[];Pw			
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		nce (Code/Na	,									
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declare	e that all	statement m	hade in this ap	pplication are true, o	nination. I have remitted complete and correct to	to the best of n	ny knowledge and be	elief. I	Date:			
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other g	round. I	understand t			ion being found false of							
cancell	led or rej	ected.							St	tudent's Signature		
Declara	ation by	Principal/HC	D/Chairperso	on								
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Place:												
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson											

	To expl	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status:										
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0017	PRN:	Eli		084427			-	ll No.: 143				
-	016400839665		Eligible		4	B		43				
Instruction	n Medium:					Nationality:	India					
Student's				Student's Pers	sonal Informati	on Mother's Name: C			Gender: Female			
						INIOUTER'S Name. C	HENAL					
	/ernacular Langu	5 3	<u> </u>									
	Address: A/8 mahavir kiran garodia nagar ghatkopar east											
City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400077 Telephone no.: Mobile no: 919833348258 Email : voradhruvi11@gmail.com												
· ·	DOB: Dec 11, 1999 Category: Open Physically Handicap: No											
		1	Sem IV(Regular-Rev1	16)	Exam Even	•		Seat No: 05	07011 (Status: Pass)			
	<pre>kam form appearance type: Fresher aper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)</pre>											
SN												
1	85601	Financial A	Accounting VII				Т	⁻ h-UA [] ;Th-	-CA[]			
2	85602	Cost Accou	unting IV				Т	⁻ h-UA [] ;Th-	·CA []			
3	85603		Nanagement III					'h-UA [] ;Th-				
4	85604		(Indirect Taxes III)					'h-UA [] ;Th-				
5	85607		Paper III (Indian Ec	onomy)				'h-UA [] ;Th-				
	UA_FFSVI.8	Project Wo				Current etc. Fee	'	Pw-UA[];Pw				
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I request p declare the have gone	at all statement r e through the syll	sent myself i nade in this a abus and the	application are true, e list of books prescr	nination. I have remitte complete and correct t ibed for the examination	to the best of m on for which I a	ny knowledge and be m appearing. I shall	elief. I not	Place: Date:	Vidyavihar			
other grou	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.											
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This form responsib		inized by the rectification	e College staff and by of the information. H	y me. The information le/she is regular studer								
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Date:	ate: College Staff Signature Principal/HOD/Chairperson											

		To explo	B.Com. (A re your personaliz	0456] vidha' account on	1						
	PRI			bility Status:	Examination forr 084428		Division/Section:	Roll No	0.:		
2017	701640	0839754	-	Eligible			А	22		maitren.	
Instructio	n Med	ium:	ļ				Nationality:	India			
					Student's Pers	onal Informati	on				
Student's	s Name	: DIWAN	NI MAITRI ISH	IWARLAL			Mother's Name: LA	ATABEN	(Gender: Female	
Name in V	Name in Vernacular Language:GUJARATI										
Address:	Address: SONALI BUILDING, ROOM NO 7 NEW MANEKLAL ESTATE NARSHI MEHTA MARG										
City: MUN	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086										
Telephon	Telephone no.: Mobile no: 919920601012 Email : maitridiwani@gmail.com										
DOB: Aug	DOB: Aug 02, 2000 Category: Open Physically Handicap: No										
Previous	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506900 (Status: Pass)										
Exam for	Exam form appearance type: Fresher										
Paper De	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN	Paper	Code			Paper Name					AM - AT	
1	85	601	Financial Aco	counting VII				Th-U	JA [] ;Th-	CA[]	
2	85	602	Cost Accoun	ting IV				Th-U	JA [] ;Th-	CA[]	
3	85	603	Financial Ma	nagement III				Th-U	JA [] ;Th-	CA[]	
4	85	604	Taxation V (I	ndirect Taxes III)				Th-U	JA [] ;Th-	CA[]	
5	85	607	Economics F	aper III (Indian Ec	onomy)				JA [] ;Th-		
6	UA_F	FSVI.8	Project Work	. 11				Pw-l	UA[];Pw	-CA[]	
Convocat	tion Fe	е		Exam Form Late	ee	Exam Form	Super Late Fee	Exa	amination	Fees	
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		ler of Exam							Place:	Vidyavihar	
			-	r the ensuing exam	ination. I have remitted	the prescrib	ed fee for the same.	l herebv	Flace.	viuyavillai	
declare th	hat all s	statement m	nade in this ap	plication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
					bed for the examination or day fixed for universi						
other grou	und. I ı	understand	that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
cancelled or rejected. Student's Signature											
Declaration by Principal/HOD/Chairperson											
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.											
Place:					_						
Date:	Date: College Staff Signature Seal and Signature of Principal/HOD/Chairperson										

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	-	I		Application Forr	m for Examination of Su	ummer Sessio	n 2020 event.			
		l	,		dits)-Regular-Rev16-T.	•	, .	0456]		
		To explor	re your personaliz	ed Job Opportunities, Co http://mum.digitalun	ompetitive Exams, Career Fain iversity.ac/. Activate your 'e-S	s etc., click on 'EAs Suvidha' account ar	SY' link in your 'e-Suv Id login today!	/idha' accoun	nt on	
	PR	.N:	Eligi	ibility Status:	Examination for 084429	m No.:	Division/Section:	Ro	ll No.:	Sin
20)170164(00839762		Eligible			В	1	136	Cited
Instruc	ction Med	lium:	_				Nationality:	India		
					Student's Pers	sonal Informati	ion			
Studer	nt's Name	e: THAKK	KER NIDHI BI	PIN			Mother's Name: Pl	RITI	(Gender: Female
Name	Name in Vernacular Language:ठक्कर निधी बिपीन									
Address: 14 ,kuber chs plot no.43,sector 17 vashi,navi mumbai										
City: na	City: navi mumbai, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400703									
Teleph	Telephone no.: 27893469 Mobile no: 919920185699 Email : nidhi.thakker24@yahoo.in									
-	Oct 24, 1			tegory: Open			Handicap: No	r		
				m IV(Regular-Rev	16)	Exam Even	t: Apr-2019		Seat No: 050	07004 (Status: Pass)
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2			Cost Account						⁻ h-UA [] ;Th- ⁻ h-UA [] ;Th-	
3			Financial Ma	•					Th-UA [] ;Th-	
4				Indirect Taxes III)					Th-UA[];Th-	
5				Paper III (Indian Ec	conomy)					
6	UA_F		Project Work						Pw-UA [] ;Pw	
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		oller of Exami	,						Place:	Viduouihor
-			-	or the ensuing exar	mination. I have remitte	d the prescrib	ed fee for the same.	l hereby	Fiace.	Vidyavihar
declare	e that all	statement m	nade in this ap	pplication are true,	complete and correct t ribed for the examinatio	to the best of n	ny knowledge and be	elief. I	Date:	
reques	st for any	special cond	cession such	as change in time	or day fixed for univers	sity Examinatio	on etc. on religious of	r any		
other g	ground. I	understand t			tion being found false o					
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Declar	Declaration by Principal/HOD/Chairperson									
respon	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place:										
Date:										

) To explo	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! N: Eligibility Status:											
201701	PRN: 16400839777	EII	igibility Status: Eligible	084430		Division/Secti A	ion: K	oll No.: 28	Port.				
							India	20	· V				
Instruction I				Student's Perso	onal Informati	Nationality:	India						
Student's N	ame GADA	PARTH MA		Student's Ferst		Mother's Nar	me [.] RFKHA		Gender: Male				
	ernacular Langua					Notici 3 Nai							
		-	5										
Address: NAGARIA NIWAS 2ND FLOOR ROOM NO 1 DHAMANKAR NAKA City: BHIWANDI, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421305													
City: BHIWANDI, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421305 Telephone no.: Mobile no: 918983118040 Email : PARTHGADA411@GMAIL.COM													
DOB: Nov 04, 1999 Category: Open Physically Handicap: No													
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506905 (Status: Pass)													
Exam form appearance type: Fresher													
Paper Deta	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)												
SN P	aper Code			Paper Name					AM - AT				
1	85601	Financial A	Accounting VII					Th-UA [] ;Th	-CA[]				
2	85602	Cost Accou	unting IV					Th-UA [] ;Th	-CA[]				
3	85603	Financial M	Management III					Th-UA [] ;Th-	-CA[]				
4	85604	Taxation V	(Indirect Taxes III)	1				Th-UA [] ;Th	-CA[]				
5	85607	Economics	s Paper III (Indian E	Economy)				Th-UA [] ;Th	-CA[]				
6 U,	A_FFSVI.8	Project Wo	vrk II					Pw-UA [] ;Pv	v-CA []				
Convocatio			Exam Form Late	e Fee	Exam Form	Super Late Fe	е	Examination	n Fees				
Mark Stater	nent Fee		Total:										
Payment De	etails:	Amount Rec	ceived:	Col	lege Receipt	No. and Date:							
DD No:			MICR No:		DD Date:			Bank:					
Center Pref	ference (Code/N	lame):						I					
Venue Prefe	erence (Code/N	ame):											
I request pe declare that have gone t	t all statement m through the sylla	sent myself hade in this a abus and the	application are true e list of books pres	amination. I have remitted e, complete and correct to cribed for the examination e or day fixed for universi	o the best of n n for which I a	ny knowledge a m appearing. I	and belief. I I shall not	Place: / Date:	Vidyavihar				
other groun	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. Student's Signature												
Declaration	by Principal/HC	D/Chairper	rson						<u> </u>				
responsibili	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.												
Place:													
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2(PR		Eligi	bility Status: Eligible	Examination for 084431	m No.:	Division/Section:	Roll N 8	-	Anjalis
	ction Med			g			Nationality:	India		
msuuc		ium.			Student's Pers	onal Informati	,			
Studer	nt's Name	BORK	AR ANJALI R	AJESH			Mother's Name: DI	FFPALI	0	Gender: Female
	name in Vernacular Language:बोरकर अंजली राजेश									
	Address: 8-B MODERN APARTMENT L.B.S MARG, GHATKOPAR (WEST)									
	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400086 Telephone no.: 25000984 Mobile no: 919869650796 Email : anjali.borkar92@gmail.com									
	DOB: Feb 09, 1999 Category: Reserved (OBC) Physically Handicap: No									
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506887 (Status: Pass)									
Exam	Exam form appearance type: Fresher									
Paper	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN	Pape	r Code			Paper Name					AM - AT
1	85	601	Financial Ac	counting VII				Th-	UA[];Th-	CA[]
2	85	602	Cost Accoun	ting IV				Th-	UA[];Th-	CA[]
3			Financial Ma	•					UA[];Th-	
4		604		ndirect Taxes III)					UA[];Th-	
5				Paper III (Indian Eco	onomy)				UA[];Th-	
6	_	FSVI.8	Project Work		•				-UA [] ;Pw	
	cation Fe			Exam Form Late F	ee	Exam Form	Super Late Fee	EX	camination	rees
	Statemen			10(a).						
Payme	ent Detail	s: A	Amount Rece	ived:	Co	llege Receipt	No. and Date:			
DD No):			MICR No:		DD Date:		Ba	nk:	
Center	r Preferei	nce (Code/N	ame):							
		nce (Code/N	,							
		ller of Exami							Place:	Vidyavihar
declar	e that all	statement m	ade in this ap	oplication are true, o	ination. I have remitte complete and correct t bed for the examination	o the best of n	ny knowledge and be	elief. I	Date:	
reques	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.									
cance	lieu or rej	ecieu.							Stu	udent's Signature
Declar	ation by	Principal/HC	D/Chairperso	on						
respor	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place:					_					
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

			Uni	iversity of Mumb	bai, Mumba	ai					
				http://mum.digitalunive	-				00		
			S. K. Somaiya	a College of Arts, Scier	nce and Comm	terce (540)					
			Application Form	n for Examination of S	ummer Sessio	n 2020 event.					
		•		its)-Regular-Rev16-T.	•	, .	-				
	To explo	re your personalize	ed Job Opportunities, Cor http://mum.digitaluniv	mpetitive Exams, Career Fair versity.ac/. Activate your 'e-S	rs etc., click on 'EAS Suvidha' account ar	SY' link in your 'e-Suvi Id login today!	idha' accou	Int on			
F	PRN:	Eligi	bility Status:	Examination for 084432		Division/Section:	Rc	oll No.:	14.7		
2017016	6400839804		Eligible			А		50	M. Jan		
Instruction M	ledium:					Nationality:	India				
	Student's Personal Information										
Student's Name: JANA MISTU ASHIM Mother's Name: SRABANI Gender: Female											
Name in Vernacular Language:জানা মিস্ত অসীম											
Address: 701	1, DNS TOWE	R 7 TH FLOO	R OPP TOWN HAI	LL KELKAR CAMP TH	IANE						
City: THANE	, Taluka: Thar	ie, District: Tha	ane, State: Mahara	ashtra, PIN: 400601							
Telephone n	10.:		Mobi	ile no: 917738518133		Email	: mistu.j	jana.9@gma	ail.com		
DOB: Apr 02	DOB: Apr 02, 1999 Category: Open Physically Handicap: No										
			m IV(Regular-Rev1	6)	Exam Even	it: Apr-2019		Seat No: 05	06928 (Status: Pass)		
	appearance typ										
Paper Details		ase select Par	per details which yo	ou want to appear (UA		Assessment,CA - Coll	lege Ass	sessment)			
	aper Code	L		Paper Name	<u></u>				AM - AT		
	85601	Financial Acc	0					Th-UA [] ;Th-			
	85602	Cost Account	8					Th-UA [] ;Th-			
	85603	Financial Mar	•					Th-UA [] ;Th-			
	85604 85607		ndirect Taxes III)					Th-UA [] ;Th-			
-	85607 A_FFSVI.8		Paper III (Indian Eco	vnomy)				Th-UA [] ;Th-			
6 UA Convocation		Project Work	Exam Form Late F		Evom Form	Super Late Fee	' T	Pw-UA [];Pw Examination			
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Center Prefe	erence (Code/N	√ame):									
Venue Prefe	erence (Code/N	lame):									
To, The Con	ntroller of Exam	ination,						Place:	Vidyavihar		
				nination. I have remitte				Date:			
				complete and correct t ibed for the examination				Date.			
request for a	any special con	ncession such a	as change in time c	or day fixed for univers	sity Examinatio	on etc. on religious or	any				
other ground cancelled or		that in the eve	int of any informatio	on being found false c	of Incorrect, my	Candidature is liable	to De				
	Student's Signature										
	Declaration by Principal/HOD/Chairperson										
responsibility	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:					_			_			
Date:											

) To explo	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ N. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! Examination form No.: Bigibility Status: Examination form No.: Division/Section: Roll No.:										
	PRN:			Examination forr			Ro	ll No ·				
	16400839812	, j	Eligible			A		29	Blackli			
Instruction N	Medium:					Nationality:	India					
				Student's Pers	onal Informati	on						
Student's Na	ame: GALA	BHAKTI PAN	IKAJ			Mother's Name: KI	RAN	(Gender: Female			
Name in Ve	ernacular Langua	age:गाला भक	ती पंकज			·						
Address: 39	Address: 39/1156 PANT NAGAR GHATKOPAR EAST MUMBAI											
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075												
Telephone no.: Mobile no: 919821362735 Email : bhakti.gala@ymail.com												
DOB: Oct 16	DOB: Oct 16, 1999 Category: Open Physically Handicap: No											
Previous La	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506906 (Status: Pass)											
Exam form appearance type: Fresher												
Paper Detai		ase select Pa	per details which yo	ou want to appear (UA	- University A	ssessment,CA - Co	llege Ass	essment)				
	aper Code			Paper Name					AM - AT			
1	85601	Financial Ac						⁻ h-UA [] ;Th-				
2	85602	Cost Accour	•					<u>h-UA [];Th-</u>				
3	85603 85604		anagement III					⁻ h-UA [] ;Th-				
4 5	85607		Indirect Taxes III) Paper III (Indian Eco					⁻ h-UA [] ;Th- ⁻ h-UA [] ;Th-				
	A FFSVI.8	Project Work						Pw-UA[];Pw				
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	erence (Code/N	,										
	erence (Code/N											
I request pe declare that have gone t request for a other ground	To, The Controller of Examination, request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be											
	cancelled or rejected. Student's Signature											
This form is responsibilit	eclaration by Principal/HOD/Chairperson his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.											
Place:												
Date:												

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		To explo	re your personaliz	ed Job Opportunities, http://mum.digitalu	Competitive Exams, Career F niversity.ac/. Activate your	airs etc., click on 'EA Suvidha' account ar	SY' link in your 'e-S d login today!	uvidha' accou	unt on	
	PR	N:	Eligi	bility Status:	Examination 1 08443		Division/Section:	Ro	oll No.:	Ro to
2	0170164	00839924		Eligible			В		104	Prinjanka
Instruc	ction Med	lium:					Nationality:	India		
					Student's Pe	ersonal Informat	on			
Stude	nt's Name	e: PATIL	PRIYANKA N	IITIN			Mother's Name:	TRUPTI		Gender: Female
Name	in Verna	cular Langua	age:पाटील प्रि	यांका नितीन						
Address: 301/M WING, GAURISHANKAR WADI-1, DATTA DIGAMBAR C.H.S., PANTNAGAR GHATKOPAR (E), MUM-075										
City: N	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400075									
Telepł	Felephone no.: Mobile no: 917208397976 Email : priyu.np14@gmail.com									
DOB:	DOB: Aug 14, 1999 Category: Reserved (SBC) Physically Handicap: No									
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506973 (Status: Pass)									
Exam form appearance type: Fresher										
Paper	Details:	Plea	ase select Pa	per details which	you want to appear (JA - University /	Assessment,CA - C	ollege Ass	sessment)	
SN	Pape	r Code			Paper Nar	ne				AM - AT
1	85	601	Financial Ac	counting VII					Th-UA [] ;Th-	CA[]
2	85	602	Cost Accoun	•					Th-UA [] ;Th-	CA[]
3		603	Financial Ma	-					Th-UA [] ;Th-	
4		604		ndirect Taxes III)					Th-UA [] ;Th-	
5		607		Paper III (Indian E	conomy)				Th-UA [] ;Th∙	
6	_	FSVI.8	Project Work						Pw-UA [] ;Pv	
	ocation Fe			Exam Form Late	e Fee	Exam Form	Super Late Fee		Examination	Fees
Mark	Statemen	tree		Total:						
Paymo	ent Detai	s: A	Amount Rece	ived:	1	College Receipt	No. and Date:			
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Venue	Preferer	nce (Code/N	ame):							
To, Th	e Contro	ller of Exami	nation,						Place:	Vidyavihar
declar	e that all	statement m	ade in this ap	oplication are true	mination. I have remi e, complete and correct cribed for the examination	t to the best of r	ny knowledge and	belief. I	Date:	-
reques	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.									
cance		celea.							St	udent's Signature
	-	-	D/Chairperso							
respor	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place:										
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

	7 To explo	B.Com. (A ore your personaliz	nt on	S							
	PRN:	Elig	ibility Status:	Examination form 084435	n No.:	Division/Section:	Ro	ll No.:	Sin a		
201701	16400840026		Eligible			В	1	117	700		
Instruction N	Medium:	!				Nationality:	India				
				Student's Perso	onal Informati	on					
Student's N	Student's Name: SHAH FENIL NITESH Mother's Name: SAVITRI Gender: Male										
Name in Ve	Name in Vernacular Language:शाह फेनील नीतेश										
Address: 46/A Thadani wadi, Room no. 1, Sindhi Society,CST road Chembur Mumbai 400071											
City: Mumb	oai, Taluka: Thar	ie, District: Th	nane, State: Mahar	ashtra, PIN: 400071							
Telephone	no.: 25220858		Mob	bile no: 919773863806		Emai	l : shahfe	enil095@gma	ail.com		
DOB: Mar 0			ategory: Open			Handicap: No					
			em IV(Regular-Rev1	6)	Exam Even	t: Apr-2019		Seat No: 050	06986 (Status: Pass)		
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)											
Paper Detai		ase select Pa	per details which ye		- University A	Assessment,CA - Col	llege Ass	essment)			
SN P	Paper Code 85601	Financial Ac		Paper Name			——————————————————————————————————————		AM - AT		
2	85601	Cost Accoun	•								
3			anagement III					[h-UA [] ;Th-			
4	85604		Indirect Taxes III)					[h-UA [] ;Th-			
5	85607		Paper III (Indian Eco	onomy)				[h-UA [] ;Th-			
	JA_FFSVI.8	Project Work						Pw-UA [] ;Pw			
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	ference (Code/N	,									
	ontroller of Exami							Place:	Viduovibor		
I request pe declare that have gone t	ermission to pres at all statement m through the sylla	sent myself fo nade in this ap abus and the l	pplication are true, of list of books prescri	nination. I have remitted complete and correct to ibed for the examinatior	o the best of n n for which I a	ny knowledge and be am appearing. I shall	elief. I not	Date:	Vidyavihar		
other groun	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.										
Declaration	Student's Signature										
This form is responsibili	'his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.										
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				http://mum.digital	luniversity.ac/. Activate your	r 'e-Suvidha' account a	Ind login today!				
	PR	(N:	Eligi	ibility Status:	Examination 0844	436	Division/Secti	ion: F	Roll No.:	Proven	
2	.0170164(00840073		Eligible			А		36	Catorine	
Instru	ction Med	Jium:					Nationality:	India			
_ 	Student's Personal Information										
Student's Name: GosAR RIDDHI VASANT Mother's Name: PRITI Gender: Female											
Name in Vernacular Language:गोसार रिद्धी वसंत											
Address: c-43/N-12,mg complex,sector-14 AMAR JYOTI CHS VASHI											
City: N	City: NAVI MUMBAI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400703										
	Telephone no.: Mobile no: 918108682248 Email : gosarriddhi77@gmail.com										
	DOB: Sep 13, 1999 Category: Open Physically Handicap: No										
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506914 (Status: Pass)										
	Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN		1				, ,	Assessment, CA	A - College As		AM - AT	
1											
2			Cost Account	-					Th-UA [];Th		
3			Financial Ma	•					Th-UA [] ;Th		
4	85			Indirect Taxes III)				Th-UA [] ;Th		
5	85	5607	Economics F	Paper III (Indian I	Economy)				Th-UA [] ;Th		
6	UA_F	FFSVI.8	Project Work	(II					Pw-UA [] ;P	w-CA []	
Convo	ocation Fe	ee		Exam Form Lat	te Fee	Exam Form	n Super Late Fe	e	Examination	n Fees	
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Pavm	ent Detail	íle: j	Amount Recei	ived.		College Receipt	t No. and Date:				
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To, Ti	he Contro	oller of Exami	ination,						Place:	: Vidyavihar	
					amination. I have ren				y		
					e, complete and correscribed for the examined for the exa				Date:		
reque	est for any	special cond	cession such	as change in tim	ne or day fixed for uni	iversity Examinati	ion etc. on religi	ious or any			
	ground. I elled or rej		that in the eve	ent of any inform	nation being found fals	se or incorrect, m	y candidature is	s liable to de			
	Student's Signature										
	Declaration by Principal/HOD/Chairperson										
respo	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.										
Place	:					_	_		_		
Date:											
Duto.					Colleç	ge Staff Signature)		Seal and Sig Principal/HO	gnature of DD/Chairperson	

		To explo		Ur S. K. Somaiy Application For a. (A.and F.)(with Crea nalized Job Opportunities, C http://mum.digitalun	unt on					
	PRI			Eligibility Status:	Examination for 084437	rm No.:	Division/Section:	R	oll No.:	ie.
2017	701640	0840107		Eligible			А		1	and the second s
Instructio	on Medi	ium:	!				Nationality:	India		
					Student's Per	rsonal Informati	on			
Student's	s Name	: BHANI	USHALI HI	INAL KISHOR			Mother's Name: P	REETI	(Gender: Female
Name in	Vernac	cular Langua	age:हिनल							
Address:	Address: 304,VIJAY NIWAS, KISAN NAGAR -1 , WAGLE ESTATE, THANE									
City: Tha	City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604									
Telephone no.: Mobile no: 917045742711 Email : bhanushalihinal99@gmail.com										
DOB: No	ov 27, 1	999	(Category: Open		Physically	Handicap: No			
Previous	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506882 (Status: Pass)									
	ixam form appearance type: Fresher									
Paper De			ase select l	Paper details which	you want to appear (U/		Assessment,CA - Co	bllege Ass	sessment)	
SN		r Code			Paper Name	e				AM - AT
1		601		Accounting VII					Th-UA [] ;Th-	
2		602 602		ounting IV					Th-UA [] ;Th-	
3		603 604		Management III V (Indirect Taxes III)					Th-UA [] ;Th- Th-UA [] ;Th-	
5		607		s Paper III (Indian Ed					Th-UA [] ;Th-	
6		FSVI.8	Project W		Johonny)				Pw-UA[];Pw	
Convoca			i loject W	Exam Form Late	Fee	Exam Form	Super Late Fee		Examination	
Mark Sta				Total:			<u></u>			
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		ice (Code/N	/							
l request declare t	t permis hat all s	statement m	sent myself nade in this	s application are true,	mination. I have remitte , complete and correct rribed for the examination	to the best of n	ny knowledge and b	elief. I	Place: Date:	Vidyavihar
other gro	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.									
Declarati	Student's Signature Student's Signature									
This form responsi	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.									
Place:										
Date:										

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		To explo			its)-Regular-Rev16-T.\ Impetitive Exams, Career Fairs		, .	/0456] /idha' account	ton			
				http://mum.digitaluniv	ompetitive Exams, Career Fairs versity.ac/. Activate your 'e-S		d login today!	T				
	PR	.N:	Eli	igibility Status:	Examination for 084438		Division/Section:	Roll	l No.:	Phange-		
201	701640	00840154		Eligible			В	8	84	0		
Instructio	on Med	lium:					Nationality:	India				
ļ					Student's Pers	sonal Informati	-					
Student's	s Name	e: MEHT/	A BHAVYA I	BHAVESH			Mother's Name: H	ENNA	0	Gender: Male		
Name in	ı Verna	icular Langua	age:भव्य मेह	हता								
Address: D\6 403 MALLINATH APT. SARVODAYA NAGAR J.N RAOD MULUND												
,	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080											
•		25671001	<u> </u>		ile no: 919664049285			I: mehtab	havya76@g	jmail.com		
	OOB: Jan 07, 2000 Category: Open Physically Handicap: No											
	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506954 (Status: Pass)											
	Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)											
SN		er Code			Paper Name				SSITIETIC)	AM - AT		
1		5601	Financial A	Accounting VII				 т	h-UA [] ;Th-			
2		5602	Cost Accou						h-UA[];Th-			
3		5603		Management III					h-UA [] ;Th-			
4	85	5604		(Indirect Taxes III)					h-UA [] ;Th-			
5	85	5607	Economics	s Paper III (Indian Eco	onomy)				h-UA [] ;Th-			
6	UA_F	FSVI.8	Project Wo	ork II				P	w-UA [] ;Pw	-CA []		
Convoca	ation Fe	эе		Exam Form Late F	Fee	Exam Form	Super Late Fee	E	Examination	Fees		
Mark Sta	atemen	t Fee		Total:								
Payment	nt Detai	ls:	Amount Rec	ceived.	Cc	ollege Receipt	No. and Date:					
DD No:		<u>. </u>		MICR No:		DD Date:	no. and Bate.	В	Bank:			
-	Prefere	nce (Code/N	lame):	-				I		I		
		nce (Code/N	,									
To, The	Contro	oller of Exami	ination,						Place:	Vidyavihar		
					nination. I have remitte				Doto:	-		
					complete and correct to ibed for the examinatio				Date:			
request f	for any	special cond	cession sucl	ch as change in time o	or day fixed for univers	sity Examinatio	on etc. on religious of	r any				
cancelle			that in the e	Vent of any mornau	ion being found false o	r Incorrect, my	Candidature is itable	3 10 De				
	Student's Signature											
	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the											
responsi	esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical source/term work (if any) according to university rules.											
Place:												
Date:					College S	taff Signature		S	eal and Sign	nature of		
					J ů	0				D/Chairperson		

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		To explor	· ·	ed Job Opportunities, C	Competitive Exams, Career Fa niversity.ac/. Activate your 'e-	airs etc., click on 'EAs	SY' link in your 'e-Suv	vidha' account	ton	
001	PRI		J J	bility Status:	Examination fo 084439)	Division/Section: B		l No.: 16	Densoni
Instructio)0840413		Eligible			Nationality:	India	10	
monucuc					Student's Per	rsonal Informati	-	maia		
Student's	s Name	: SHAH	DHVANI BIM	AL			Mother's Name: TE	EJAL	0	Gender: Female
	Name in Vernacular Language:ध्वनी बिमल shah									
	Address: L-203, VARDHMAN NAGAR DR.R.P. ROAD MULUND (WEST)									
	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080 Telephone no.: 25650490 Mobile no: 919699862048 Email : dhwanishah1399@gmail.com									
	ODB: Feb 13, 1999 Category: Open Physically Handicap: No									
Previous	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506985 (Status: Pass)									
Exam for	rm appe	earance type	e: Fresher							
Paper D	aper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)									
SN	Paper	r Code			Paper Nam	e				AM - AT
1	85	601	Financial Acc	counting VII				Tł	h-UA [] ;Th-	CA[]
2	85	602	Cost Account	ting IV				Tł	h-UA [] ;Th-	CA[]
3			Financial Ma	0					h-UA [] ;Th-	
4				ndirect Taxes III)					h-UA [] ;Th-	
5				Paper III (Indian Ed	conomy)				h-UA [] ;Th-	
6	_		Project Work				<u> </u>	'	w-UA [] ;Pw 	
Convoca Mark Sta		-		Exam Form Late	Fee	Exam Form	Super Late Fee		Examination	Fees
WIDIK SLO		. гее		Total:						
Payment	t Detail:	s: /	Amount Recei	ived:	C	ollege Receipt	No. and Date:			
DD No:				MICR No:		DD Date:		В	Bank:	
Center P	referer	nce (Code/N	ame):							
Venue P	'referen	ice (Code/Na	ame):							
l request declare t have gor	t permis that all s ne throu	statement m ugh the sylla	sent myself fo hade in this ap abus and the l	pplication are true ist of books presc	mination. I have remitt , complete and correct ribed for the examinati e or day fixed for univer	to the best of n ion for which I a	ny knowledge and be im appearing. I shall	elief. I not	Place: Date:	Vidyavihar
other gro	ound. Ì u	understand t	that in the eve	ent of any informa	tion being found false	or incorrect, my	candidature is liable	e to be		
	Student's Signature									
This forn responsi	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.									
Place:										
Date:										

	P To explo	B.Com. (A re your personaliz	0456] idha' account c	on						
	PRN.	Eligi	bility Status:	Examination for 084440		Division/Section:	Roll	No.:	R. N. Shah	
20170)16400840475		Eligible			В	12	:1	K. N. Sriari	
Instruction	Medium:					Nationality:	India	-		
				Student's Pers	onal Informati	on				
Student's N	Name: SHAH	RUTU NIMES	SH			Mother's Name: M	ANISHA	G	Gender: Female	
Name in V	ernacular Langu	age:શાહ ઋતુ l	નિમેષ							
Address: 1	ddress: 11,Kirti vihar C.H.S, L.B.S marg Ghatkopar(west)									
City: Mumb	ity: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086									
Telephone	elephone no.: Mobile no: 919167185861 Email : rutufans@gmail.com									
DOB: Dec	ODB: Dec 03, 1999 Category: Open Physically Handicap: No									
Previous L	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506990 (Status: Pass)									
Exam form appearance type: Fresher										
Paper Deta	aper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN F	Paper Code			Paper Name					AM - AT	
1	85601	Financial Aco	•					-UA [] ;Th-0		
2	85602	Cost Accoun	-					-UA [] ;Th-(
3	85603	Financial Ma	-					-UA [] ;Th-0		
4	85604	`	ndirect Taxes III)	· · · · · · · ·				-UA [] ;Th-0		
5 6 L	85607 JA FFSVI.8		Paper III (Indian Ec	onomy)				-UA [] ;Th-(
Convocatio	—	Project Work	Exam Form Late	Foo	Exam Form	Super Late Fee		-UA [] ;Pw xamination		
Mark State			Total:					xamination	1003	
			rotai.							
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DD No:			MICR No:		DD Date:		Ва	ink:		
Center Pre	eference (Code/N	lame):								
Venue Pre	eference (Code/N	ame):								
	ontroller of Exam	•						Place:	Vidyavihar	
declare that	at all statement n	nade in this ap	plication are true,	nination. I have remitte complete and correct t ibed for the examination	o the best of m	ny knowledge and be	elief. I	Date:		
request for other grou	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancelled of	or rejected.							Stu	udent's Signature	
Declaratio	n by Principal/HC	D/Chairperso	on					•	-	
responsibi		rectification of	the information. H	y me. The information p e/she is regular studer						
Place:				_						
Date:	te: College Staff Signature Principal/HOD/Chairperson									

a contraction of the second se	4	To explor		S. K. Somaiy Application Forr and F.)(with Crec	iversity of Mumb http://mum.digitalunive a College of Arts, Scier n for Examination of Su lits)-Regular-Rev16-T. ⁵	ersity.ac/ nce and Comn ummer Sessio Y. B.Com. (A.	nerce (540) n 2020 event. and F.)-Sem VI [2C0	10456] vidha' account o	n	
				http://mum.digitaluni	ompetitive Exams, Career Fair versity.ac/. Activate your 'e-S		d login today!		211	
20	PR	N: 00840606	Ŭ	bility Status: rovisional	Examination for 084441		Division/Section: A	Roll N 31	-	Matticeste
			Г							
Instruc	tion Med	ium:			Otuda atla Dava		Nationality:	India		
Studon	it's Name		NIDHI DILES		Student's Pers	sonal informati	Mother's Name: H			Gender: Female
		•	age:गाला निर्ध							
	dress: 11/12, HANS LAXMI APT, RRT ROAD, NEAR CHETNA HOSPITAL MULUND (WEST)									
	ity: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080 elephone no.: Mobile no: 919167561302 Email : galanidhi123@gmail.com									
	elephone no.: Mobile no: 919167561302 Email : galanidhi123@gmail.com IOB: Aug 20, 1999 Category: Open Physically Handicap: No									
	•			- 3 - 7 - 1 -	16)	<u> </u>	•	6	aat No: 050)6908 (Status: Pass)
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506908 (Status: Pass) Exam form appearance type: Fresher									
	aper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)									
SN		r Code			Paper Name		,			AM - AT
1		601	Financial Ac	counting VII				Th-	-UA [] ;Th-	CA[]
2	85	602	Cost Accoun	ting IV				Th-	-UA[];Th-	CA[]
3	85	603	Financial Ma	nagement III				Th-	-UA [] ;Th-	CA[]
4	85	604	Taxation V (I	ndirect Taxes III)				Th-	-UA [] ;Th-	CA[]
5	85	607	Economics F	Paper III (Indian Ec	onomy)			Th-	-UA[];Th-	CA[]
6	UA_F	FSVI.8	Project Work	: 11				Pw	-UA [] ;Pw	-CA[]
Convo	cation Fe	e		Exam Form Late	Fee	Exam Form	Super Late Fee	E>	xamination	Fees
Mark S	statemen	t Fee		Total:						
Pavmo	nt Detail	s. [/	Amount Rece	ived:	0	llege Receipt	No. and Date:			
DD No		3 . ⁷		MICR No:	00	DD Date:	No. and Date.	Ba	ink:	
-		nce (Code/N	ame):			22 2410.		124		
		nce (Code/Na	/							
		ller of Exami	,						Place:	Vidyavihar
declare	e that all	statement m	ade in this ap	plication are true,	nination. I have remitte complete and correct t	o the best of n	ny knowledge and be	elief. I	Date:	
reques other g	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any her ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancell	led or rej	ected.							St	udent's Signature
Declara	ation by	Principal/HO	D/Chairperso	on						
respon	sibility o	f fulfillment/r	ectification of		y me. The information p e/she is regular studer					
Place:										
Date:	tte: College Staff Signature Principal/HOD/Chairperson									

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		To explo	,	zed Job Opportunities, Co	ts)-Regular-Rev16-T.\ npetitive Exams, Career Fairs ersity.ac/. Activate your 'e-S	etc., click on 'EAS	SY' link in your 'e-Suv	/0456] ridha' account	on	
201	PR	N: 00840757	Elig	ibility Status: Eligible	Examination for 084442		Division/Section: B	_	No.: 18	CrauVaV
Instructi				Liigibio			Nationality:	India		
monucu		ium.			Student's Pers	onal Informati	,			
Student	's Name	e PARM	AR GAURAV				Mother's Name: K	ANCHAN	0	Gender: Male
		cular Langua	_							
		Ū.	•							
	Address: GANESH NAGAR, OPP. GANESH MANDIR, PANT NAGAR, City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075									
	Telephone no.: Mobile no: 919324327405 Email : parmargaurav202@gmail.com									
· ·	OOB: May 26, 2000 Category: Open Physically Handicap: No									
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506967 (Status: Pass)										
Exam form appearance type: Fresher										
	Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)									
SN	Pape	r Code			Paper Name				,	AM - AT
1	85	601	Financial Ac	counting VII				Th	n-UA [] ;Th-	CA[]
2	85	602	Cost Accour	nting IV				Th	n-UA [] ;Th-	CA[]
3	85	603	Financial Ma	anagement III				Th	n-UA [] ;Th-	CA[]
4	85	604	Taxation V (Indirect Taxes III)				Th	n-UA [] ;Th-	CA[]
5	85	607	Economics	Paper III (Indian Eco	onomy)			Th	n-UA [] ;Th-	CA[]
6	UA_F	FSVI.8	Project Wor	k II		_		Pv	w-UA[];Pw	/-CA[]
Convoc	ation Fe	ee		Exam Form Late F	ee	Exam Form	Super Late Fee	E	Examination	Fees
Mark St	atemen	t Fee		Total:						
Paymer	nt Detail	s: /	Amount Rece	eived:	Co	llege Receipt	No. and Date:			
DD No:		I		MICR No:	I	DD Date:		Ba	ank:	
Center I	Prefere	nce (Code/N	ame):			•		ľ		
Venue F	Preferer	nce (Code/N	ame):							
To, The	Contro	ller of Exam	ination,						Place:	Vidyavihar
declare	that all	statement m	ade in this a	pplication are true, o	ination. I have remitter complete and correct to bed for the examination	o the best of m	ny knowledge and be	elief. I	Date:	
request other gr	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancelle	ed or rej	ected.							St	udent's Signature
Declara	tion by	Principal/HC	D/Chairpers	on						
respons	sibility o	f fulfillment/r	ectification o		me. The information p e/she is regular studen					
Place:					_					
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

	P To explo	B.Com. (/ re your personali	nt on							
	PRN:	Eliç	gibility Status:	Examination form 084443	n No.:	Division/Section:	Rol	ll No.:	- 0	
20170	016400840765	-	Eligible			A		55	Janavi	
Instruction	Medium:	_				Nationality:	India			
				Student's Perso	onal Informati	on				
Student's N	Name: KANAF	BAR JANAVI	ASHOK			Mother's Name: AF	RCHANA		Gender: Female	
Name in Ve	/ernacular Langua	age:कानाबार	जानवी अशोक			·				
Address: ROOM NO 05 , MARWADI CHAWL, SION TROMBAY ROAD, NEAR POST OFFICE, TROMBAY										
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400088										
Telephone	Felephone no.: Mobile no: 919967992822 Email : janavikanabar@gmail.com									
DOB: Oct 19, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506933 (Status: Pass)									06933 (Status: Pass)	
Exam form appearance type: Fresher										
Paper Deta		ase select Pa	aper details which yo	ou want to appear (UA	- University A	ssessment,CA - Col	llege Asse	essment)		
	Paper Code			Paper Name					AM - AT	
1			ccounting VII					h-UA [] ;Th-		
2 3		Cost Accour	Inting IV Ianagement III					h-UA [] ;Th-		
3			(Indirect Taxes III)							
5			Paper III (Indian Eco	onomy)				'h-UA [] ;Th-		
		Project Worl						Pw-UA[];Pw		
Convocatio	—	110,000	Exam Form Late F	Fee	Exam Form	Super Late Fee	'	Examination		
Mark State			Total:							
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Payment D	Jetails:	Amount Rece		Col	<u> </u>	No. and Date:				
DD No:			MICR No:		DD Date:		E	Bank:		
	eference (Code/N	,								
	eference (Code/Na							—		
I request po declare tha have gone request for	To, The Controller of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any Place: Vidyavihar									
	ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected. Student's Signature									
Declaratior	n by Principal/HO	D/Chairpers	son					I		
This form is responsibil	is carefully scrutir	nized by the or	College staff and by of the information. He	/ me. The information p e/she is regular student						
Place:										
Date:	te: College Staff Signature Principal/HOD/Chairperson									

	То ехрю	```	Un S. K. Somaiya Application Form (A.and F.)(with Cred lized Job Opportunities, Co http://mum.digitalunit	int on						
F	PRN:	Eli	gibility Status:	Examination form 084444	n No.:	Division/Section:	Rc	oll No.:	0	
2017016	6400840796		Eligible			А		66	Juni	
Instruction M	ledium:			<u>.</u>		Nationality:	India			
		······		Student's Perso	onal Informati	on		·		
Student's Na	me: KOTHA	ARI DIVY KA	AMLESH			Mother's Name: BH	HARATI	(Gender: Male	
Name in Vernacular Language:कोठारी दिव्य कमलेश										
Address: 401,AMAR APARTMENT DR.JAWKAR LANE,CHUNABHATTI MUMBAI-400022										
City: MUMBA	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400022									
Telephone no	Telephone no.: Mobile no: 919869408338 Email : dvthr1@gmail.com									
DOB: Aug 30, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506944 (Status: Pas									06944 (Status: Pass)	
Exam form appearance type: Fresher										
Paper Details		ise select Pr	aper details which y	vou want to appear (UA	- University A	ssessment,CA - Col	lege Ass	essment)		
	aper Code		··	Paper Name					AM - AT	
								Th-UA [] ;Th-		
		Cost Accou						Th-UA [] ;Th-		
-			Ianagement III (Indirect Taxes III)					Th-UA [] ;Th- Th-UA [] ;Th-		
			Paper III (Indian Ec					Th-UA [] ;Th-		
-		Project Wor		Shorry				Pw-UA [] ;Pw		
Convocation	_	110,000.000	Exam Form Late	Fee	Exam Form	Super Late Fee		Examination		
Mark Statem			Total:			<u></u>				
Payment Det	tails:	Amount Rece		Col	llege Receipt	No. and Date:				
DD No:			MICR No:		DD Date:			Bank:		
	erence (Code/Na	,								
	rence (Code/Na									
I request peri declare that a have gone th request for a other ground	To, The Controller of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Place: Vidyavihar leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I Place: Date: lave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not Date: Date: equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any To may appearing the syllabus or any Date:									
cancelled or	rejected.							St	tudent's Signature	
Declaration b	by Principal/HO	D/Chairper	son							
responsibility	y of fulfillment/re	ectification of		y me. The information p le/she is regular student						
Place:				_						
Date:	te: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									

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		I		Application For	rm for Examination of S	Jummer Sessio	n 2020 event.			
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L		To explor	/e your person	nalized Job Opportunities, C http://mum.digitalu	Competitive Exams, Career Fa niversity.ac/. Activate your 'e-	irs etc., click on 'EAs Suvidha' account ar	3Y' link in your 'e-Suvi Id login today!	vidha' accoun	it on	
	PR	N:	E	Eligibility Status:	Examination fo 084445		Division/Section:	Ro	II No.:	
201	170164(00840815		Eligible			А		20	aller
Instructi	tion Med	lium:					Nationality:	India		
					Student's Per	rsonal Informati	ion			
Student	it's Name	e: DHUM	NE SWAR	RALI BALKRISHNA			Mother's Name: AN	JJALI	(Gender: Female
Name in Vernacular Language:दुमणे स्वराली बाळकृष्ण										
Address: 53/33, PURVARANG CHSL, NAVGHAR ROAD, NEAR TATA COLONY, MULUND EAST										
City: Ml	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400081									
Telepho	Felephone no.: 25634771 Mobile no: 919819911698 Email : sbdhumne@gmail.com									
	Nov 16, 1			Category: Reserved	· · · ·		/ Handicap: No			
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506899 (Status: Pass)									
Exam form appearance type: Fresher										
Paper D			ase select	Paper details which	you want to appear (U	5	Assessment,CA - Col	lege Asse	essment)	···· ·
SN 1		er Code	Firsteigl	A	Paper Nam	<u>е</u>		<u>_</u>		AM - AT
1		5601 5602		Accounting VII					[h-UA [] ;Th-	
2		5602 5603		ounting IV Management III					[h-UA [] ;Th-	
4		5603 5604		V (Indirect Taxes III)					۲h-UA [] ;Th-۱ ۲h-UA [] ;Th-۱	
5		5607		cs Paper III (Indian E					[h-UA [] ;Th-	
6			Project W						Pw-UA [] ;Pw	
-	cation Fe		1.0,4	Exam Form Late	e Fee	Exam Form	Super Late Fee	'	Examination	
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other gr	round. I	understand t			ation being found false					
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201	PRN	l: 0840823	Ŭ	bility Status:	Examination for 084446		Division/Section: A		l No.: 19	16 dunde
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Instructio	on Mean	um:			Student's Dor	sonal Informati	Nationality:	India		
Student's	s Name	SANYU		SH DHUMALE	Student's Per		Mother's Name: S		0	Gender: Female
			ge:संयुक्ता म्				Would's Name. Of			
		-	- 0 0	, ,						
	Address: room no.1732,ramnagar,lotus colony, abdul hamid marg,shivaji nagar City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400043									
	elephone no.: Mobile no: 918286940970 Email : sanyuktadhumale100@gmail.com									
DOB: No		999	Cat	tegory: Reserved (Handicap: No	II. Saliyuk		
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1	1 85601 Financial Accounting VII Th-UA [];Th-CA []									
2	856	02	Cost Accoun	ting IV				TI	h-UA [] ;Th-	CA[]
3	856			inagement III					h-UA [] ;Th-	
4	856			ndirect Taxes III)					h-UA [] ;Th-	
5	856			Paper III (Indian Eco	onomy)				h-UA [] ;Th-	
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		ce (Code/Na	,							
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request f other gro	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancelle	d or reje	cted.							St	udent's Signature
Declarati	ion by P	rincipal/HO	D/Chairperso	วท					•	
responsi	ibility of	fulfillment/re	ectification of		me. The information e/she is regular stude					. I also undertake the ance and practical
Place:					_					
Date:	te: College Staff Signature Principal/HOD/Chairperson									

	70 exploi	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login todayl N: Eligibility Status: Examination form No.: 084447 Division/Section: Roll No.:										
	PRN:			Examination forr			Rol	l No.:	P. Saak			
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Instruction	Medium:			I		Nationality:	India					
				Student's Pers	onal Informati	on						
Student's N	Name: CHELL	ATH TANISH	HA AJAYKUMAR			Mother's Name: MI		0	Gender: Female			
Name in Ve	ernacular Langua	эge:चेल्लत र्ता	निषा अजय कुमार									
Address: 30	Address: 304A ,samata apt Darga road Amar nagar											
City: mumb	ity: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400082											
Telephone	Provide management Provide management relephone no.: 25650074 Mobile no: 917738619491 Email : tanisha.chellath20@gmail.com											
DOB: Aug 2	OB: Aug 20, 1999 Category: Open Physically Handicap: No											
Previous La	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506890 (Status: Pass)											
Exam form	Exam form appearance type: Fresher											
-	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)											
	Paper Code			Paper Name					AM - AT			
1		Financial Acc						h-UA [] ;Th-				
2		Cost Account	•					h-UA [] ;Th-				
3 4		Financial Ma	Indirect Taxes III)					h-UA [] ;Th-				
4 5			Paper III (Indian Ec					'h-UA [] ;Th- 'h-UA [] ;Th-				
		Project Work						w-UA[];Pw				
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	eference (Code/N	,										
	ference (Code/Na	,										
I request pe declare tha have gone request for	To, The Controller of Examination, request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be											
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Place:												
Date:	te: College Staff Signature Principal/HOD/Chairperson											

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20)170164(00840966		Eligible			А	4	46	72
Instruct	tion Med	lium:					Nationality:	India		
					Student's Pers	sonal Informati	ion			
Studen	nt's Name	e: KUMAI	RPAL DEEPA	AK JAIN			Mother's Name: UF	RMILA	(Gender: Male
Name i	in Verna	cular Langua	age:कुमारपाल							
Address: flat no.12 NEW SAIBABA SOCIETY KASARHAT ALHILYABAI CHOWK OPP. RAMWADI KALYAN WEST										
City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421301										
Teleph	Telephone no.: 2206675 Mobile no: 919819772993 Email : kumarjain1013@gmail.com									
DOB: N	DOB: May 08, 2000 Category: Open Physically Handicap: No									
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506924 (Status: Pass)										
Exam form appearance type: Fresher										
•	Details:		ase select Par	per details which ye	ou want to appear (UA	,	Assessment,CA - Col	lege Asse	essment)	
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2		5602	Cost Accoun	•					Th-UA [] ;Th-	
3		5603 5604	Financial Ma	anagement III Indirect Taxes III)					h-UA [] ;Th-	
4 5		5604 5607		Paper III (Indian Eco					⁻ h-UA [] ;Th- ⁻ h-UA [] ;Th-	
6		FSVI.8	Project Work		JIIOITIY)				Pw-UA [] ;Pw	
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declare	e that all	statement m	nade in this ap	pplication are true, o	nination. I have remitte complete and correct t	to the best of m	ny knowledge and be	elief. I	Date:	
have go	one throu	ough the sylla	abus and the l	list of books prescri	ibed for the examinatio	on for which I a	am appearing. I shall	not		
other g	ground. I	understand t			or day fixed for univers ion being found false o					
cancell	led or rej	jected.							St	udent's Signature
Declara	ation by	Principal/HC	DD/Chairperso							
This fo	orm is car	refully scrutir	nized by the C	College staff and by	y me. The information p					
				f the information. He niversity rules.	e/she is regular studen	it of this Colleç	je and has completed	d the requ	Jired attenda	ance and practical
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Date:										
Dute.					College S	Staff Signature			Seal and Sign Principal/HOE	nature of D/Chairperson

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Instruct	ion Med	ium:					Nationality:	India		
					Student's Pers	onal Informati	on			
Studen	t's Name	e: DARSH	HI MUKESH (judhka			Mother's Name: N	EETA	C	Gender: Female
Name i	n Verna	cular Langua	age:દર્શી મુકેશ	ગુઢકા						
Addres	Address: 402, Shreeji Sadan, Near Mahavir Chowk, Railway Station Road, Anjurphata, Bhiwandi									
	City: Bhiwandi, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421302									
Teleph	Felephone no.: Mobile no: 917303383300 Email : darshigudhka12@gmail.com									
DOB: A	DOB: Apr 05, 2000 Category: Open Physically Handicap: No									
Previou	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506915 (Status: Pass)									
Exam f	Exam form appearance type: Fresher									
Paper [Details:	Plea	ase select Pa	per details which yc	ou want to appear (UA	- University A	ssessment,CA - Co	llege Asses	sment)	
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1	85	601	Financial Acc	counting VII				Th-	-UA [] ;Th-	CA[]
2	85	602	Cost Accoun	ting IV				Th-	-UA [] ;Th-	CA[]
3	85	603	Financial Ma	nagement III				Th-	-UA [] ;Th-	CA[]
4	85	604	Taxation V (I	ndirect Taxes III)				Th-	-UA [] ;Th-	CA[]
5	85	607	Economics P	Paper III (Indian Eco	nomy)			Th-	-UA [] ;Th-	CA[]
6	UA_F	FSVI.8	Project Work	: 11				Pw	-UA [] ;Pw	-CA[]
Convoc	cation Fe	e		Exam Form Late F	ee	Exam Form	Super Late Fee	Ex	kamination	Fees
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Payme	nt Detail	s. A	Amount Recei	ived [.]	Co	lege Receint	No. and Date:			
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		nce (Code/N	/							
		ller of Exami	,						Place:	Vidyavihar
declare	that all	statement m	ade in this ap	oplication are true, o	ination. I have remitted	o the best of n	ny knowledge and be	elief. I	Date:	
request	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancell	ed or rej	ected.		-	-	-			St	udent's Signature
Declara	ation by	Principal/HC	D/Chairperso	n						
respon	sibility o	f fulfillment/r	ectification of		me. The information p /she is regular studen					
Place:					_					
Date:	te: College Staff Signature Principal/HOD/Chairperson									

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20)170164(00841285		Eligible				В		131		Anna
Instruc	tion Med	lium:						Nationality:	India			
						Student's Pers	onal Informati	on				
Studen	nt's Name	e: SUCH/	AK SAAHIL	SANDEEP				Mother's Name:	SHEFALI		G	Gender: Male
Name i	in Verna	cular Langua	age:सूचक स	गहिल संदीप								
Addres	s: B 202	MANGALM	IURTI CO C	P HSG SOCIET	YRAN	MBAUG LANE NO 4	KALYAN WE	зт				
City: K	ty: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421301											
Teleph	elephone no.: 2323251 Mobile no: 919004879501 Email : saahilsuchak@yahoo.com											
DOB: J	Jul 27, 19	999	С	Category: Open			Physically	Handicap: No				
Previou	us Lates	t Examinatio	n Details: S	Sem IV(Regular-R	Rev16))	Exam Even	t: Apr-2019		Seat No	o: 050	6999 (Status: Pass)
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1										Th-UA []	-	
2			Cost Accou	Aanagement III						Th-UA []	-	
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	PRI		, i i i i i i i i i i i i i i i i i i i	ibility Status:	Examination fo 084451		Division/Section: B		II No.: 86	- Second
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Instructi	ion Med	ium:			Chude atta Da		Nationality:	India		
Student	'e Nome		A REMY KIR		Student's Per	sonal Informat	Mother's Name: V			Gender: Female
							INIOUTEI S Name. V	АКОПА		
Name in Vernacular Language:રેમી કીર્તિ મેફતા Address: ગાંગોગા દા COR SUMAM NIVAS RUU DING NEAR CORAL RUUNAN L R S MARC										
Address: 21/2ND FLOOR SHYAM NIVAS BUILDING NEAR GOPAL BHUVAN, L B S MARG										
,	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086									
	Felephone no.: 25156537 Mobile no: 919699802628 Email : kmehta262@gmail.com									
-	DOB: Dec 04, 1999 Category: Open Physically Handicap: No									
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506956 (Status: Pass)										
	Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)									
SN		r Code		iper details which	Paper Nam					AM - AT
1	•	601	Financial Ac	counting VII	i upor rum	•		Т	[h-UA [] ;Th-	
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3	85	603		anagement III					[];Th	
4	85	604		Indirect Taxes III)					[] Th-UA []	
5	85	607	Economics I	Paper III (Indian E	conomy)			Т	[h-UA [] ;Th-	-CA[]
6	UA_F	FSVI.8	Project Wor	k II				F	Pw-UA [] ;Pv	v-CA[]
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		ller of Exam							Place:	Vidyavihar
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request other gr	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
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This for respons	m is car sibility of	efully scrution f fulfillment/r	nized by the ectification o	College staff and b	y me. The information le/she is regular stude					
Place:										
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									

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2	PR	N: 00841312	EI	igibility Status: Eligible		ion forr 4452		Division/Section: B	R	oll No.: 87	Reya
				LIGIDIE	01110000111		18/1		Le all'a	•	
Instruc	ction Med	lium:			Student'	la Doro	onal Informati	Nationality:	India		
Stude	nt's Name		A RIYA KIR	די	Students	SPEIS		Mother's Name: V			Gender: Female
		cular Langua						Would Stuarte.			
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					AR GOPAL BHUV			SMARG			
			a, District:		, State: Maharashtr		: 400086				
		25156537			obile no: 91992055	81800	Dhusiaallu		iii : kevini	mehta74@	yanoo.in
DOB: Dec 04, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506957 (Status: Pass)											
	Exam form appearance type: Fresher										
	Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)										
SN											
1	•	601	Financial A	Accounting VII						Th-UA [] ;1	
2	85	602	Cost Acco	•						Th-UA [] ;]	
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5	85	607	Economics	s Paper III (Indian	Economy)					Th-UA [] ;1	[h-CA[]
6	UA_F	FSVI.8	Project Wo	ork II						Pw-UA[];	Pw-CA []
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			-		rudev hotel kalyan					
		-		-	ashtra, PIN: 421301					
	hone no.:				bile no: 919702603236		Emai	il : iav.dosl	hi2310@gm	ail.com
	Jul 26, 19	999	Cat	egory: Open		Physically	Handicap: No			
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	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiva College of Arts. Science and Commerce (540)											
the	S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]											
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Studer	nt's Name	e: KAMBI	LE NAMRATA	A VASANT			Mother's Name	: SANDHY	4	Gender: Female		
Name	in Verna	cular Langua	age:कांबळे नम	मता वसंत								
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City: cl	hembur,	Taluka: Mun	nbai, District:	Mumbai City, State	e: Maharashtra, PIN: 40	00071						
Teleph	none no.:	:		Mot	oile no: 919920610955		E	mail : knam	rata119@gm	ail.com		
DOB: Jul 25, 2001 Category: Reserved (SC) Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506932 (Status: Pass)												
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	To explore	Applicati	Somaiya on Form ith Credita	versity of Mumba http://mum.digitaluniver College of Arts, Scient for Examination of Sun s)-Regular-Rev16-T.Y npetitive Exams, Career Fairs rsity.ac/. Activate your 'e-Su	sity.ac/ ce and Comm mmer Session . B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2C0	10456] idha'account on	1		
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Instruction Me	dium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Student's Nam	ne: BHANJ	A SUMITA BINAY				Mother's Name: IN	DRANI	C	Gender: Female	
Name in Verna	acular Langua	ge:sumita								
Address: room	n no41/4/5,sha	inkar deol chembur,mur	nbai-74							
City: mumbai,	Taluka: Muml	pai, District: Mumbai Cit	y, State:	Maharashtra, PIN: 400	074					
Telephone no.	:		Mobil	e no: 918108272867		Emai	I : sumitabha	anja09@g	mail.com	
DOB: May 09,	2000	Category: Ope	en		Physically	Handicap: No				
Previous Lates	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506881 (Status: Pass)									
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Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
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2 8	5602	Cost Accounting IV						JA [] ;Th-		
3 8		Financial Management						JA [] ;Th-		
4 8		Taxation V (Indirect Tax						JA [] ;Th-		
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Studer	nt's Name	e: JAIN K	USHEETA L	LALIT				Mother's Name:	SANGEE	ТА	Gender: Female
Name	in Verna	icular Langua	age:जैन क्शी	ोत lalit							
		-	- 3	road mulund we	st.mur	mhai					
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,		25601788	<u>, , , , , , , , , , , , , , , , , , , </u>		-	e no: 919987508616		Em	ail : krusł	neetajain@gi	mail.com
	Aug 09, 1		С	ategory: Open			Physically	Handicap: No			
Previo	us Lates	t Examinatio	on Details: S	em IV(Regular-F	Rev16))	Exam Even	it: Apr-2019		Seat No: 0	506925 (Status: Pass)
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Name ir	n Verna	cular Langua	age:सुमरीया ड	ॉली दिलीप										
Address	s: 1347	AKSHAY PA	RK B-303 K	AMATGHAR ROAI	D ANJURPHATA BHIV	VANDI								
City: BI	HWAND)I, Taluka: Bl	niwandi, Distr	rict: Thane, State: N	Maharashtra, PIN: 421	305								
· · ·	one no.:				ile no: 919420573568			il : dollysı	umaria98@g	jmail.com				
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	H	To explo	``	S. K. Soma Application F Aand F.)(with C	aiya C ⁻ orm fc Credits)	ersity of Mumb http://mum.digitalunive College of Arts, Scien or Examination of Su)-Regular-Rev16-T.Y etitive Exams, Career Fairs sty.ac/. Activate your 'e-Si	<u>rsity.ac/</u> nce and Comm ummer Session 7. B.Com. (A. a	erce (540) n 2020 event. and F.)-Sem V	l [2C00456] 'e-Suvidha'accc	ount on		
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Instructi	ion Med	lium:						Nationality:	India			
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Student	's Name	e: JAIN H	IMANSHI PR	AMOD				Mother's Nar	ne: NAYANA		Ge	ender: Female
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Address	s: 29 NC) BUILDING	ASHOK NAC	GAR NEAR JAI		NDIR KALYAN NAK	٢A					
City: BH	IIWAND), Taluka: B	hiwandi, Disti	rict: Thane, Stat	te: Mal	harashtra, PIN: 4213	302					
Telepho	one no.:			N	Mobile	no: 918087936935			Email : him0	6jain@gn	nail.co	m
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Previous	s Lates	t Examinatio	n Details: Se	m IV(Regular-R	Rev16)		Exam Even	t: Apr-2019		Seat No	o: 0506	6923 (Status: Pass)
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2	PR 0170164	N: 00841977	Ĭ	bility Status: Eligible	Examination form 084460		Division/Section: B	Roll 12	No.: 26	Ashete
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					State: Maharashtra, PIN					
	hone no.:		-,		bile no: 918097535592		Emai	il : rushikes	shshete31@	gmail.com
DOB:	Dec 17, 1	999	Cat	tegory: Reserved	(SC)	Physically	Handicap: No			
Previo	ous Lates	t Examinatio	n Details: Ser	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	S	eat No: 050	6995 (Status: Pass)
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1 I	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts. Science and Commerce (540)											
	S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event.											
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Student's N	Vame: MALDE	E DHWANI K	KISHOR			Mother's Name:	SADHAN	A	Gender: Female			
Name in Ve	ernacular Langua	age:मालदे ध	वनी किशोर									
Address: 40	02, shubham bld	g, plot no-7	7 sector-18, kopark	khairane Navi-Mumbai, 4	400709							
City: NaviM	/lumbai, Taluka: ⁻	Thane, Distr	rict: Thane, State: N	Maharashtra, PIN: 40070	09							
Telephone	no.:		-	bile no: 919699619437		Em	ail : dhwa	nimalde06@	gmail.com			
DOB: Jun 2	,		Category: Open			Handicap: No						
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1	85601	Financial Aco	counting VII				Th	n-UA [] ;Th-	CA[]
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4	85604	Taxation V (I	ndirect Taxes III)				Th	n-UA [] ;Th-	CA[]
5	85607	Economics F	Paper III (Indian Eco	onomy)			Th	n-UA [] ;Th-	CA[]
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Student's	Name: KH	IARAT	KAVITA SH	HAM			Mother's Name: SL	JNITA	(Gender: Female			
Name in \	Vernacular La	inguage	e:खरात कवि	र्गता शाम			<u> </u>						
Address:	Address: 22 NEW BHARAT NAGAR, H.P. COLONY,												
City: MUN	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074												
Telephon	ie no.:			Mo	bile no: 919004893976		Emai	l : kavukh	harat99@gm	ail.com			
DOB: Nov	DOB: Nov 12, 1999 Category: Open Physically Handicap: No												
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	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the												
responsib	esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.												
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	To explor	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on "EASY" link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account on login today!										
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Student's Na	me: KAPAD	IA FORUM N	IITESH			Mother's Name: SI	HRUNGALI	C	Gender: Female			
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Address: 79/	A-503,EKTA CI	HS TILAKNA	GAR,CHEMBUR(V	V) MUMBAI-400089								
City: MUMBA	Al, Taluka: Kurla	a, District: Mu	imbai Suburban, S	tate: Maharashtra, PIN	: 400089							
Telephone n	elephone no.: 25291610 Mobile no: 919820640151 Email : foramkapadia1999@gmail.com											
DOB: May 00	OB: May 06, 1999 Category: Open Physically Handicap: No											
Previous Lat	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506934 (Status: Pass)											
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1	85601	Financial Acc	counting VII				Th-I	JA [] ;Th-	CA[]			
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3	85603	Financial Ma	nagement III				Th-I	UA [] ;Th-	CA[]			
4	85604	Taxation V (Ir	ndirect Taxes III)				Th-I	JA [] ;Th-	CA[]			
5	85607	Economics P	aper III (Indian Eco	onomy)				UA [] ;Th-				
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	🔊	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on "EASY" link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Bit is is (20 at is a second of the s											
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Student's N	Vame: THAK	KAR ROHAN	DHIREN			Mother's Name: NI	ISHA	(Gender: Male				
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	ity: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086												
Felephone no.: 022 Mobile no: 917977949469 Email : rohanthakkar49@gmail.com													
DOB: Apr 2	ODB: Apr 29, 1999 Category: Open Physically Handicap: No												
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0507003 (Status: Pass)													
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Name	in Verna	cular Langua	age:निकाळजे	स्वप्नाली अरुण										
Addre	ss: BHAF	RAT NAGAR	, R.C. MARG	G, VASHINAKA										
City: N	y: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074													
Telepl	elephone no.: Mobile no: 919819948358 Email : swapnali1777@gmail.com													
DOB:	OB: Jul 16, 1999 Category: Reserved (SC) Physically Handicap: No													
Previc	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506963 (Status: Pass)													
Exam	Exam form appearance type: Fresher													
· ·	aper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)													
SN		er Code			Paper Nar	ne				AM - AT				
1		5601	Financial Acc	0					Th-UA [] ;Th-					
2		5602	Cost Account	0					Th-UA [] ;Th-					
3			Financial Ma	Indirect Taxes III	<u> </u>				Th-UA [] ;Th- Th-UA [] ;Th-					
4 5				Paper III (Indian I	,				Th-UA [] ;Th-					
6			Project Work						Pw-UA[];Pv					
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	ent Detail	l s: A	Amount Recei		0	College Receipt	No. and Date:		1					
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		nce (Code/N	/											
		nce (Code/Na	,											
l reque declar have g reque	To, The Controller of Examination, request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be													
cance	ancelled or rejected. Student's Signature													
Decla	ration by	Principal/HC	D/Chairperso	วท										
respo	nsibility of	of fulfillment/r	ectification of		by me. The informatio He/she is regular stud									
Place	:													
Date:	te: College Staff Signature Seal and Signature of Principal/HOD/Chairperson													

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				http://mum.digitalunive	rsity.ac/				000
			S. K. Somaiy	a College of Arts, Scien	ice and Comm	nerce (540)			
			Application Form	m for Examination of Su	Immer Sessio	n 2020 event.			
		B.Com. (/	A.and F.)(with Crec	dits)-Regular-Rev16-T.Y	7. B.Com. (A. a	and F.)-Sem VI [2C0	0456]		
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F	PRN:	Elig	ibility Status:	Examination form 084468	m No.:	Division/Section:	Ro	ll No.:	Tawan.
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Instruction M	edium:					Nationality:	India		
				Student's Pers	onal Informati	on			
Student's Na	me: HOTTI	PAWAN SU	RESH			Mother's Name: KA	LPANA	(Gender: Male
Name in Ver	nacular Langua	age: ಹೊಟ್ಟಪವ	ನ್ ಸುರೇಶ್						
Address: Narassaya chawl room no. 1 kurla west jarimari mumbai 400072 Narassaya chawl room no. 1 kurla west jarimari mumbai 400072									
City: Mumba	ity: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400072								
Telephone n	Telephone no.: Mobile no: 919594882723 Email : pawanhotti@gmail.com								
DOB: Nov 14, 1998 Category: Open Physically Handicap: No									
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506921 (Status: Pass)									
Exam form appearance type: Fresher									
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	85602	Cost Accour	0					⁻ h-UA [] ;Th-	
-	85603		anagement III					⁻ h-UA [] ;Th-	
	85604	```	(Indirect Taxes III)					⁻ h-UA [] ;Th-	
-	85607		Paper III (Indian Ec	onomy)				⁻ h-UA [] ;Th-	
	_FFSVI.8	Project Worl		F		Current etc. Fee	'T	Pw-UA[];Pw	
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Center Prefe	rence (Code/N	lame):							
Venue Prefe	rence (Code/N	ame):							
To, The Con	troller of Exam	ination,						Place:	Vidyavihar
declare that a	all statement m	hade in this a	pplication are true,	mination. I have remitted complete and correct to ribed for the examinatio	o the best of m	ny knowledge and be	elief. I	Date:	
request for a	ny special con	cession such	as change in time	or day fixed for univers tion being found false or	ity Examinatio	n etc. on religious or	any		
	cancelled or rejected. Student's Signature								
Declaration b	by Principal/HC)D/Chairpers	on						
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Place:									
Date:	ate: College Staff Signature Principal/HOD/Chairperson								

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Instruc	ction Med	lium:	_					Nationality:	India			
						Student's Pers	onal Informati	on				
Studer	nt's Name	e: DASAF	RI CHANDF	RASHEKHAR AN	IAND			Mother's Name:	LAXMI		G	ender: Male
Name	in Verna	cular Langu	age:दासरी च	वंद्रशेखर आनंद								
Addres	ddress: A-8 NAZMA MANZIL LAXMI NARAYAN MARG NR SAMTA VIDYA MANDIR											
City: M	ity: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072											
Teleph	Telephone no.: Mobile no: 918693035400 Email : shekhar24399@gmail.com											
DOB: N	DOB: Mar 24, 1999 Category: Reserved (SC) Physically Handicap: No											
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506893 (Status: Pass)											
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declare	e that all	statement m	nade in this a	application are tr	rue, co	nation. I have remitted complete and correct to	o the best of m	ny knowledge and	belief. I		ate:	
						ed for the examinatio day fixed for univers						
other g	ground. I	understand t				n being found false or						
cancel	ancelled or rejected. Student's Signature											
Declar	eclaration by Principal/HOD/Chairperson											
This fo respon	orm is car nsibility of	refully scrutir of fulfillment/r	nized by the rectification	e College staff an		me. The information p /she is regular studen						
Place:	lace:											
Date:	ate: College Staff Signature Principal/HOD/Chairperson											

	To explo	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! NN: Eligibility Status: Examination form No.: 084470 Division/Section: Roll No.:										
	PRN:				nination for	rm No.:		on: R	oll No.:	N J.		
201701	16400842482		Eligible				А		17	Printer 3.		
Instruction N	Medium:						Nationality:	India				
				Stu	ident's Per	sonal Informati	on					
Student's Na	ame: DHAM	ANI PRIYAI	NK JATIN				Mother's Nam	ne: BEENA		Gender: Male		
Name in Vei	rnacular Langua	age:धामणी '	प्रियंक जतीन									
Address: 20	Address: 201, KASTURI PARK, NEW MANEKLAL ESTATE GHATKOPAR (WEST)											
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086												
Telephone no.: 25136851 Mobile no: 919029046843 Email : priyank19799@gmail.com												
DOB: Jul 19, 1999 Category: Open Physically Handicap: No												
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506896 (Status: Pass)												
	Exam form appearance type: Fresher											
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5	85607		Paper III (Indian];Th-CA[]		
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I request per declare that have gone th	all statement m hrough the sylla	sent myself hade in this a abus and the	for the ensuing ex application are tru e list of books pres	e, complete ar scribed for the	nd correct examination	to the best of m on for which I a	ny knowledge a im appearing. I	and belief. I shall not	y L	ace: Vidyavihar ate:		
other ground	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected. Student's Signature											
Declaration	eclaration by Principal/HOD/Chairperson											
This form is responsibilit	carefully scrutin ty of fulfillment/r	nized by the rectification	e College staff and							ledge. I also undertake the tendance and practical		
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	PR	.N:	Elie	gibility Status:	Examination for 084471	m No.:	Division/Section:	Ro	oll No.:	0	
20)170164(00842547		Eligible			В		81	Vamini_	
Instruc	ction Med	lium:					Nationality:	India			
					Student's Pers	sonal Informati	ion				
Studen	Student's Name: MANGAONKAR YAMINI RAVINDRA Mother's Name: KAVITA Gender: Female										
Name	Name in Vernacular Language:माणगांवकर यामिनी रविंद्र										
Addres	Address: 106, SANGAM SOCIETY, R.B. KADAM MARG, NEAR GANESH MANDIR,										
City: M	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084										
Teleph	Felephone no.: Mobile no: 919594354727 Email : yaminimangaonkar99@gmail.com										
	DOB: Mar 26, 2000 Category: Reserved (OBC) Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506951 (Status: Pass)											
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)											
•	Details:		ase select Pa	aper details which yo			Assessment,CA - Col	lege Ass	essment)	··· ·	
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declare	e that all	statement m	nade in this a	application are true, o	nination. I have remitte complete and correct t	to the best of n	ny knowledge and be	elief. I	Date:		
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cancell	ancelled or rejected. Student's Signature										
Declar	eclaration by Principal/HOD/Chairperson										
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		University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today!											
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201	PR			ibility Status: Eligible	Examination for 084472	m No.:	Division/Section:		No.: 0	Anchi			
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msuucu	on meu	ium.			Student's Pers	onal Informati	-	Inula					
Student'	's Name		ARCHI TUS	HAR	Siddenits i ers		Mother's Name: SI	NEHA	0	Gender: Female			
			ige:हरिया आ										
			-	3									
	Address: 301 NAGESHWAR KRUPA RATAN BHUVAN NO 2 GARDEN LANE SANGHANI ESTATE City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086												
	Felephone no.: Mobile no: 917045868384 Email : archiharia2000@gmail.com DOB: Feb 13, 2000 Category: Open Physically Handicap: No												
	DOB: Feb 13, 2000 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506918 (Status: Pass))6918 (Status: Pass)			
Exam form appearance type: Fresher													
Paper D	Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)												
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5		607		Paper III (Indian Ec	onomy)				1-UA[];Th-				
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Venue F	Preferer	nce (Code/N	ame):										
		ller of Exami	•						Place:	Vidyavihar			
declare	that all	statement m	ade in this ap	oplication are true,	nination. I have remitte complete and correct t	the best of n	ny knowledge and be	elief. I	Date:				
request	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be												
	cancelled or rejected. Student's Signature												
Declarat	tion by I	Principal/HC	D/Chairperso	วท									
respons	ibility of	f fulfillment/r	ectification of		y me. The information p e/she is regular studer								
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	PR	(N:	Elig	ibility Status:	Exan	nination for 084473		Division/Sectio	on: F	Roll No.:	0
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Instruct	tion Med	lium:			_!			Nationality:	India		
					Stu	ident's Per	sonal Informati	on			
Studen	nt's Name	e: NAGAI	RIYA YASH K	(ANTILAL				Mother's Nam	ie: MANJUL/	A	Gender: Male
Name i	in Verna	cular Langua	age:नागरियाः	यश कांतीलाल							
Addres	Address: 519 SHAH NIWAS AJANTA COMPOUND DHAMANKAR NAKA BHIWANDI										
City: Bl	City: BHIWANDI, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421305										
	Felephone no.: Mobile no: 917875265557 Email : yashnagariya123@gmail.com										
-	DOB: Dec 07, 1999 Category: Open Physically Handicap: No										
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506961 (Status: Pass)										
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment.CA - College Assessment)											
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6		FSVI.8	Project Work							Pw-UA[];I	
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declare	e that all	statement m	hade in this a	pplication are tru	ie, complete ar	nd correct t	to the best of m	ny knowledge ar	nd belief. I	y Date	c
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other g	ground. I	understand t		ent of any inform							
cancell	ancelled or rejected. Student's Signature										
Declara	eclaration by Principal/HOD/Chairperson										
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Place:	lace:										
Date:	ate: College Staff Signature Principal/HOD/Chairperson										

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		To explo	re your persona	lized Job Opportunities, Cou	npetitive Exams, Career Fai ersity.ac/. Activate your 'e-	rs etc., click on 'EAS Suvidha' account an	SY' link in your 'e-Suv d login today!	/idha' account c	'n	
201	PR			gibility Status: Eligible	Examination for 084474	rm No.:	Division/Section:	Roll I 10	-	Open .
Instructi							Nationality:	India		
					Student's Per	sonal Informati	· · · ,			
Student	's Name	E: KOMA	L JIVAN PA	TEL			Mother's Name: V	ARSHA	(Gender: Female
Name ir	n Verna	cular Langu	age:कोमल				1		I	
	Address: 502 MUMBADEVI APT VEER SAVARKAR ROAD, JOSHIWADA THANE WEST									
	City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601									
	Telephone no.: 25388764 Mobile no: 918879920591 Email : komalp2204@gmail.com									
DOB: A	DOB: Apr 22, 1999 Category: Open Physically Handicap: No									
Previou	s Lates	Examinatio	n Details: S	em IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	eat No: 050	06971 (Status: Pass)
Exam fo	Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)									
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1		601		ccounting VII					-UA [] ;Th-	
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6		FSVI.8	Project Wo		inomy)				-UA[];III- -UA[];Pw	
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		nce (Code/N	,							
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declare	that all	statement m	nade in this a	application are true, o	ination. I have remitte complete and correct	to the best of n	ny knowledge and be	elief. I	Date:	
					bed for the examination or day fixed for universion					
other gr	ound. I	understand			on being found false of					
cancelle	ed or rej	ected.							St	udent's Signature
Declara	Declaration by Principal/HOD/Chairperson									
respons	sibility o	f fulfillment/ı	ectification		me. The information s/she is regular stude					 I also undertake the ance and practical
Place:					_					
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			http://mum.digitaluniv	versity.ac/. Activate your 'e-Se	Suvidha' account an	d login today!	T		
	PRN: 16400842845	, i i i i i i i i i i i i i i i i i i i	ibility Status: Eligible	Examination for 084475		Division/Section: B		oll No.: 100	Anishap
Instruction N			Liigioio			Nationality:	India		7
				Student's Pers		, , , , , , , , , , , , , , , , , , ,	IIIuia		
Student's Na	lame PATAC		RAMCHANDRA			Mother's Name: JA	VSHREF		Gender: Female
						Mound o Name		<u> </u>	
Name in Vernacular Language:पाताडे अमिषा रामचंद्र Address: 3/5. JAY BHAWANI RAHIWASI SANGHA CHAYA NIWAS RAM NAGAR BHANDUP FAST									
Address: 3/5 JAY BHAWANI RAHIWASI SANGHA CHAYA NIWAS RAM NAGAR BHANDUP EAST									
Telephone r	ity: BHANDUP, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042 elephone no.: Mobile no: 919892698667 Email : amishapatade11@gmail.com								
Telephone no.: Mobile no: 919892698667 Email : amishapatade11@gmail.com OOB: Mar 11, 2000 Category: Open Physically Handicap: No									
			m IV(Regular-Rev1	16)	Exam Even	•	<u> </u>	Seat No: 05	06969 (Status: Pass)
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Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)									
	Paper Code		<u>· · · · · · · · · · · · · · · · · · · </u>	Paper Name	,			,	AM - AT
1		Financial Acc	counting VII	-			Т	Th-UA [] ;Th-	-CA[]
2	85602	Cost Account	ting IV					 Th-UA [] ;Th-	
3	85603	Financial Ma	nagement III				Т	Th-UA [] ;Th-	-CA[]
4	85604	Taxation V (I	Indirect Taxes III)				Т	Th-UA [] ;Th-	·CA[]
5	85607	Economics F	Paper III (Indian Eco	onomy)			Т	Th-UA [] ;Th-	-CA[]
6 UA	A_FFSVI.8	Project Work	:11				F	Pw-UA[];Pw	v-CA []
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	ntroller of Exami	,						Place:	Vidyavihar
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Declaration	Declaration by Principal/HOD/Chairperson								
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Place:									
Date:	te: College Staff Signature Seal and Signature of Principal/HOD/Chairperson								

University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event.										9	
		To explo	,	ed Job Opportunities, C	dits)-Regular-Rev16-T competitive Exams, Career Fa iversity.ac/. Activate your 'e	irs etc., click on 'EA	SY' link in your 'e-Su	00456] vidha' account	ton		
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2	0170164	00842884		Eligible			В	g	96		
Instru	ction Med	lium:					Nationality:	India			
					Student's Pe	rsonal Informat	on				
	nt's Name		(H JENIL VIR				Mother's Name: F	UPAL	0	Gender: Male	
Name	Name in Vernacular Language:પારેખ જેનીલ વીરેન										
Addre	Address: 401 SHREE SHUBH APARTMENT OPP SYNDICATE BANK TILAK ROAD M.P VIDHYA MARG, GHATKOPAR (EAST)										
City: N	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077										
Telepl	hone no.:			Мо	bile no: 91809742499	9	Ema	il : jenilpar	ekh1120@g	mail.com	
DOB:	OB: Mar 14, 1999 Category: Open Physically Handicap: No revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506965 (Status: ATKT)										
Previc	ous Lates	t Examinatio	n Details: Se	m IV(Regular-Rev	16)	Exam Ever	t: Apr-2019	S	Seat No: 050	06965 (Status: ATKT)	
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1		601	Financial Ac	0					h-UA [] ;Th-		
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4 5		607		Paper III (Indian E	conomu)				h-UA [] ;Th-		
6		FSVI.8	Project Work	• •	conorry)				h-UA [] ;Th- w-UA [] ;Pw		
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-		ller of Exami	-						Place:	Vidyavihar	
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reque other	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be										
cance	lled or rej	ected.							St	udent's Signature	
Decla	ration by	Principal/HC	D/Chairperso	on							
respo	nsibility o	f fulfillment/r	ectification of	College staff and to the information. I iversity rules.	by me. The information He/she is regular stude	printed in the f ent of this Colle	orm is correct to the ge and has complete	best of my ed the requ	/ knowledge uired attenda	. I also undertake the ance and practical	
Place					_						
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson										

C.		1		S. K. Somaiy	ya College of Arts, Scie	ence and Comr	nerce (540)			Name &
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		To explor	re your personaliz	zed Job Opportunities, C http://mum.digitalu	Competitive Exams, Career Fa niversity.ac/. Activate your 'e-	irs etc., click on 'EA' -Suvidha' account a	SY' link in your 'e-Su'	ividha' accou	unt on	
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20)170164 [,]	00842903		Eligible			В		90	Pitan
Instruc	ction Med	dium:					Nationality:	India		
					Student's Pe	ersonal Informat	tion			
Student's Name: MISHRA PRIYANKA RAKESHKUMAR Mother's Name: SADHANA Gender: Female										
Name in Vernacular Language:मिश्रा प्रियांका राकेशकुमार										
Addres	ss: near (ganesh man	dir, room no.	5 jay bharat Hous	sing Society, 90 feet roa	ad SAKINAKA	MUMBAI			
City: M	IUMBAI,	Taluka: Kurl	a, District: M	umbai Suburban,	State: Maharashtra, Pl	IN: 400072				
<u> </u>	none no.:			Mc	obile no: 917303665003	3	Ema	uil : rkmisł	hra6764@red	Jiff.com
DOB: Aug 04, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506959 (Status: Pass)									06959 (Status: Pass)	
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declare	e that all	statement m	hade in this ap	pplication are true	amination. I have remitte e, complete and correct	t to the best of n	my knowledge and b	elief. I	Date:	ļ
have g	jone thro	ough the sylla	abus and the I	list of books prese	cribed for the examination	tion for which I a	am appearing. I shal	ll not		
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cancell	lled or rej	jected.							S	tudent's Signature
Declar	ation by	Principal/HC	D/Chairperso	on					I	
This fo respon	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical urse/term work (if any) according to university rules.									
Place:	ice:									
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

	University of Mumbai, Mumbai											
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20170	016400843013		Eligible			В		105	AR			
Instruction	Medium:			·		Nationality:	India					
				Student's Pers	sonal Informati	ion						
Student's Name: POPATIYA MANISHA KARIMBHAI Mother's Name: FARIDA Gender: Female												
Name in Vernacular Language:पोपटीया मनीषा करीमभाई												
Address: ROOM NO.205, TULSI APARTMENT DEVAJI NAGAR NARPOLI BHIWANDI												
City: BHIW	√ANDI, Taluka: B	hiwandi, Distr	rict: Thane, State:	Maharashtra, PIN: 421	302							
Telephone	; no.:		Mo	bile no: 919881691380		Em	ail : seem	amanishacoc	bl123@gmail.com			
DOB: May 24, 1999 Category: Open Physically Handicap: No												
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506974 (Status: Pass)												
	n appearance type											
Paper Deta		ase select Pa	per details which	you want to appear (UA		Assessment,CA - C	ollege As	sessment)	· · · · · <u>-</u>			
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1	85601	Financial Acc						Th-UA [] ;Th-				
2	85602	Cost Accoun	0					Th-UA [] ;Th-				
3	85603 85604		anagement III					Th-UA [] ;Th-				
4 5			Indirect Taxes III) Paper III (Indian Ed					Th-UA [] ;Th- Th-UA [] ;Th-				
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have gone	e through the sylla	abus and the I	list of books presc	ribed for the examination	on for which I a	am appearing. I sha	all not					
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Declaration	eclaration by Principal/HOD/Chairperson											
		-		by me. The information	printed in the f	orm is correct to th	e best of	mv knowledar	e I also undertake the			
responsibil		rectification of	f the information. H	He/she is regular studer								
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								Principal/HO/	D/Chairperson			

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Instruction N	Medium:						Nationality:	India			
					Student's Perso	nal Informati	on				
Student's N	Student's Name: KRINA AKASH BHUWARIA Mother's Name: KAVITA Gender: Female										
Name in Vernacular Language:करीना आकाश भुवारिअ											
Address: 36	Address: 366/101, KISHOR PALACE , GARA ROAD , NEAR KAMALA HOTEL, SAI NEKETAN , BHIWANDI.										
			ane, State: Mahar								
Telephone r	no.:		1	Mobile	e no: 917757842484			Email : krinaj	ain02@gm	nail.com	
DOB: Oct 02	DOB: Oct 02, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506885 (Status: Pass)											
Exam form a	appearance type	e: Fresher									
Paper Detai		ase select F	^o aper details whic	ch you	want to appear (UA -	- University A	ssessment,CA	A - College As	sessment		
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1	85601		Accounting VII						Th-UA[];		
2	85602	Cost Accor							Th-UA[];		
3	85603		Management III						Th-UA[];		
4	85604 85607		/ (Indirect Taxes I	,					Th-UA[];		
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2	PR 0170164	N: 00843075	J J	bility Status:	Examination for 084480		Division/Section: B	Roll N 141	-	o training	
Instru	ction Med	lium:					Nationality:	India			
					Student's Pers	onal Informati	on				
Stude	nt's Name	e: VARIA	RIDDHI JITE	NDRA			Mother's Name: Pl	RITI	G	ender: Female	
Name	Name in Vernacular Language:વરિયા રિદ્ધિ જીતેન્દ્ર										
	Address: B/14,NEELKANT VIHAR.PLOT NO.28/29. GARODIA NAGAR.GHATKOPAR EAST.										
	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400077										
· ·	Telephone no.: Mobile no: 918779196994 Email : riddhivaria99@gmail.com OOB: Apr 04, 1999 Category: Open Physically Handicap: No										
-	1			• , ,	16)		•	Sea	at No: 050	7009 (Status: Pass)	
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0507009 (Status: Pass)										
	Details:	21		per details which	you want to appear (UA	- University A	Assessment,CA - Co	llege Assess	sment)		
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1	85	601	Financial Ac	counting VII				Th-L	JA [] ;Th-C	CA[]	
2	85	602	Cost Accoun	iting IV				Th-L	JA [] ;Th-C	CA[]	
3	85	603	Financial Ma	inagement III				Th-L	JA [] ;Th-C	CA[]	
4	85	604	Taxation V (I	Indirect Taxes III)				Th-L	JA [] ;Th-C	CA[]	
5	85	607	Economics F	Paper III (Indian E	conomy)			Th-L	JA [] ;Th-C	CA[]	
6	UA_F	FSVI.8	Project Work	c II				Pw-I	UA [] ;Pw-	CA[]	
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		ller of Exam							Place:	Vidyavihar	
declar	e that all	statement m	ade in this ap	oplication are true	mination. I have remitte complete and correct t ribed for the examinatio	o the best of n	ny knowledge and be	elief. I	Date:		
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cance	cancelled or rejected. Student's Signature										
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respo	nsibility o	f fulfillment/r	ectification of		y me. The information p le/she is regular studen						
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				iversity of Mumb					1	
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6	0		Application Form	n for Examination of Su	ımmer Sessio	n 2020 event.			IN ST BUS	
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Instruction N	Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Student's N	Jame: JAIN N	ANIL RAJE	SHKUMAR			Mother's Name: MA	ANISHA	(Gender: Male	
Name in Vernacular Language:जैन मानिल राजेशकुमार										
Address: A/18, MAHAVIR APARTMENT, 4TH FLOOR, NEW MILL ROAD, KURLA (W)										
City: MUME	BAI, Taluka: Kur	la, District: N	lumbai Suburban, S	State: Maharashtra, PIN	. 400070					
Telephone I	no.:		Mob	oile no: 918286733289		Email	I:balotha	amanil7@gm	nail.com	
DOB: Dec 2	26, 1999	Ca	ategory: Open		Physically	/ Handicap: No				
Previous La	atest Examinatio	n Details: Se	em IV(Regular-Rev1	6)	Exam Even	it: Apr-2019		Seat No: 050	06926 (Status: Pass)	
Exam form	appearance type	e: Fresher								
Paper Detai	ails: Ple:	ase select Pa	aper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Ass	essment)		
	Paper Code	 		Paper Name					AM - AT	
1	85601		ccounting VII					Th-UA [] ;Th-		
2	85602	Cost Accour						Th-UA [] ;Th-		
3			lanagement III					Th-UA [] ;Th-		
4	85604		(Indirect Taxes III)					Th-UA [] ;Th-		
5	85607		Paper III (Indian Eco	onomy)				Th-UA [] ;Th-		
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Convocation			Exam Form Late I	-ee	Exam Form	Super Late Fee		Examination	i Fees	
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Payment De	Details:	Amount Rece	eived:	Co	llege Receipt	No. and Date:				
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To, The Cor	ontroller of Exami	ination,						Place:	Vidyavihar	
				nination. I have remitted				Date:	-	
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other groun		that in the ev	/ent of any Informau	ion being found false or	incorrect, my	candidature is liable	; to pe			
	Student's Signature									
	n by Principal/HC	-								
responsibili		rectification o	of the information. He	y me. The information p e/she is regular student						
Place:	ace:									
Date:										

	6									
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2017	PRN: 016400843091	, i i i i i i i i i i i i i i i i i i i	bility Status: Eligible	Examination for 084482		Division/Section: A	Roll I 24	-	K-N-2054	
			Ligible						and post of	
Instruction	i Medium:			Student's Pers	anal Informati	Nationality:	India			
Student's		I KINAL NITIN	1	Student's Pers	onal mormau	Mother's Name: DI		C	Gender: Female	
			-			Informer 3 Name. Di				
Name in Vernacular Language:દોશી ઉનલ નીતિન Netroop: E RRITI RUIL DING TAMPENIACAR SN ROAD MULLIND (MA										
Address: 5,PRITI BUILDING TAMBENAGAR,SN ROAD MULUND (W) City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080										
		nbai, District:	-	e: Maharashtra, PIN: 4 ile no: 919699232611	00080			h:05@	1	
DOB: Nov	e no.: 25654818	Cat		ile no: 919699232611	Dhysically		I : KINAIdosi	hi25@gma	II.com	
			egory: Open n IV(Regular-Rev ⁻	6)	Exam Even	Handicap: No	6	oot No: 050)6902 (Status: Pass)	
	n appearance typ		III IV (Negulai-Nev	(0)		t. Api-2019	0		10902 (Status. Fass)	
Paper Det	,.		per details which v	ou want to appear (UA	- University A	Assessment CA - Co	llege Asses	ssment)		
•	Paper Code		,,,	Paper Name	j.	,		,	AM - AT	
1	85601	Financial Acc	counting VII	•			Th	-UA [] ;Th-	CA[]	
2	85602	Cost Accoun	ting IV				Th	-UA [] ;Th-	CA[]	
3	85603	Financial Ma	nagement III				Th	-UA [] ;Th-	CA[]	
4	85604	Taxation V (I	ndirect Taxes III)				Th	-UA [] ;Th-	CA[]	
5	85607	Economics P	Paper III (Indian Ec	onomy)			Th-	-UA [] ;Th-	CA[]	
6 1	JA_FFSVI.8	Project Work	. 11		_		Pw	/-UA[];Pw	-CA[]	
Convocati	on Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	E	xamination	Fees	
Mark State	ement Fee		Total:							
Payment I	Details:	Amount Recei	ived:	Co	llege Receipt	No. and Date [.]				
DD No:			MICR No:		DD Date:		Ba	ank:		
Center Pre	eference (Code/N	lame):								
	eference (Code/N	/								
	ontroller of Exam							Place:	Vidyavihar	
declare the	at all statement n	nade in this ap	plication are true,	nination. I have remitte complete and correct t	o the best of n	ny knowledge and be	elief. I	Date:		
request fo other grou	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancelled	or rejected.							Stu	udent's Signature	
Declaratio	n by Principal/HC	D/Chairperso	n							
responsib		ectification of	the information. H	/ me. The information p e/she is regular studen						
Place:				_						
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									

	70 exploi		S. K. Somai Application Fo A.and F.)(with Cre and Job Opportunities, 4	Iniversity of Mumba http://mum.digitalunivers iya College of Arts, Scienco orm for Examination of Sun edits)-Regular-Rev16-T.Y. Competitive Exams, Career Fairs of iniversity.ac/. Activate your 'e-Suv	sity.ac/ ce and Comm mmer Session . B.Com. (A. a etc., click on 'EAS	herce (540) n 2020 event. and F.)-Sem Vi SY link in your	'l [2C00456] 'e-Suvidha' acco	unt on		
	PRN:	Eligi	ibility Status:	Examination form 084483		Division/Section	ion: R	oll No.:	1	
20170	016400843172		Eligible		II	А		63	Aashna	
Instruction	Medium:			-		Nationality:	India			
				Student's Perso	onal Informati	on				
Student's Name: KHATRI AASHNA DAWOOD Mother's Name: SHAMIM Gender: Female										
Name in Vernacular Language:खत्री आशना दाऊद										
Address: 5	55, Jose Nagar Mo	ohili Village, S	Sakinaka							
City: Mumb	City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072									
Telephone	no.:			obile no: 919594499344			Email : a.kha	tri08@live.c	om	
DOB: May 26, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506941 (Status: Pass)									506941 (Status: Pass)	
	appearance type				··· · · · ·					
Paper Deta		ise select Par	per details which	you want to appear (UA -	- University P	ssessment, CP	A - College As	sessment)		
SN F	Paper Code 85601	Financial Acc		Paper Name				Th-UA [] ;T	AM - AT	
2		Cost Account	•					Th-UA[];T		
3		Financial Ma	0					Th-UA[];T		
4			Indirect Taxes III))				Th-UA[];T		
5			Paper III (Indian E					Th-UA [] ;T		
6 U		Project Work						Pw-UA [] ;F		
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	ontroller of Exami							Place	e: Vidyavihar	
I request po declare tha have gone	permission to pres at all statement m through the sylla	sent myself for hade in this ap abus and the li	oplication are true list of books prese	amination. I have remitted e, complete and correct to cribed for the examination	the best of m for which I a	ny knowledge a Im appearing. I	and belief. I		-	
other grour	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.									
Declaration	eclaration by Principal/HOD/Chairperson									
This form is responsibil	is carefully scrutir	nized by the C rectification of	College staff and I f the information.	by me. The information pr He/she is regular student						
Place:	ace:									
Date:				College Sta	aff Signature			Seal and Si Principal/H0	ignature of OD/Chairperson	

		B.Com. (A		S.							
	To explo	re your personaliz	ed Job Opportunities, Co http://mum.digitaluniv	mpetitive Exams, Career Fairs rersity.ac/. Activate your 'e-Su	etc., click on 'EAs vidha' account an	SY' link in your 'e-Suv d login today!	vidha' accour	nt on			
	RN: 400843214	_	bility Status: rovisional	Examination forn 084484	-	Division/Section: B		ll No.: 139	Daid		
Instruction Me						Nationality:	India				
				Student's Perso	nal Informati		Inula				
Student's Nar	me [.] VAID D	IPALI NILES	н	Siddenits i erst		Mother's Name: Pl	NA		Gender: Female		
	Name in Vernacular Language:DIPALI										
	Address: Above SIngh Electric, Near Tapadia Complex Station Road, Jugsalai										
City: Jamshedpur, Taluka: East Singhbhum, District: Pashchim Singhbhum, State: Jharkhand, PIN: 831006											
Telephone no											
DOB: Oct 06,	DOB: Oct 06, 1998 Category: Open Physically Handicap: No										
Previous Late	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0507007 (Status: Pass)										
Exam form ap	pearance type	e: Fresher	· •		-1		I				
Paper Details	: Plea	ase select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Ass	essment)			
SN Pap	oer Code			Paper Name					AM - AT		
1 8	35601	Financial Acc	counting VII				Т	ĥ-UA [] ;Th	-CA[]		
2 8	35602	Cost Account	ting IV				Т	ĥ-UA [] ;Th	-CA[]		
3 8	35603	Financial Ma	nagement III				Т	ĥ-UA [] ;Th	-CA[]		
4 8	35604	Taxation V (I	ndirect Taxes III)				Т	ĥ-UA [] ;Th	-CA[]		
5 8	35607	Economics P	aper III (Indian Eco	onomy)			Т	ĥ-UA [] ;Th	-CA[]		
6 UA_	FFSVI.8	Project Work	Ш				P	Pw-UA[];Pv	v-CA []		
Convocation	Fee		Exam Form Late I	ee	Exam Form	Super Late Fee		Examinatior	n Fees		
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Venue Prefer	,	,									
	roller of Exami										
-		-	r the ensuing exam	ination. I have remitted	l the prescrib	ed fee for the same	l herehv	Place:	Vidyavihar		
declare that a	Il statement m	ade in this ap	plication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:			
				bed for the examination or day fixed for universi							
other ground.	I understand			on being found false or							
cancelled or rejected. Student's Signature											
Declaration b	Declaration by Principal/HOD/Chairperson										
responsibility	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:				_							
Date:	ate: College Staff Signature Principal/HOD/Chairperson										

A Contraction		To explo		S. K. Somai Application Fo A.and F.)(with Cre	Iniversity of Mun http://mum.digitalu iya College of Arts, Sc orm for Examination of edits)-Regular-Rev16- Competitive Exams, Career I university.ac/. Activate your	niversity.ac/ cience and Comr ^c Summer Sessio .T.Y. B.Com. (A.	merce (540) on 2020 event. and F.)-Sem VI [20	C00456] Suvidha' accou	unt on	
	PR			ibility Status:	Examination 08448	form No.:	Division/Section:	R	oll No.:	Nayawika
20)170164(00843311	Р	rovisional			A		9	Van
Instruc	ction Med	lium:					Nationality:	India		
					Student's P	ersonal Informat	lion			
Student's Name: CHAKRABORTY NAYANIKA CHANDRANATH Mother's Name: REEMA Gender: Female										
Name in Vernacular Language:नयनिका										
Address: F-14 CENTRAL COMPLEX KHOPAT THANE WEST F-14 CENTRAL COMPLEX HANS NAGAR NEAR S.T. WORKSHOP										
City: TI	HANE, T	aluka: Than	e, District: Th	ane, State: Maha	arashtra, PIN: 400601					
Teleph	Telephone no.: Mobile no: 919819656199 Email : nayanikachakraborty2@gmail.com									
DOB: N	DOB: May 03, 1999 Category: Open Physically Handicap: No									
Previou	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506888 (Status: Pass)									06888 (Status: Pass)
Exam form appearance type: Fresher										
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN	•	er Code			Paper Na	me				AM - AT
1		5601	Financial Acc						Th-UA [] ;Th-	
2		5602	Cost Accoun	•					Th-UA [] ;Th-	
3		5603	Financial Ma	•					Th-UA [] ;Th-	
4 5		5604 5607		Indirect Taxes III) Paper III (Indian E					Th-UA [] ;Th- Th-UA [] ;Th-	
6		FSVI.8	Project Work						Pw-UA [] ;Pw	
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l reque declare have g reques other g	est permis e that all gone throust for any ground. I	statement m ugh the sylla special cond understand	sent myself fo nade in this ap abus and the l cession such	oplication are true list of books pres as change in tim	amination. I have remi e, complete and correc cribed for the examina e or day fixed for unive ation being found false	ct to the best of r ation for which I a ersity Examination	my knowledge and am appearing. I sha on etc. on religious	belief. I all not or any	Place: Date:	Vidyavihar
cancell	lled or rej	ected.							St	udent's Signature
This fo respon	orm is car	refully scrutir of fulfillment/r	ectification of	College staff and	by me. The informatio He/she is regular stud					e. I also undertake the ance and practical
Place:										
Date:					College	e Staff Signature			Seal and Sigr Principal/HOI	nature of D/Chairperson

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	PR			bility Status:	Examination forr 084486		Division/Section:	Roll N	lo.:	· Jen .
20	01701640	00843527		Eligible			В	123	3	LASIAN .
Instruc	ction Med	lium:					Nationality:	India		
					Student's Perse	onal Informati	on			
Studer	nt's Name	e: SHAH	YASHVI JAYI	ESH			Mother's Name: R	UPA	C	Gender: Female
Name	Name in Vernacular Language:યશ્વી શાફ									
Addres	Address: 1501 Rajyog Residency RP road Mulund (w) Mumbai-80									
City: N	City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400080									
Telepł	none no.:			Mob	ile no: 918879990001		Emai	il : yashvisha	ah0420@g	gmail.com
DOB:	DOB: Jan 04, 2000 Category: Open Physically Handicap: No									
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506992 (Status: Pass)									
Exam	Exam form appearance type: Fresher									
Paper	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN		r Code			Paper Name					AM - AT
1		601	Financial Acc	0				Th-l	UA [] ;Th-	CA[]
2		602	Cost Accoun	•					UA [] ;Th-	
3			Financial Ma	-					UA [] ;Th-	
4		604		ndirect Taxes III)					UA [] ;Th-	
5		607		Paper III (Indian Eco	onomy)				UA [] ;Th-	
6		FSVI.8	Project Work	1		Г Г	Current etc. Fee		UA[];Pw	
	Statemen			Exam Form Late F	-ee	Exam Form	Super Late Fee	EX	amination	Fees
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Payme	ent Detail	s: A	Amount Recei	ived:	Col	lege Receipt	No. and Date:			
DD No	D:	•		MICR No:		DD Date:		Bar	nk:	
Center	r Preferei	nce (Code/N	ame):					·		
Venue	Preferer	nce (Code/N	ame):							
To, Th	e Contro	ller of Exami	ination,						Place:	Vidyavihar
declar	e that all	statement m	ade in this ap	plication are true, o	ination. I have remitted complete and correct to bed for the examination	the best of n	ny knowledge and be	elief. I	Date:	
reques	st for any ground. I	special conductor	cession such	as change in time o	or day fixed for universion being found false or	ty Examinatio	n etc. on religious o	r any		
cance	cancelled or rejected. Student's Signature									
Declar	ration by	Principal/HC	D/Chairperso	on						
respor	nsibility o	f fulfillment/r	ectification of		me. The information p e/she is regular studen					
Place:					_					
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

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				http://mum.digitalunive							
	(A)		S. K. Somai	ya College of Arts, Scie	nce and Comm	nerce (540)			200		
0	/		Application Fo	rm for Examination of S	ummer Sessio	n 2020 event.					
		B.Com	. (A.and F.)(with Cre	edits)-Regular-Rev16-T.	Y. B.Com. (A.	and F.)-Sem VI [2C(00456]				
	To explo		. ,.	Competitive Exams, Career Fail		, .	vidha' accour	nt on			
	PRN:		ligibility Status:	Examination for 084487	rm No.:	Division/Section:	Ro	ll No.:	\bigcirc		
20170	16400843535		Eligible			В	1	101	A constants		
Instruction I	Medium:			_ !		Nationality:	India				
				Student's Per	sonal Informati	ion					
Student's N	Student's Name: PATEL HARSHITA KARMASHI Mother's Name: LADHI Gender: Female										
Name in Vernacular Language:पटेल ह र्षि ता करमशी											
Address: ss	Address: ss-3 room no. 816 sector 1										
City: KOPE	R KHAIRANE, T	Taluka: Tha	ane, District: Thane,	State: Maharashtra, Pli	N: 400709						
Telephone				obile no: 917208675884			il : harshit	ta.patel277@	⊉gmail.com		
DOB: Jul 27, 1999 Category: Open Physically Handicap: No											
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506970 (Status: Pass)											
	appearance type				• • • • • • • • • • • • • • • •						
Paper Deta		JSE SEIECT H	Paper details which	you want to appear (U/		Assessment, CA - Co	illege Ass	essment)	^ A A T		
SN P	Paper Code 85601	Financial	Accounting VII	Paper Name	3			[h-UA [] ;Th-	AM - AT		
2	85602	Cost Acco						[h-UA [] ;Th			
3	85603		Management III					[h-UA [] ;Th-			
4	85604		V (Indirect Taxes III)					[h-UA [] ;Th			
5	85607		s Paper III (Indian E					[];Th•			
	JA_FFSVI.8	Project Wo						Pw-UA [] ;Pv			
Convocatio	on Fee		Exam Form Late	e Fee	Exam Form	Super Late Fee	'T	Examination			
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	ference (Code/National formation of the fertile of							Diagon	\ /		
		•	f for the ensuing exa	amination. I have remitte	ed the prescrib	ed fee for the same.	l hereby	Place:	Vidyavihar		
declare that	at all statement m	nade in this	s application are true	e, complete and correct	to the best of n	ny knowledge and b	elief. I	Date:			
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other groun	nd. I understand			ation being found false c							
cancelled o	cancelled or rejected. Student's Signature										
Declaration	n by Principal/HC	D/Chairpe	rson					!			
responsibili	lity of fulfillment/r	rectification		by me. The information He/she is regular studer							
Place:	ace:										
Date:											

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S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] Source personalized Job Opportunities, competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on 'http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status: Examination form No.: 084488 Division/Section: Roll No.: 2017016400843597 Eligible IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Constant of the second									
Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on "EASY" link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status: Examination form No.: 084488 Division/Section: Roll No.: 2017016400843597 Eligible IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Crange									
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To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status: Examination form No.: 084488 Division/Section: Roll No.: 2017016400843597 Eligible Image: Im	Crued.									
PRN:Eligibility Status:Examination form No.: 084488Division/Section:Roll No.:2017016400843597EligibleIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	(and the second									
PRN:Eligibility Status:084488Division/Section:Roll No.:2017016400843597EligibleIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	(July)									
2017016400843597 Eligible IIIIIIII B B 107										
nstruction Medium: Nationality: India										
Instruction Medium: Nationality: India										
Student's Personal Information										
Student's Name: PRAJAPATI PRINCE PRASIDDH Mother's Name: MANJUDEVI Gender:	nder: Male									
Name in Vernacular Language:प्रजापती प्रिन्स प्रसिद्ध										
Address: ROOM NO 42 JOSENAGAR MOHILLI VILLAGE SAKINAKA MUMBAI JOSE NAGAR										
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072										
Telephone no.: Mobile no: 918689911550 Email : princepraja0@gmail.com	om									
DOB: May 03, 2000 Category: Reserved (OBC) Physically Handicap: No										
revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506976 (Status: Pass)										
Exam form appearance type: Fresher										
Paper Code Paper Name AM - AT 85601 Financial Accounting VII Th-UA [];Th-CA []										
1 85601 Financial Accounting VII Th-UA [];Th-CA [] 2 85602 Cost Accounting IV Th-UA [];Th-CA []										
2 05002 00st Accounting W 1100 (1), 1100 (1) 3 85603 Financial Management III Th-UA [];Th-CA []										
4 85604 Taxation V (Indirect Taxes III) Th-UA [];Th-CA []										
5 85607 Economics Paper III (Indian Economy) Th-UA [];Th-CA []										
6 UA_FFSVI.8 Project Work II Pw-UA [] ;Pw-CA []										
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees	es									
Mark Statement Fee Total:										
Payment Details: Amount Received: College Receipt No. and Date:										
Payment Details: Amount Received: College Receipt No. and Date: DD No: MICR No: DD Date: Bank:										
Center Preference (Code/Name):										
Venue Preference (Code/Name):										
	Vidyavihar									
I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby										
declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not										
request for any special concession such as change in time or day fixed for university Examination etc. on religious or any										
other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.										
Student's Signature										
Declaration by Principal/HOD/Chairperson										
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:										
ate: College Staff Signature Principal/HOD/Chairperson										

	A.									
		To explo		zed Job Opportunities, C	dits)-Regular-Rev16- competitive Exams, Career F liversity.ac/. Activate your '	airs etc., click on 'EA	SY' link in your 'e-S	:00456] uvidha' accou	unt on	
20	PR 170164(N:)0843601	Elig	ibility Status: Eligible	Examination 08448	9	Division/Section: A	R	oll No.: 58	Skatariyal.
Instruct	tion Med	ium [.]		0			Nationality:	India		
					Student's P	ersonal Informat	,			
Student's Name: KATARIYA SHIVANI KISHOR Mother's Name: MEENA Gender: Female										
Name i	n Verna	cular Langua	age:કટારીયા (શેવાની કિશોર						
					E-2 , BETURKAR PA	DA KAI YAN (W)			
					arashtra, PIN: 42130		/			
	one no.:	,	,	-	bile no: 9176661173		Em	ail : shivai	nikatariya90(Dgmail.com
DOB: N	Telephone no.: Mobile no: 917666117364 Email : shivanikatariya90@gmail.com DOB: May 10, 1999 Category: Open Physically Handicap: No									
Previou	us Lates	Examinatio	n Details: Se	m IV(Regular-Rev	16)	Exam Ever	t: Apr-2019		Seat No: 05	06936 (Status: Pass)
Exam f	kam form appearance type: Fresher									
Paper I	Details:	Plea	ase select Pa	per details which	you want to appear (UA - University	Assessment,CA - C	ollege As	sessment)	
SN	Paper Code Paper Name AM - AT									
	1 85601 Financial Accounting VII Th-UA [];Th-CA []									
2		602	Cost Accour	0					Th-UA [] ;Th	
3		603		anagement III					Th-UA [] ;Th	
4 5		604 607	```	Indirect Taxes III)					Th-UA [] ;Th	
6		FSVI.8	Project Worl	Paper III (Indian E	conomy)				Th-UA [] ;Th Pw-UA [] ;P\	
-	cation Fe			Exam Form Late	Fee	Exam Form	Super Late Fee		Examination	
	tatemen	-		Total:						
Payme	nt Detail	s: /	Amount Rece	1	1	College Receipt	No. and Date:			
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		nce (Code/N	,							
		nce (Code/N								
		ller of Exami							Place:	Vidyavihar
declare	that all	statement m	ade in this a	pplication are true	mination. I have remi , complete and correc ribed for the examina	t to the best of r	ny knowledge and l	belief. I	Date:	
request	t for any	special con	cession such	as change in time	or day fixed for unive	ersity Examination	on etc. on religious	or any		
	other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. Student's Signature									
Declaration by Principal/HOD/Chairperson										
respon	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place:					_					
Date:	Date: College Staff Signature Principal/HOD/Chairperson									

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	PR	N:		bility Status:	Examination form 084490	n No.:	Division/Section:	Roll N	-	Visit: Shake
2	0170164	00843624		Eligible			В	122	2	
Instru	ction Med	lium:					Nationality:	India		
					Student's Perso	onal Informati	-			
	nt's Name						Mother's Name: M	ANISHA	C	Gender: Female
Name	in Verna	cular Langua	age:શાહ વિરતિ	તે જીગ્નેશ						
Addre	ss: 202 v	almiki bldg p	anchrishi soo	ciety above samart	n nursing home					
City: c	lombivli, ⁻	Taluka: Kaly	an, District: T	hane, State: Maha	rashtra, PIN: 421201					
Telep	hone no.:			Mob	ile no: 917303582658		Ema	il : virushah2	2312@yah	oo.com
DOB:	Mar 23, 1	999	Ca	tegory: Open		Physically	Handicap: No			
Previo	ous Lates	t Examinatio	n Details: Se	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	at No: 050)6991 (Status: Pass)
	form appearance type: Fresher									
	Details:		ase select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assess	sment)	
SN		per Code Paper Name AM - AT								
1		85601 Financial Accounting VII Th-UA [];Th-CA [] 85602 Cost Accounting IV Th-UA []:Th-UA []								
2		85602 Cost Accounting IV Th-UA [];Th-CA [] 85603 Financial Management III Th-UA [];Th-CA []								
3		604		Indirect Taxes III)					UA[];Th-	
4 5		607		Paper III (Indian Ec	000m)()				UA [] ;Th- UA [] ;Th-	
6		FSVI.8	Project Work		onomy)				UA[];Pw	
-	cation Fe			Exam Form Late	Fee	Exam Form	Super Late Fee		amination	
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Paym	ent Detai	s: /	Amount Rece	ived:	Col	lege Receipt	No. and Date:			
DD No	D:			MICR No:		DD Date:		Ban	nk:	
		nce (Code/N	/							
		nce (Code/N	-							
		ller of Exami							Place:	Vidyavihar
declar	e that all	statement m	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examination	the best of n	ny knowledge and b	elief. I	Date:	
reque other	st for any ground. I	special con understand	cession such	as change in time	or day fixed for universi on being found false or	ty Examinatio	n etc. on religious o	r any		
cance	cancelled or rejected. Student's Signature									
Decla	Declaration by Principal/HOD/Chairperson									
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place					_					
Date:	Date: College Staff Signature Principal/HOD/Chairperson									

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	PRN: 6400843752	_	bility Status: Eligible	Examination forn 084491	-	Division/Section: B	Roll N	-	O join	
Instruction N	/ledium:		0			Nationality:	India			
				Student's Perso	onal Informati					
Student's Name: SANGHAVI PRIYANKA MANGILAL Mother's Name: MADHU Gender: Female										
Name in Vernacular Language:Priyanka										
Address: 203,Omkar society Teli gali ,tembhi naka Thane										
City: Thane	City: Thane, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400601									
Telephone r	10.:		Mob	ile no: 917718914057		Emai	il : rj031019	92@gmail.	.com	
DOB: Aug 1	DOB: Aug 14, 1999 Category: Open Physically Handicap: No									
Previous La	test Examinatio	n Details: Ser	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	eat No: 050	06980 (Status: Pass)	
Exam form	appearance typ	e: Fresher								
Paper Detai										
SN Pa	aper Code			Paper Name					AM - AT	
1	85601 Financial Accounting VII Th-UA [];Th-CA []									
2	2 85602 Cost Accounting IV Th-UA [];Th-CA []									
3	85603	Financial Ma	nagement III				Th-	UA[];Th-	CA[]	
4	85604	Taxation V (I	ndirect Taxes III)				Th-	UA[];Th-	CA[]	
5	85607	Economics P	Paper III (Indian Eco	onomy)			Th-	UA[];Th-	CA[]	
6 U/	A_FFSVI.8	Project Work	: 11				Pw	-UA [] ;Pw	-CA[]	
Convocation	n Fee		Exam Form Late I	ee	Exam Form	Super Late Fee	Ex	kamination	Fees	
Mark Staten	nent Fee		Total:							
Payment De	ataile:	Amount Recei	ived:	Cal	lege Receipt	No. and Date:				
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-	erence (Code/N	ame).			DD Date.		Da	IIK.		
	erence (Code/N	,								
	ntroller of Exam							Place:	Vidyavihar	
declare that	all statement m	ade in this ap	plication are true,	ination. I have remitted complete and correct to bed for the examinatior	the best of n	ny knowledge and be	elief. I	Date:	Vidyavinai	
request for a other ground	any special cond. I understand	cession such	as change in time o	or day fixed for universi on being found false or	ty Examinatio	on etc. on religious o	r any			
cancelled or rejected. Student's Signature										
Declaration	by Principal/HC	D/Chairperso	on							
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:				_						
Date:	Date: College Staff Signature Principal/HOD/Chairperson									

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	PRN:	Eliç	gibility Status:	Examination form 084492	n No.:	Division/Section:	Rol	ll No.:	
20170 ⁻	16400843791		Eligible			A		67	- Dkubal
Instruction I	Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Student's N	lame: KUBAL	L SONAL MA	NOHAR			Mother's Name: M	ILAN	C	Gender: Female
Name in Ve	ernacular Langua	age:कुबल सो	नल मनोहर						
Address: JA	AY AMBE SOCI	ETY,JAY MA	ALHAR NAGAR. KI	HANDOBA TEKDI,GOLI	BAR ROAD C	HATKOPAR WEST			
City: MUME	BAI, Taluka: Mur	nbai, District	t: Mumbai City, Sta	ate: Maharashtra, PIN: 40	00086				
Telephone	no.:		Мо	bile no: 919969473393		Emai	l : sonalki	ubal1999@g	jmail.com
DOB: Sep (01, 1999	Ca	ategory: Open		Physically	Handicap: No			
Previous La	evious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506945 (Status: Pass)								
	appearance type								
Paper Deta									
	Paper Code Paper Name AM - AT								
1 85601 Financial Accounting VII Th-UA [];Th-CA []									
2	85602 85603	Cost Accour	lanagement III					h-UA [] ;Th-0	
4	85604		(Indirect Taxes III)					`h-UA [] ;Th-(`h-UA [] ;Th-(
5	85607		Paper III (Indian Ed					Th-UA[];Th-0	
	JA_FFSVI.8	Project Wor						Pw-UA[];Pw	
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I request pe declare that have gone	ermission to pres at all statement m through the sylla	sent myself for nade in this a abus and the	application are true, list of books presc	mination. I have remitted e, complete and correct to cribed for the examination e or day fixed for universi	o the best of m n for which I a	ny knowledge and be am appearing. I shall	elief. I not	Place: Date:	Vidyavihar
	nd. I understand			ation being found false or					
.								Stu	udent's Signature
This form is responsibili	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place:									
Date:	ate: College Staff Signature Principal/HOD/Chairperson								

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Instructio								Nationality:	India		
1100 0000	<u></u>					Student's Perso	onal Informati	,			
Student's	s Name	SURAN		NILESH				Mother's Nar	me: MANJU		Gender: Female
Name in Vernacular Language:सुराणा प्रियल निलेश											
			•	aka kolshet rd, t	thane v	west					
			-			htra, PIN: 400607					
Telephor						no: 919833012779			Email : surar	napriyal17@	Dgmail.com
DOB: Jul		99	Cí	ategory: Open			Physically	Handicap: No	1		
Previous	s Latest	Examinatio	n Details: Sr	em IV(Regular-F	Rev16)		Exam Even	t: Apr-2019		Seat No:	0507001 (Status: Pass)
Exam for	form appearance type: Fresher										
Paper De	etails:	ils: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN	Paper Code Paper Name AM - AT										
1											
2			Cost Accou	0						Th-UA [] ;	
3				lanagement III						Th-UA [] ;	
4				(Indirect Taxes I	,					Th-UA [] ;	
5				Paper III (Indian		omy)				Th-UA[];	
6 Convoca	_		Project Wor	Exam Form L	ata Ea		Evon Form	Super Late Fe		Pw-UA []	
Mark Sta				Total:	alered	<u>e</u>	Examination		e		.001 Fees
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Payment	t Detail	s: /	Amount Rece	eived:		Col	lege Receipt	No. and Date:			
DD No:				MICR No:			DD Date:			Bank:	
Center P	referer	nce (Code/N	ame):								
		nce (Code/Na	,								
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	ound. Í u	understand t				day fixed for universit being found false or					Student's Signature
Declarati	Declaration by Principal/HOD/Chairperson										
This form responsi	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:											
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2017016	400843914	5	Eligible			A	6	60	Vikesh.	
Instruction Me	edium:					Nationality:	India			
	Student's Personal Information									
Student's Name: KHALE VIKESH VIJAY Mother's Name: VAIJAYANTI Gender: Male										
Name in Vern	acular Langua	age:KHALE V	IKESH VIJAY			÷				
Address: VEE	R SAMBHAJ	SOCIETY G	ANESH NAGAR G	HATKOPAR WEST, M	UMBAI					
City: MUMBA	l, Taluka: Kurl	a, District: Mu	imbai Suburban, S	ate: Maharashtra, PIN	: 400086					
Telephone no	.:		Mobi	le no: 918898218322		Emai	I: VIKESH	145K@GMA	IL.COM	
DOB: Nov 30,	1999	Cat	egory: Reserved (0	DBC)	Physically	Handicap: No				
Previous Late	st Examinatio	n Details: Ser	n IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	S	Seat No: 050	06938 (Status: Pass)	
Exam form ap	pearance type	e: Fresher								
Paper Details	: Plea	ase select Pap	per details which yo	ou want to appear (UA	- University A	Assessment,CA - Co	llege Asse	essment)		
SN Pap	er Code			Paper Name					AM - AT	
1 8	5601	Financial Acc	counting VII				Tł	n-UA [] ;Th-	CA[]	
2 8	2 85602 Cost Accounting IV Th-UA [];Th-CA []									
3 8	5603	Financial Ma	nagement III				Tł	n-UA[];Th-(CA[]	
4 8	5604	Taxation V (I	ndirect Taxes III)				Tł	n-UA[];Th-(CA[]	
5 8	5607	Economics P	aper III (Indian Eco	nomy)			Tł	n-UA [] ;Th-	CA[]	
6 UA_	FFSVI.8	Project Work	II				Pv	w-UA[];Pw	-CA[]	
Convocation I	ee		Exam Form Late F	ee	Exam Form	Super Late Fee	E	Examination	Fees	
Mark Stateme	nt Fee		Total:							
Payment Deta	ails: /	Amount Recei	ved:	Col	lege Receipt	No. and Date:				
DD No:	I		MICR No:		DD Date:		B	ank:		
Center Prefer	ence (Code/N	ame):								
Venue Prefere	ence (Code/N	ame):								
To, The Conti	oller of Exam	ination,						Place:	Vidyavihar	
declare that a	Il statement m	ade in this ap	plication are true, o	ination. I have remitted complete and correct to bed for the examination	the best of n	ny knowledge and be	elief. I	Date:		
request for an other ground.	y special cond I understand	cession such a	as change in time o	or day fixed for universion being found false or	ty Examinatio	on etc. on religious of	r any			
cancelled or rejected. Student's Signature										
Declaration by	/ Principal/HC	D/Chairperso	n							
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:				_						
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									

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	PRI	NI-	Eliai	ibility Status:	Examination for		Division/Section:	Bo	II No.:	
201)0843992	Ŭ,	Provisional	084495		B		103	(ch)
Instructio	on Med	ium:			<u> </u>		Nationality:	India		
					Student's Per	sonal Informati	on			
Student's	s Name	: PATIL	PRAJAKTA A	RJUN			Mother's Name: AS	SHA	(Gender: Female
Name in	Vernar	cular Langua	age:पाटील प्राउ	जक्ता अर्जुन					i	
Address: 696/31 shiv krupa society kamraj nagar, ghatkopar(E) mumbai-77										
					tate: Maharashtra, PIN	: 400077				
Telephor	elephone no.: Mobile no: 917039983567 Email : instituterajcomputer@gmail.com									
DOB: Se	эр 04, 1	999	Cat	tegory: Open		Physically	Handicap: No			
Previous	3 Latest	Examinatio	n Details: Ser	m IV(Regular-Rev1	16)	Exam Even	t: Apr-2019		Seat No: 05	06972 (Status: Pass)
Exam for	rm appearance type: Fresher									
Paper De	etails:	Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)								
SN	Paper	r Code			Paper Name)				AM - AT
1	85601 Financial Accounting VII Th-UA [];Th-CA []									
	2 85602 Cost Accounting IV Th-UA [];Th-CA []									
3			Financial Ma	-					[h-UA [] ;Th-	
4				Indirect Taxes III)					[h-UA [] ;Th	
5 6			Project Work	Paper III (Indian Ec	promy)				[h-UA [] ;Th-	
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Payment	t Detail	s: /	Amount Recei	ived:	Cr	ollege Receipt	No. and Date:			
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I request declare t have gor request f	t permis that all s ne throu for any s	statement m ugh the sylla special cond	sent myself for ade in this ap abus and the licession such	oplication are true, list of books prescri as change in time	nination. I have remitte complete and correct t ribed for the examinatio or day fixed for univers	to the best of n on for which I a sity Examinatio	ny knowledge and be am appearing. I shall on etc. on religious o	elief. I not r any	Place: Date:	Vidyavihar
other gro cancelled			that in the eve	ent of any informati	ion being found false o	or incorrect, my	candidature is liable	e to be		
Declarat	Student's Signature Student's Signature									
This form responsi	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place:										
Date:	Date: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									

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Instructio	on Medium:		_					Nationality:	India			
						Student's Pers	onal Informat ⁱ	,				
Student's	s Name:	FINHAS	ALI HUSE	NI GULABIWAL	A			Mother's Nan	ne: ASMA		G	ender: Male
Name in	Vernacular	Langua	ae:फिनहास	अली हुसेनी गुलार्ब	<u></u> बीवाला			<u> </u>				
		-	-	KISHAN KOLI M		MAJIWADA						
						htra, PIN: 400601						
	ne no.: 2538		,			e no: 919867017095			Email : finha	s17@gma	il.con	 ກ
	DOB: Oct 17, 1999 Category: Open Physically Handicap: No											
Previous	evious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506916 (Status: Pass)											
Exam for	m form appearance type: Fresher											
Paper De	etails:	Pleas	se select P	aper details whi	ich you	u want to appear (UA	- University /	Assessment, CA	۲ - College As	sessment	()	
SN	Paper Code Paper Name AM - AT											
1												
2 85602 Cost Accounting IV Th-UA [];Th-CA []												
3	85603			lanagement III						Th-UA [] ;		
4	85604			(Indirect Taxes	,					Th-UA [] ;		
5	85607			Paper III (Indiar	n Econ	Jomy)				Th-UA[];		
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IVIDIA Jua		;		10101.						<u> </u>		
Payment	t Details:	A	mount Rec	eived:		Co	llege Receipt	No. and Date:				
DD No:				MICR No:			DD Date:			Bank:		
Center P	Preference (C	Code/Na	ame):									
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l request declare th have gon	that all stater ne through th	n to prese ement ma the syllat	ent myself f ade in this a bus and the	application are to e list of books pre	true, con rescribe	nation. I have remitted omplete and correct to ed for the examinatio day fixed for univers	o the best of m on for which I a	ny knowledge a am appearing. I	and belief. I I shall not	y Dat		Vidyavihar
other gro		erstand th				n being found false or						
	Student's Signature											
This form responsil	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.											
Place:												
Date:	ate: College Staff Signature Principal/HOD/Chairperson											

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		i o expio	re your personaliz	ed Job Opportunities, Col http://mum.digitaluniv	mpetitive Exams, Career Fairs e ersity.ac/. Activate your 'e-Su	vidha' account an	d login today!	ridha' account on		
	PR 201701640		Eligi	bility Status: Eligible	Examination form 084497		Division/Section: A	Roll No 5	D.:	Contraction of the second
				Ligible				_		
Instru	iction Med	lium:			Ou de alte De se		Nationality:	India		
Church	with Niews	DUAX			Student's Perso	nal Informati	1	(07)		Denden Female
Student's Name: BHAYANI VRUDDHI MANOJ Mother's Name: JYOTI Gender: Female Name in Vernacular Language:vruddhi										
		· · ·	0							
				oad mulund west	te. Mahawaahtwa Dible	100000				
	City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080									
Telephone no.: 25686508 Mobile no: 919920312183 Email : vruddhibhayani@gmail.com										
	DOB: Aug 06, 1999 Category: Open Physically Handicap: No									
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506884 (Status: Pass)									
	Exam form appearance type: Fresher									
<u> </u>	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
	SN Paper Code Paper Name AM - AT									
	1 85601 Financial Accounting VII Th-UA [];Th-CA [] 2 85602 Cost Accounting IV									
	2 85602 Cost Accounting IV Th-UA [];Th-CA [] 2 85602 First side Management III Th-UA [];Th-CA []									
	3 85603 Financial Management III Th-UA [];Th-CA []									
4		604		ndirect Taxes III)					A[];Th-	
5		607		Paper III (Indian Eco	onomy)				A[];Th-	
6		FSVI.8	Project Work						JA [] ;Pw	
	ocation Fe			Exam Form Late F	ee	Exam Form	Super Late Fee	Exa	mination	Fees
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					complete and correct to				Date:	
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other	ground. I	understand			on being found false or					
cancelled or rejected. Student's Signature										
Declaration by Principal/HOD/Chairperson										
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
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Instruc	ction Med	lium:					Nationality:	India		
					Student's Pers	sonal Informati	ion			
Studer	nt's Name	e: THAKI	JR SWARA S	JURESH			Mother's Name: PF	RADNYA	. (Gender: Female
Name	in Verna	cular Langu;	age:ठाकूर स्वर	रा सुरेश						
Addre	ss: A-202	2,Shriram Sa	marth Appart	ment Chinchpada F	Road Taluka- Pen,Dist	trict- Raigad				
City: P	'en, Talu	ka: Pen, Dist	trict: Raigad,	State: Maharashtra	, PIN: 402107					
Teleph	hone no.:			Mobi	ile no: 917028697919		Emai	l : pradny	yathakur767@	@gmail.com
	Jun 30, 1			tegory: Reserved (C	,		Handicap: No			
				m IV(Regular-Rev1	6)	Exam Even	it: Apr-2019		Seat No: 050	07005 (Status: Pass)
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have g	gone thro	ough the sylla	abus and the I	list of books prescril	bed for the examinatio	on for which I a	am appearing. I shall	not		
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	lled or rej			,						tudent's Signature
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Dute.		College Staff Signature Seal and Signature of Principal/HOD/Chairperson								

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	PRN:		ibility Status:	Examination for		Division/Section		oll No.:	Dicebita M South	
2017	7016400844755	, i i i i i i i i i i i i i i i i i i i	Eligible	084499 		B		120		
Instructior	n Medium:			L		Nationality:	India			
				Student's Pers	sonal Informati	on				
Student's	Name: SHAH	NISHITA MUI	KESH			Mother's Name	: KINNARI	í	Gender: Female	
Name in Vernacular Language:शहा निशीता मुकेश										
	-	•	path road cross no	 o 3						
				arashtra, PIN: 421201						
Telephone				pile no: 919892627485		E	mail : muke	shnishita3@g	gmail.com	
DOB: Nov	v 09, 1999	Ca	tegory: Open		Physically	Handicap: No				
Previous	Latest Examinatic	on Details: Ser	m IV(Regular-Rev1	16)	Exam Even	t: Apr-2019		Seat No: 05	06989 (Status: Pass)	
	form appearance type: Fresher									
Paper De	tails: Ple:	ils: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)								
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1	85601 Financial Accounting VII Th-UA [];Th-CA []									
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Instruc	ction Med	lium:	_!		<u>I</u>		Nationality:	India		
					Student's Pers	sonal Informati	on			
Studer	nt's Name	e: SHAIK	H SADAF HI	DAYAT HUSSAIN			Mother's Nan	ne: AFROZ		Gender: Female
Name	in Verna	cular Langua	age:शैख़ सदप	फ हिदायत हुसैन	Ŧ					
Addres	ss: shri s	iddhivinayak	society b wir	ng flat no. 705 tilak	nagar chembur					
City: M	UMBAI,	Taluka: Kurl	a, District: M	umbai Suburban, ["]	State: Maharashtra, PIN	N: 400089				
Teleph	none no.:			Мо	bile no: 917045163207			Email : sada	fshaikh141999	9@gmail.com
DOB: (Oct 14, 1	999	Ca	tegory: Open		Physically	Handicap: No			
										06993 (Status: Pass)
Exam form appearance type: Fresher										
· ·	Details:	1	ase select Par	per details which y	you want to appear (UA		Assessment,CA	A - College As	sessment)	
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6			Project Work						Pw-UA [] ;Pv	
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To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.										
									St	tudent's Signature
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A A		То ехрю		S. K. Somai Application For A.and F.)(with Cre	http://mum.digitalunive http://mum.digitalunive iya College of Arts, Scien rrm for Examination of Scientific edits)-Regular-Rev16-T. Competitive Exams, Career Fair university.ac/. Activate your 'e-S	ersity.ac/ ence and Comm summer Session Y. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2	2C00456] ə-Suvidha' accor	unt on	
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Instruc	ction Med	dium:			_		Nationality:	India		
		·	······		Student's Per	sonal Informati	on	·	·	
Studer	nt's Name	e: GALA	HARSH HITE	ESH			Mother's Name	SARLA		Gender: Male
Name	in Verna	cular Langua	age:हर्ष							
Addres	ss: A 102	2 J M DARSI	HAN SHIV M	ANDIR ROAD RA	MNAGAR DOMBIVLI E	AST				
City: D	OMBIVL	I, Taluka: Ka	alyan, Distric	t: Thane, State: M	laharashtra, PIN: 42120	1				
Teleph	none no.:	·		Μα	obile no: 918082052764	·	E	.mail : harsh	ngala05@gn	nail.com
DOB: (Oct 05, 1	999	Ca	ategory: Open		Physically	Handicap: No			
Previo	us Lates	t Examinatio	n Details: Se	em IV(Regular-Rev	v16)	Exam Even	t: Apr-2019		Seat No: (0506907 (Status: Pass)
Exam form appearance type: Fresher										
Paper	Details:	Plea	ase select Pa	aper details which	you want to appear (UA	A - University A	Assessment,CA -	College As	sessment)	
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1		5601	Financial Ac						Th-UA [] ;T	
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other g	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.									
.		<u> </u>								Student's Signature
This fo respon	eclaration by Principal/HOD/Chairperson his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.									
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University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540)											
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Instructi	tion Med	lium:					Nationality:	India			
- · ·	·				Student's Pers	sonal Informati	-				
	t's Name		AR PRACHI M				Mother's Name: RE	EKHA	(Gender: Female	
			age:परमार प्राच								
			,	ety Agarkar Road I							
			an, District: T		arashtra, PIN: 421201		I				
•		2437068			bile no: 919920967017		I	l : parmar	rprachi26@g	jmail.com	
	lov 05, 1			tegory: Open			/ Handicap: No	<u> </u>			
									06968 (Status: Pass)		
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)											
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1		5601	Financial Acc			<u>, </u>			Th-UA [] ;Th-		
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3			Financial Ma	•					Th-UA [] ;Th-		
4		5604		Indirect Taxes III)					Th-UA [] ;Th-		
5	85	5607		Paper III (Indian Ec	conomy)				Th-UA [] ;Th-		
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request	t for any	special cond	cession such	as change in time	or day fixed for univers	sity Examinatio	on etc. on religious or	r any			
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Declara	tion by	Principal/HC	DD/Chairperso	on							
respons	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.										
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	To exp		S. K. Somaiya Application Forn Aand F.)(with Cred	http://mum.digitaluniver a College of Arts, Scien a for Examination of Su its)-Regular-Rev16-T.Y mpetitive Exams, Career Fairs rersity.ac/. Activate your 'e-Su	<u>sity.ac/</u> ce and Comm mmer Sessio . B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2C0	10456] ridha' account on		FANTASTIC		
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Instructior	n Medium:					Nationality:	India				
				Student's Perso	onal Informati	on					
Student's	Name: DHV	ANI NAVIN HA	RIYA			Mother's Name: Bl	NDU	G	ender: Female		
Name in V	/ernacular Lang	uage:DHVANI									
	-	-	ar Krupa, Kamatgh	ar road, near torant pov	ver office.						
				arashtra, PIN: 421305	,						
Telephone				ile no: 918888180884		Emai	il : dhvanihari	va1999@	amail.com		
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	-,		m IV(Regular-Rev1	6)	Exam Even	•	Sea	at No [.] 050	6920 (Status: Pass)		
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	Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
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1	85601	Financial Ac	counting VII	. apor raino			Th-U	IA [] ;Th-C			
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Venue Pre	eference (Code/	Name):									
To, The C	ontroller of Exa	mination,						Place:	Vidyavihar		
declare th	at all statement	made in this ap	oplication are true,	nination. I have remitted complete and correct to bed for the examination	the best of n	ny knowledge and be	elief. I	Date:			
request fo	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be										
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Declaratio	n by Principal/H	OD/Chairperso	on								
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Instructi	on Med	ium:						Nationality:	India			
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Student'	's Name	: KHICH	DA JINAL F	RAJESH				Mother's Name:	SONAL		G	ender: Female
Name in	verna	cular Langua	age:ખીચડા ૧	છનલ રાજેશ								
Address	s: A/10.	YOGESHW	AR KRUPA	JANARDHAN P	ARK. CH	S. LTD., RAGHL	JNATH NAGA	R, M. S. ROAD NO). 9 THAN	E WES	Т.	
				hane, State: Mał				.,				
Telepho			-,			919619039108		Err	ail : jiyabł	nanusha	ali1@gr	nail.com
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Previous	s Latest	Examinatio		em IV(Regular-R	ev16)		Exam Even	t: Apr-2019		Seat N	lo: 050	6942 (Status: Pass)
Exam fo	Exam form appearance type: Fresher											
Paper D	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)											
SN	Pape	r Code				Paper Name						AM - AT
1	85	601	Financial A	ccounting VII						Th-UA	[];Th-(CA[]
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3	85	603	Financial M	lanagement III						Th-UA	[];Th-(CA[]
4	85	604	Taxation V	(Indirect Taxes II	II)					Th-UA	[];Th-(CA[]
5	85	607	Economics	Paper III (Indian	Economy	')				Th-UA	[];Th-(CA[]
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		ller of Exami								F	Place:	Vidyavihar
declare	that all	statement m	ade in this a	application are tru	ue, comple	ete and correct t	o the best of m	ed fee for the same ny knowledge and	belief. I	/	Date:	
request other gro	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be											
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Instruc	ction Med	lium:					Nationality:	India			
					Student's Pers	onal Informati	-				
	nt's Name		A BHAVI RAJ	ESH			Mother's Name: A	LKA	0	Gender: Female	
		cular Langu	-								
Addre	ss: 201 K	ASTURI BU	ILDING TILA	K ROAD NEAR G	OMANTAK HOTEL						
City: D	OMBIVL	I, Taluka: Ka	alyan, District:	: Thane, State: Mah	arashtra, PIN: 421201		I				
Teleph	none no.:				le no: 918080872731		Ema	il : BHAVIME	EHTA13@	YAHOO.COM	
-	Feb 13, 1			tegory: Open			Handicap: No				
)6953 (Status: Pass)	
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)											
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6		FSVI.8	Project Work		(inormy)				UA[];Pw		
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Place:					_						
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	To explo		S. K. Somaiya Application Form A.and F.)(with Credi	iversity of Mumba http://mum.digitaluniver a College of Arts, Scien n for Examination of Su lits)-Regular-Rev16-T.Y ompetitive Exams, Career Fairs versity.ac/. Activate your 'e-Su	rsity.ac/ ace and Comm ammer Session 7. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2C0)0456] vidha' accour	nt on			
						d login today!	т <u>т</u>				
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201701	16400845171		Eligible			В		85	1		
Instruction I	Medium:					Nationality:	India				
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Student's N	Jame: MEHT/	A HASTI MAN	NOJ			Mother's Name: Cl	HETNA	(Gender: Female		
Name in Ve	ernacular Langua	age:मेहता हरू	ती मनोज								
Address: 40	03/B, Arogya Bh	uvan, Room	No-5, Near Diamor	nd Garden, Chembur							
City: Mumb	bai, Taluka: Kurla	a, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400071						
Telephone	no.:			bile no: 919167936906		Emai	il : khusha	alimehta37@	gmail.com		
DOB: Jul 14			ategory: Open			Handicap: No					
									06955 (Status: Pass)		
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)											
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2	85602	Cost Account	•					「h-UA [] ;Th- 「h-UA [] ;Th-			
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5	85607		Paper III (Indian Eco	 onomv)				Гh-UA [] ;Th-			
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Declaration	n by Principal/HO)D/Chairpers						、			
This form is responsibili	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:											
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Instruc	tion Med	ium:						Nationality:	India			
						Student's Pers	onal Informati	on				
Studen	it's Name	e: CHANI	DALIYA VID	HI MAHENDRA	۱			Mother's Name:	PUSHPA		G	ender: Female
Name i	in Verna	cular Langua	age:चंडालिया	विधी महेंद्र								
Addres	s: GURI	JVILASAM (COOP HSG	ROOM NO 304	A WIN	IG ASHOK NAGAR	BHANDUP(EA	(ST)				
City: M	UMBAI,	Taluka: Kurl	a, District: M	lumbai Suburba	an, Stat	te: Maharashtra, PIN	I: 400042	,				
Teleph	one no.:				Mobile	no: 919833537907		Er	nail : vidhij	ain18.vj	@gma	il.com
DOB: J	lan 18, 2	000	C	ategory: Open			Physically	Handicap: No				
Previou	us Lates	Examinatio	n Details: Se	em IV(Regular-I	Rev16)		Exam Even	t: Apr-2019		Seat N	lo: 050	6889 (Status: Pass)
Exam f	Exam form appearance type: Fresher											
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SN		r Code				Paper Name						AM - AT
1		601		ccounting VII						Th-UA [-	
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3				anagement III						Th-UA [-	
4		604		(Indirect Taxes	,					Th-UA [-	
5 6		607 FSVI.8		Paper III (India	n Econ	omy)				Th-UA [-	
	cation Fe		Project Wo	Exam Form L	ato Eo		Exom Form	Super Late Fee		Pw-UA Examir		
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		nce (Code/N										
		ller of Exami									lace:	Vidyavihar
declare	e that all	statement m	ade in this a	application are t	rue, co	ation. I have remitte mplete and correct to of for the examination	o the best of m	ny knowledge and	belief. I		ate:	
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cancell	led or rej	ected.		-		_	_				Stu	ident's Signature
Declara	ation by	Principal/HC	D/Chairpers	son								
respon	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.											
Place:												
Date:	ate: College Staff Signature Principal/HOD/Chairperson											

				S. K. Somaiya Application Form .and F.)(with Credit	versity of Mumb http://mum.digitaluniv College of Arts, Scie for Examination of S s)-Regular-Rev16-T.	ersity.ac/ nce and Comm ummer Session Y. B.Com. (A. a	erce (540) n 2020 event. and F.)-Sem VI [2C0	•				
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Instruction	on Med	ium:	<u>.</u>				Nationality:	India				
Student'	o Nom		Y SANNIDHI		Student's Per	sonal Informati	on Mother's Name: St		0	Gender: Female		
			ige:ಶೆಟ್ಟಿಸನ್ನಿಧಿರ				womer's Name. St	JUNA				
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City: TH	ANE, T	aluka: Than	e, District: Tha	ane, State: Mahara	shtra, PIN: 400615							
Telepho					e no: 919594450676			l : sudhara	vishetty123	@gmail.com		
DOB: Se				egory: Open		Physically	Handicap: No					
				n IV(Regular-Rev16	6)	Exam Even	t: Apr-2019	S	eat No: 050	6997 (Status: Pass)		
	Exam form appearance type: Fresher Paper Details Paper Det											
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		601	Financial Acc	ounting \/ll	Paper Name	9		Ть		AM - AT		
1		601 602	Financial Acc						-UA [] ;Th-(
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6		FSVI.8	Project Work	• •	noniy)				-UA[];Th-			
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Center F	Preferer	nce (Code/N	ame):									
Venue F	Preferer	nce (Code/N	ame):									
To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.												
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This forr respons	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.											
Place:					-							
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson											

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20	PR 01701640	N: 00845565	Ŭ,	bility Status: Eligible		084509		Division/Section B	on: R	oll No.: 144		Maitri
Instruc	ction Med	lium:		-				Nationality:	India			
						Student's Perso	onal Informati	on				
Studer	nt's Name	e: VORA	MAITRI MAN	ISH				Mother's Nam	ne: RITA		G	Gender: Female
Name	in Verna	cular Langua	age:वोरा मैत्री	 मनीष								
Addres				G CAMA CROS	S LAN	NE GHATKOPAR (W	(EST)					
						te: Maharashtra, PIN:	,					
,		25133740			-	e no: 917045793193			Email : vorar	naitri19@	gmail	l.com
DOB:	Jun 19, 1	999	Cat	tegory: Open			Physically	Handicap: No			-	
Previo	us Lates	t Examinatio	n Details: Ser	m IV(Regular-R	(ev16))	Exam Even	t: Apr-2019		Seat No	: 050	7012 (Status: Pass)
Exam form appearance type: Fresher												
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SN		er Code				Paper Name						AM - AT
1			Financial Acc							Th-UA []		
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To, The Controller of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. Place: Vidyavihar								Vidyavihar				
cancer		ecieu.									Stu	udent's Signature
This for respor	orm is car nsibility of	refully scrutir f fulfillment/r	ectification of	College staff and		ne. The information p she is regular student						
Place:												
Date:						College St	aff Signature			Seal and Principal/		ature of /Chairperson

	H A	T- code	•	S. K. Soma Application Fo A.and F.)(with Cri	http://mum.digit http://mum.digit iya College of Arts, rrm for Examination edits)-Regular-Rev	taluniversi Scienc of Sum 16-T.Y.	i <u>ty.ac/</u> e and Comm nmer Session B.Com. (A. a	erce (540) n 2020 event. and F.)-Sem VI				
		i o expio	re your personali	zed Job Opportunities, http://mum.digital	Competitive Exams, Care iniversity.ac/. Activate yo	er ⊢airs e our 'e-Suv	idha' account an	d login today!	'e-Suvidha' acco	ount on		
	PR	N:	Elig	ibility Status:	Examinatio	on form 4510	No.:	Division/Section	on: F	Roll No.:		ou
20	1701640	0845847		Eligible				В		76		
Instruct	ion Med	ium:						Nationality:	India			
					Student's	s Perso	nal Informati	on				
Student	t's Name	e: Lakha	NI MEET JI	GNESH				Mother's Nan	ne: NISHA		G	Gender: Male
Name i	n Verna	cular Langua	age:લાખાણી	મીત જીએશ								
Addres	s: B/8,J/	AI BANDHU	90 FEET RC	DAD GHATKOPA	R EAST							
					ate: Maharashtra, F	PIN: 400	0077					
-		25062403			obile no: 91996751				Email : nisha	a.nisha.la	akhani(@gmail.com
DOB: C	Oct 07, 1	999	Ca	ategory: Open			Physically	Handicap: No				
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506										6946 (Status: Pass)		
Exam form appearance type: Fresher												
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)												
SN	Pape	r Code			Paper N	Name						AM - AT
1	85	601	Financial Ac	counting VII						Th-UA [[];Th-(CA[]
2	85	602	Cost Accour	nting IV						Th-UA [
3		603		anagement III						Th-UA [
4		604		Indirect Taxes III						Th-UA [
5		607		Paper III (Indian I	Economy)					Th-UA [
6		FSVI.8	Project Wor							Pw-UA		
	ation Fe	-		Exam Form Lat	e Fee		Exam Form	Super Late Fee	9	Exami	nation	Fees
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Center	Preferer	nce (Code/N	lame):	1		I				1		
Venue	Preferer	nce (Code/N	ame):									
To, The	e Contro	ller of Exam	ination,							Р	lace:	Vidyavihar
declare	that all	statement m	nade in this a	pplication are tru	amination. I have re e, complete and cor cribed for the exam	rrect to	the best of m	iy knowledge a	and belief. I)ate:	
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cancein	eu or rej	ecieu.									Stu	udent's Signature
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respons	sibility o	f fulfillment/r	ectification o		by me. The informa He/she is regular s							I also undertake the nce and practical
Place:												
Date: College Staff Signature Principal/HOD/Chairperson												

	The second se	Το εχρίο	•	S. K. Son Application A.and F.)(with (naiya (Form f Credits	Versity of Mumba http://mum.digitaluniver College of Arts, Scien for Examination of Su s)-Regular-Rev16-T.Y petitive Exams, Career Fairs rsty.ac/. Activate your 'e-Su	r <u>sity.ac/</u> ice and Comm immer Sessioi ′. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem V	[2C00456] 'e-Suvidha' acco	punt on		
	PR			ibility Status:	T	Examination form 084511		Division/Section	on: R	oll No.:		P. 1
20	1701640	0846127		Eligible			111	А		57		Priyanka
Instruct	tion Med	ium:						Nationality:	India			
						Student's Perso	onal Informati	on				
Student	t's Name	e: PRIYA	NKA GORKH	HNATH KARAD	5			Mother's Nar	ne: SHOBHA		Ger	nder: Female
Name i	n Verna	cular Langua	age:प्रियांका ग	गेरखनाथ कराड								
Addres	s: NEW	BHARATAN	IAGAR HP C	OLONY VASH	H NAK	(A						
City: M	UMBAI,	Taluka: Kurl	a, District: M	umbai Suburba	an, Sta	ate: Maharashtra, PIN	: 400074					
Telepho	one no.:				Mobile	e no: 919987964041			Email : neela	amnagarg	oje@gn	nail.com
DOB: A	Apr 01, 1	999	Ca	ategory: Reserv	/ed (N	T-3 (NT-D))	Physically	Handicap: No				
Previou	is Lates	Examinatio	n Details: Se	em IV(Regular-I	Rev16	·)	Exam Even	t: Apr-2019		Seat No	: 05069	935 (Status: Pass)
Exam form appearance type: Fresher												
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)												
SN		r Code				Paper Name						AM - AT
1		601		counting VII						Th-UA[]		
2		602	Cost Accour	•						Th-UA []		
3		603 604		anagement III Indirect Taxes						Th-UA []		
4 5		607		Paper III (Indiar	,					Th-UA [] Th-UA []		
6		FSVI.8	Project Worl			ioniy)				Pw-UA []		
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-		ller of Exami ssion to pres	-	or the ensuina (examir	nation. I have remitted	d the prescribe	ed fee for the s	ame. I hereb		ace:	Vidyavihar
declare	that all	statement m	ade in this a	pplication are t	rue, co	omplete and correct to ed for the examination	o the best of m	ny knowledge a	and belief. I		ate:	
request	t for any	special con	cession such	as change in t	time or	r day fixed for universi	ity Examinatio	n etc. on religi	ous or any			
	ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.											
cancen	ou oi i oj	00104.									Stude	ent's Signature
	-	•	D/Chairpers									
respons	sibility o	f fulfillment/r	ectification o		on. He/s	me. The information p /she is regular student						
Place:												
Date:	ate: College Staff Signature Principal/HOD/Chairperson											

			B.Com. (A	S. K. Somaiy Application Forr	iversity of Mumb http://mum.digitalunive a College of Arts, Scien n for Examination of Su lits)-Regular-Rev16-T.Y	<u>rsity.ac/</u> ce and Comn mmer Sessio	nerce (540) n 2020 event.	00456]		
		To explor	e your personaliz	ed Job Opportunities, Co http://mum.digitaluni	ompetitive Exams, Career Fairs versity.ac/. Activate your 'e-Su	etc., click on 'EAs	SY' link in your 'e-Suv d login today!	vidha' account o	on	
2	PR 0170164		Eligi	bility Status: Eligible	Examination forr 084512	n No.:	Division/Section:	Roll I 34	-	- mole
	ction Med						Nationality:	India	-	
motra					Student's Pers	onal Informati	,			
Stude	nt's Name	E: GOLE	NISHA MARU	JTI			Mother's Name: V	ANDANA		Gender: Female
Name in Vernacular Language:निशा मारुती gole Address: 23/0 ashok nagar hill number 3 behind homeguard samadhan chawl										
	Address: 23/0 ashok nagar hill number 3 behind homeguard samadhan chawl City: MLIMBAL Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070									
,	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070 Telephone no.: Mobile no: 917303917348 Email : golenisha20@gmail.com									
•	DOB: Aug 20, 1999 Category: Reserved (SC) Physically Handicap: No									
	-			m IV(Regular-Rev	,	Exam Even	t: Apr-2019	Se	eat No: 050)6912 (Status: Pass)
Exam	Exam form appearance type: Fresher									
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
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1	85	601	Financial Aco	counting VII				Th	-UA [] ;Th-	CA[]
2	85	602	Cost Accoun	ting IV				Th	-UA [] ;Th-	CA[]
3			Financial Ma	•					-UA [] ;Th-	
4		604		ndirect Taxes III)					-UA [] ;Th-	
5				Paper III (Indian Ec	onomy)				-UA [] ;Th-	
6	_	FSVI.8	Project Work	1			<u> </u>	'	v-UA [] ;Pw	
	ocation Fe			Exam Form Late	Fee	Exam Form	Super Late Fee	E	xamination	Fees
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Cente	r Prefere	nce (Code/N	ame):			•		·		
Venue	e Preferer	nce (Code/Na	ame):							
To, Tł	ne Contro	ller of Exami	nation,						Place:	Vidyavihar
declar	e that all	statement m	ade in this ap	plication are true,	nination. I have remitted complete and correct to ibed for the examinatio	o the best of n	ny knowledge and be	elief. I	Date:	
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Decla	ration by	Principal/HO	D/Chairperso	on						
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Place	:									
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		University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] 'o-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! N: Eligibility Status: Examination form No.: 08/4512 Division/Section:									
	PR	N:	Eligi	bility Status:	Exa	amination foi 084513		Division/Section:	Ro	ll No.:	6 01.0
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Instructio	on Med	ium:			-			Nationality:	India		
					S	tudent's Per	sonal Informati	on			
Student'	s Name	: RUPAF	RELIYA PRU	THA GUNAVAN	ITRAI			Mother's Name: SA	ANGEET	A (Gender: Female
Name in	Verna	cular Langua	age:પૃથા								
Address	Address: B-21 Rajat society Khandkar lane										
City: Do	City: Dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201										
Telepho	ne no.:			N	lobile no: 91	8689929430		Ema	il : prutha [·]	168@gmail.o	com
DOB: Au	DOB: Aug 16, 1999 Category: Open Physically Handicap: No										
Previous	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506977 (Status: Pass)										
Exam form appearance type: Fresher											
Paper D			ase select Pa	per details whic	•			ssessment,CA - Co	llege Ass	essment)	
SN		r Code				Paper Name	9				AM - AT
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		ller of Exam	•							Place:	Vidyavihar
declare t	that all	statement m	ade in this ap	oplication are tru	le, complete	and correct	to the best of n	ed fee for the same. Ny knowledge and be Im appearing. I shall	elief. I	Date:	
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cancelle	uoriej	ecteu.								St	udent's Signature
Declarat	tion by	Principal/HC	D/Chairperso	on							
respons	ibility of	f fulfillment/r	ectification of					orm is correct to the ge and has complete			 I also undertake the ance and practical
Place:											
Date:	ate: College Staff Signature Principal/HOD/Chairperson										

	4	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status:										
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20		N: 00846487	Ŭ		084514	Ļ	Division/Section: B	_	ll No.: 106	- Harden		
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Instruc	ction Med				Student's Pe	rsonal Informat	· · ·	India				
Studer	nt's Name			HAN KUMARI SH'		SUIIal Informati	Mother's Name: Cl			Gender: Female		
							Mourier 3 Marrie. C.					
Name in Vernacular Language:प्रजापति कंचन कुमारी श्यामजी Address: ROOM NO 4 CHAWL NO 2 AMIR HUSSAIN KHAN CHAWL SAMBHA II CHAWK NEW MILL ROAD KURLA - WEST												
Address: ROOM NO 4 CHAWL NO 2 ,AMIR HUSSAIN KHAN CHAWL, SAMBHAJI CHAWK,NEW MILL ROAD KURLA - WEST												
	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070 Telephone no.: Mobile no: 918652219407 Email : PRAJAPATICAMPS8976@GMAIL.COM											
<u> </u>	DOB: Jan 28, 1999 Category: Open Physically Handicap: No											
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506975 (Status: Pass)									06975 (Status: Pass)			
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1	85	5601	Financial Acc	counting VII				Т	「h-UA [] ;Th-	·CA[]		
2	85	5602	Cost Accoun	iting IV				Т	「h-UA [] ;Th-	·CA[]		
3	85			anagement III				т	「h-UA [] ;Th-	·CA []		
4				Indirect Taxes III)					[h-UA [] ;Th-			
5				Paper III (Indian Ed	conomy)				[h-UA [] ;Th-			
6			Project Work					'T	Pw-UA [] ;Pw			
	cation Fe			Exam Form Late	Fee	Exam Form	Super Late Fee		Examination	Fees		
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Payme	ent Detail	ls: /	Amount Recei	ived:	С	ollege Receipt	No. and Date:					
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Center	Prefere	nce (Code/N	ame):									
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	University of Mumbai, Mumbai										
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Student's Nar		A SAACHI DIL	_IP			Mother's Name: SA	ANTOSH	C	Gender: Female		
	acular Langua	<u> </u>									
			AMI ROAD, KURL								
City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070											
Telephone no.: Mobile no: 919702057652 Email : saachilodha15@gmail.com											
DOB: Oct 15,	DOB: Oct 15, 1999 Category: Open Physically Handicap: No										
Previous Late	est Examinatio	n Details: Ser	n IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	at No: 050	6947 (Status: Pass)		
Exam form ap	opearance type	e: Fresher									
Paper Details	: Plea	ase select Pa	per details which y	ou want to appear (UA	University A	ssessment,CA - Co	llege Assess	ment)			
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1 8	85601	Financial Acc	counting VII				Th-L	JA [] ;Th-0	CA[]		
2 8	85602	Cost Accoun	ting IV				Th-L	JA [] ;Th-(CA[]		
3 8	85603	Financial Ma	nagement III				Th-L	JA [] ;Th-(CA[]		
4 8	85604	Taxation V (I	ndirect Taxes III)				Th-L	JA [] ;Th-(CA[]		
5 8	85607	Economics P	aper III (Indian Ec	onomy)			Th-L	JA [] ;Th-(CA[]		
6 UA_	_FFSVI.8	Project Work	. 11				Pw-l	UA[];Pw	-CA []		
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	roller of Exami							Place:	Vidyavihar		
I request perr	nission to pres	ent myself fo	r the ensuing exan	nination. I have remitted	the prescribe	ed fee for the same.	l hereby		(layarina)		
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other ground.	I understand t			on being found false or							
cancelled or rejected. Student's Signature											
Declaration b	y Principal/HO	D/Chaimerso	n					0.			
		•		me. The information pr	inted in the f	orm is correct to the	best of my ki	nowledae	Lalso undertake the		
responsibility		ectification of	the information. H	e/she is regular student							
Place:				_							
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20	1701640	00847711		Eligible				В		113	
Instruct	ion Med	ium:						Nationality:	India		
					St	udent's Per	sonal Informati	on			-
Student	t's Name	e: SAWA	NT PRANALI	PRAMOD				Mother's Nam	e: PRADNY	A	Gender: Female
Name i	n Verna	cular Langua	age:सावंत प्र	गाली प्रमोद							
Addres	s: A-11,	MIG, S.T.ST	AFF QUART	ERS, KURLA N	IEHRU NAGA	AR, KURLA	EAST, MUMB	Al			
City: Kl	JRLA, T	aluka: Kurla	, District: Mur	mbai Suburban,	State: Mahar	ashtra, PIN	400024				
Telepho	Telephone no.: Mobile no: 919869031063 Email : pranalisawant0922@gmail.com										
DOB: C	Oct 06, 1	999	Ca	tegory: Reserve	d (SC)		Physically	Handicap: No			
Previou	is Lates	t Examinatio	n Details: Se	m IV(Regular-R	ev16)		Exam Even	t: Apr-2019		Seat No: 0	506982 (Status: Pass)
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5 6		607 FSVI.8	Project Work	Paper III (Indian	Economy)					Th-UA [] ;T	
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-		ller of Exami	-							Place	e: Vidyavihar
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Declara	ation by	Principal/HC	D/Chairperso	on							
respons	sibility o	f fulfillment/r	ectification of								ge. I also undertake the dance and practical
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the second	http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event.												
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Instruct	tion Med	lium:		,			Nationality:	India					
					Student's Pers	onal Informati	on						
Student	it's Name	e: KADLA	AK PRASAD .	JAYWANT			Mother's Nan	ne: MEENA		Gender: Male			
Name ir	n Verna	cular Langua	age:कडलाक प्र	रसाद जयवंत									
Address	s: CHAV	NL NO 8/451	I, INDIRA VII	KAS SEVA SANGH	H KANNAMWAR NAGA	R 2 VIKHROI	I EAST						
City: MI	UMBAI,	Taluka: Kurl	a, District: M	umbai Suburban, S	State: Maharashtra, PIN	J: 400083							
•	one no.:		_ 		oile no: 919619384676			Email : prasa	dkadlak99@	gmail.com			
DOB: Sep 10, 1999 Category: Reserved (SC) Physically Handicap: No Previous Latest Examination Details: Sem IV/Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506931 (Status: Pass)													
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506931 (Status: Pass)									506931 (Status: Pass)				
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2			Cost Accoun	•					Th-UA [] ;Th Th-UA [] ;Th				
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-				or the ensuing exar	nination. I have remitted	d the prescrib	ed fee for the s	ame. I hereby		: Vidyavihar			
declare	that all	statement m	nade in this ap	pplication are true,	complete and correct to	to the best of m	ny knowledge a	and belief. I	Date:				
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other gr	ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.												
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Place:	ace:												
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	PR	.N:	Eligi	ibility Status:	Examination for 084518	-	Division/Section:	Ro	oll No.:	ADUBRY
20)170164(00848401		Eligible			A		25	
Instruc	ction Med	lium:					Nationality:	India		
					Student's Pers	sonal Informati	ion			
Studer	nt's Name	e: ANJAN	NA SURESH [DUBEY			Mother's Name: PL	JSHPA	(Gender: Female
Name	in Verna	cular Langua	age:अंजना सु	रुरेश दुबे						
Address: ROOM NO-2 BASANT SETH CHAWL WATER TANK ROAD JAMIL NAGAR BHANDUP WEST										
City: M	IUMBAI,	Taluka: Kurl	a, District: Mi	umbai Suburban, S	State: Maharashtra, PIN	√ : 400078				
Teleph	none no.:			Mob	ile no: 917777073734		Emai	i : aakash	ht225@gmail	l.com
DOB: Nov 12, 1999 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506903 (Status: Pass)										
	Exam form appearance type: Fresher									
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					or day fixed for univers ion being found false o					
	ancelled or rejected. Student's Signature									
Declar	etion by	Principal/HC	D/Chairperso							
	-	-	-		y me. The information p	printed in the f	orm is correct to the	hest of m	v knowledae	I also undertake the
respon	nsibility of	of fulfillment/re	rectification of		e/she is regular studen					
Place:	lace:									
Date:										
Dute.					College S	Staff Signature			Seal and Sign Principal/HOE	nature of D/Chairperson

	To explor	```	S. K. Soma Application Fo (A.and F.)(with Cre	Jniversity of Mum http://mum.digitaluni aiya College of Arts, Sci form for Examination of s redits)-Regular-Rev16-T , Competitive Exams, Career Fa university.ac/. Activate your 'e	<u>iversity.ac/</u> ience and Comn Summer Sessio Γ.Υ. Β.Com. (A.	merce (540) on 2020 event. and F.)-Sem VI [2C0)0456] vidha' accour	nt on		
	PRN:		gibility Status:	Examination for	orm No.:	Division/Section:		oll No.:		
	16400848803		Eligible	084519		B	_	82	fortage	
Instruction M	Medium:			_!		Nationality:	India			
				Student's Pe	ersonal Informat	tion				
Student's N	Jame: MANSI	JRI FAIZA /	ABDULLATIF		·	Mother's Name: KA	AUSAR	(Gender: Female	
Name in Ve	ernacular Langua	эge:फैझ मन्	 सुरी							
Address: ne	Address: neel kamal apt belgrami road room number 201/202 2nd floor									
City: mumbai, Taluka: mumbai, District: , State: Maharashtra, PIN: 400070										
Telephone	Felephone no.: Mobile no: 919987837600 Email : faezak210@gmail.com									
DOB: Dec 21, 1998 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506952 (Status: Pass)										
Exam form appearance type: Fresher										
•	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
	Paper Code 85601			Paper Nam	le				AM - AT	
1		Cost Accou	ccounting VII					Th-UA [] ;Th- Th-UA [] ;Th-		
3			Anagement III					Th-UA [] ;Th- Th-UA [] ;Th-		
4			(Indirect Taxes III)	<u></u>				Th-UA [] ;Th-		
5			Paper III (Indian E					Th-UA [] ;Th-		
		Project Wor						Pw-UA [] ;Pw		
Convocatio	on Fee		Exam Form Lat	te Fee	Exam Form	n Super Late Fee	' _	Examination		
Mark Stater	ment Fee		Total:							
Payment De		Amount Rece			College Receipt	No. and Data:				
DD No:			MICR No:	Ľ	DD Date:	No. and Date.	I	Bank:		
-	ference (Code/Na	ame).					•			
	ference (Code/Na	,								
	ontroller of Exami							Place:	Vidyavihar	
I request pe declare that have gone t	ermission to pres at all statement ma through the sylla	sent myself f ade in this a abus and the	application are true e list of books pres	amination. I have remit e, complete and correct scribed for the examinat	t to the best of r tion for which I a	my knowledge and be am appearing. I shall	elief. I not		Vidyavilla	
other groun	nd. I understand t			ne or day fixed for unive nation being found false						
	cancelled or rejected. Student's Signature									
	n by Principal/HO	-								
responsibili		ectification of	of the information.	by me. The information He/she is regular stude						
Place:	'lace:									
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

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		l	B Com		edits)-Regular-Rev16-T			`00 <u>456</u> 1		
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	PR	N:	Eľ	ligibility Status:	Examination fo 084520	0	Division/Section:	R	oll No.:	Naevale
20	1701640	00848811		Eligible			В		93	
Instruct	tion Med	ium:					Nationality:	India		
					Student's Pe	ersonal Informat	ion			
Student	t's Name	e: NAWA	LE NIKHIL	PRAKASH			Mother's Name: J	IYOTI		Gender: Male
Name ir	n Verna	cular Langua	age:नवले नि	नेखिल प्रकाश						
Address: AHIRE CHAWL ROOM NO 99 KATODI PADA BHATWADI GHATKOPAR WEST										
City: MI	UMBAI,	Taluka: Kurl	la, District:	Mumbai Suburban	, State: Maharashtra, P	IN: 400084				
Telephone no.: Mobile no: 918097687298 Email : aschawde0188@gmail.com										
DOB: S	DOB: Sep 26, 1998 Category: Reserved (OBC) Physically Handicap: No									
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506962 (Status: Pass)										
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
Paper D			ase select F	Paper details which	ı you want to appear (l	JA - University /	Assessment,CA - C	ollege As	sessment)	
SN										
1				Accounting VII					Th-UA [] ;Th	
2			Cost Accou	•					Th-UA [] ;Th	
3				Management III	. <u>.</u>				Th-UA [] ;Th	
4				/ (Indirect Taxes III)					Th-UA [] ;Th	
5				s Paper III (Indian E	Economy)				Th-UA [] ;Th	
6	_		Project Wo				Current ato Eco		Pw-UA [];P	
	tatemen			Exam Form Lat Total:	.e Fee		Super Late Fee		Examination	n Fees
	diemen								<u> </u>	
Paymer	nt Detail	is: /	Amount Red	ceived:	C	College Receipt	No. and Date:			
DD No:				MICR No:		DD Date:			Bank:	
Center	Preferer	nce (Code/N	lame):							
Venue I	Preferer	nce (Code/Na	ame):							
To, The	• Contro	ller of Exami	ination,						Place:	: Vidyavihar
declare	that all	statement m	nade in this	application are true	amination. I have remitt e, complete and correct scribed for the examinat	t to the best of r	my knowledge and b	belief. I	/ Date:	
request other gr	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not quest for any special concession such as change in time or day fixed for university Examination etc. on religious or any her ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
	ancelled or rejected. Student's Signature									
	-	Principal/HO	-							
respons	sibility of	of fulfillment/re	rectification		by me. The information He/she is regular stude					
Place:	ace:									
Date:										

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	PR	N:	Eligi	bility Status:	Examination for 084521		Division/Section:	Roll	No.:	Snehal
2	0170164	00848873	Р	rovisional			В	13	38	Sneha
Instru	ction Med	lium:	-				Nationality:	India		
					Student's Per	sonal Informati	on			
Stude	nt's Name	e: UMBAI	RKAR SNEH/	AL NARESH			Mother's Name: Al	NKITA	C	Gender: Female
Name	in Verna	cular Langua	age:उंबरकर स्व	नेहल नरेश						
Addre	Address: A-WING, 404, HEMADI RESIDENCY, SECTOR-11, PLOT NO.3A, KAMOTHE, NAVI MUMBAI									
					te: Maharashtra, PIN: 4					
Telep	Felephone no.: Mobile no: 919967266061 Email : SnehalUmbarkar1999@gmail.com									
DOB:	DOB: Dec 14, 1999 Category: Reserved (OBC) Physically Handicap: No									
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0507006 (Status: Pass)									
Exam form appearance type: Fresher										
Paper	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN	Pape	r Code			Paper Name	9				AM - AT
1	85	601	Financial Ac	counting VII				Th	n-UA [] ;Th-	CA[]
2	85	602	Cost Accoun	0				Th	n-UA [] ;Th-	CA[]
3		603	Financial Ma						n-UA [] ;Th-	
4		604		ndirect Taxes III)					n-UA [] ;Th-	
5		607		Paper III (Indian E	conomy)				n-UA [] ;Th-	
6	_	FSVI.8	Project Work	1			<u> </u>		v-UA [] ;Pw	
	ocation Fe			Exam Form Late	Fee	Exam Form	Super Late Fee	E	xamination	Fees
Mark	Statemen	tree		Total:						
Paym	ent Detai	s: A	Amount Rece	ived:	C	llege Receipt	No. and Date:			
DD N	0:			MICR No:		DD Date:		Ba	ank:	
Cente	r Prefere	nce (Code/N	ame):	I		1				
Venue	e Preferer	nce (Code/N	ame):							
To, Tl	ne Contro	ller of Exami	nation,						Place:	Vidyavihar
decla	re that all	statement m	ade in this ap	plication are true	mination. I have remitte complete and correct ribed for the examination	to the best of n	ny knowledge and be	elief. I	Date:	
reque other	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.									
									Stu	udent's Signature
	-	•	D/Chairperso							
respo	nsibility o	f fulfillment/r	ectification of		y me. The information le/she is regular stude					
Place	:									
Date:	tte: College Staff Signature Principal/HOD/Chairperson									

	To expic	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! PRN: Eligibility Status:											
				Examination form			Bol	JI No ·	N N				
2017	7016400848907	Ŭ	Eligible	084522 		B		112	Afeheen				
Instructio	n Medium:			<u> </u>		Nationality:	India						
				Student's Perso	onal Informati	on							
Student's	Name: SARO	TIYA AFSHEE	EN HANIF			Mother's Name: NA	ASREEN	(Gender: Female				
Name in '	Vernacular Langua	age:सरोटिया ?	अफशीं हनीफ										
Address: ROOM NO 501, 5TH FLOOR NEW MEMEZES BUILDING NEAR MICHEAL HIGH SCHOOL , KURLA WEST													
City: MUN	MBAI, Taluka: Kur	la, District: Mi	umbai Suburban, S	State: Maharashtra, PIN:	400070								
Telephon	Pelephone no.: Mobile no: 919892934808 Email : afsheensarotiya@gmail.com												
DOB: Mar 03, 2000 Category: Open Physically Handicap: No													
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506981 (Status: Pass)													
Exam form appearance type: Fresher													
Paper De		ase select Par	per details which ye	you want to appear (UA	- University P	ssessment,CA - Col	llege Asse	essment)					
SN 1	Paper Code 85601	Financial Aco		Paper Name			——————————————————————————————————————	[h-UA [] ;Th-0	AM - AT				
2	85602	Cost Accoun						[h-UA [] ;Th-(
3	85603		anagement III					ГП-ОА [] ; Th-(Гh-UA [] ; Th-(
4	85604		Indirect Taxes III)					Гһ-UА[];Tһ-(
5	85607		Paper III (Indian Eco	onomy)				Гh-UA [] ;Th-(
6	UA_FFSVI.8	Project Work						Pw-UA [] ;Pw					
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Mark Stat	tement Fee		Total:										
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-	reference (Code/N	Jame):		I	DD Dutt.		1=						
	reference (Code/N	,											
	Controller of Exami							Place:	Vidyavihar				
declare th	hat all statement m	nade in this ap	pplication are true,	nination. I have remitted complete and correct to ibed for the examinatior	o the best of m	ny knowledge and be	elief. I	Date:					
request for other grou	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.												
	-							Sti	udent's Signature				
This form responsit		nized by the C rectification of	College staff and by f the information. He	y me. The information p le/she is regular student									
Place:	ace:												
Date:	tte: College Staff Signature Principal/HOD/Chairperson												

	То ехріо		S. K. Som Application F . (A.and F.)(with C nalized Job Opportunitie	naiya C Form f Credits es, Comp	versity of Mumba http://mum.digitaluniver College of Arts, Scient for Examination of Su s)-Regular-Rev16-T.Y spetitive Exams, Career Fairs risity.ac/. Activate your 'e-Su	rsity.ac/ ince and Comm immer Session '. B.Com. (A. a a etc., click on 'EAS	nerce (540) n 2020 event. and F.)-Sem VI SY' link in your	l [2C00456] 'e-Suvidha' acco	unt on	
P	PRN:	E'	ligibility Status:		Examination forn 084523	n No.:	Division/Section	on: R	oll No.:	Msagnetare.
2017016	400849265		Eligible				В		109	Varge
Instruction Me	edium:						Nationality:	India		
					Student's Perso	onal Informati	on			
Student's Nar	me: SAGVF	EKAR MAN	NAL DEEAPK				Mother's Nan	me: SHAMA		Gender: Male
Name in Vern	nacular Langua	age:हिंदू								
Address: C-8	3 Dattadigamb	ar CHS, Pa	antnagar, Ghatkor	par(Ea	ast), Mumbai - 400 07	5 C-8 Dattad	igambar CHS,	Pantnagar, C	Ghatkopar((East), Mumbai - 400 075
City: Mumbai	, Taluka: Kurla	a, District: N	Aumbai Suburbar	n, Stat	te: Maharashtra, PIN:	400075				
Telephone no).:			Mobile	e no: 919867759836			Email : deep	ak_dtp@y	ahoo.com
DOB: Apr 27, 1999 Category: Reserved (OBC) Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506978 (Status: Pass)										
Exam form appearance type: Fresher										
Paper Details		ase select F	Paper details which	ch you	u want to appear (UA	- University A	ssessment,CA	A - College As	sessment	,
· ·	per Code	l			Paper Name					AM - AT
-			Accounting VII						Th-UA[]	
		Cost Acco							Th-UA[]	
			Management III V (Indirect Taxes I						Th-UA [] Th-UA []	
			s Paper III (Indian	,					Th-UA[]	
		Project Wo	• •							;Pw-CA []
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	rence (Code/N	,								
	rence (Code/Na	,								
I request pern declare that a have gone thr request for an other ground.	To, The Controller of Examination, request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be									
cancelled of i	cancelled or rejected. Student's Signature									
Declaration by	y Principal/HO)D/Chairpe	rson							
responsibility	of fulfillment/r	rectification								edge. I also undertake the endance and practical
Place:	lace:									
Date:										

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		l	/		n for Examination of Su				ł			
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				http://mum.digitaluniv	mpetitive Exams, Career Fain versity.ac/. Activate your 'e-S		id login today!		nt on			
	PR	N:	Elig	ibility Status:	Examination for 084524		Division/Section:	Ro	oll No.:	R		
2	01701640	00849296		Eligible		JIII	A		33			
Instruc	ction Med	lium:					Nationality:	India				
					Student's Pers	sonal Informati	on					
Stude	ent's Name	e: GAWD	E BHARTI P	ANDURANG			Mother's Name: PF	<u>₹ATIBHA</u>	۱ (Gender: Female		
Name	in Verna	cular Langua	age:गावडे भा	रती पांडुरंग								
Address: 20/G/203, SHREE GANESH CHS, SANGHARSHNAGAR, CHANDIWALI FARM ROAD, ANDHERI EAST MUMBAI 400072												
City: N	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072											
Teleph	Felephone no.: Mobile no: 919029320356 Email : mayurgawde10@gmail.com											
DOB:	DOB: Apr 19, 2000 Category: Reserved (OBC) Physically Handicap: No											
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506911 (Status: Pass)												
		pearance type										
-	r Details:		ase select Pa	per details which yo	ou want to appear (UA		Assessment,CA - Col	lege Ass	essment)			
SN		er Code	H		Paper Name	;				AM - AT		
1			Financial Ac	•					Th-UA [] ;Th-			
2			Cost Accoun	•					Th-UA [] ;Th-			
3				anagement III					Th-UA [] ;Th-			
4				(Indirect Taxes III)					Th-UA [] ;Th-			
5 6		FSVI.8	Project Work	Paper III (Indian Eco					Th-UA [] ;Th- Pw-UA [] ;Pw			
-	ocation Fe		Pioject mon	Exam Form Late F		Fram Form	Super Late Fee	'T	Examination			
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				10000				<u> </u>				
Payme	ent Detail	is: /	Amount Rece	vived:	Cc	ollege Receipt	No. and Date:					
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		nce (Code/N	,									
		nce (Code/Na	,									
-		oller of Exami							Place:	Vidyavihar		
					nination. I have remitte complete and correct t				Date:			
have g	gone throu	ough the sylla	abus and the I	list of books prescrib	bed for the examinatio	on for which I a	am appearing. I shall	not				
					or day fixed for univers on being found false o							
	other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.											
Deala	Student's Signature Student's Signature											
	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the											
respoi	sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical surse/term work (if any) according to university rules.											
Place:	:											
Date:								i				
Duto.					College S	Staff Signature			Seal and Sign Principal/HOE	nature of D/Chairperson		

and the second sec	L.									
		To explor			its)-Regular-Rev16-T.` mpetitive Exams, Career Fai versity.ac∕. Activate your 'e-S	(, L)0456] <i>v</i> idha' account	on	
20	PR 1701640		Eligi	bility Status: Eligible	Examination for 084525	m No.:	Division/Section:		No.: !9	tiless
Instruct	tion Med	ium:					Nationality:	India		
		-			Student's Per	sonal Informati	,			
Studen	t's Name	E: JAIN R	ISHABH RAJ	ESH			Mother's Name: TI	RISHALA	0	Gender: Male
Name i	n Verna	cular Langua	age:जैन रिषभ	rajesh					I	
		-	-	n bldg makbara roa	d kalvan(w)					
	City: kalyan, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421301									
-	Felephone no.: Mobile no: 918879818299 Email : rishabhtalawat2000@gmail.com									
DOB: C	Oct 20, 1	999	Cat	tegory: Open		Physically	Handicap: No			
Previou	us Lates	Examinatio	n Details: Ser	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	S	Seat No: 050)6927 (Status: Pass)
Exam f	orm app	earance type	e: Fresher							
Paper I	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN										
1			Financial Aco	•					n-UA [] ;Th-	
2			Cost Accoun	•					n-UA[];Th-	
3		603 604	Financial Ma	nagement III ndirect Taxes III)					-UA [] ;Th-	
5				Paper III (Indian Ec					n-UA [] ;Th- n-UA [] ;Th-	
6		FSVI.8	Project Work		Shorry)				w-UA[];Pw	
	cation Fe			Exam Form Late	Fee	Exam Form	Super Late Fee	'	Examination	
Mark S	tatemen	t Fee		Total:						
•	nt Detail	s: A	Amount Recei		Cc	ollege Receipt	No. and Date:			
DD No:				MICR No:		DD Date:		B	ank:	
		nce (Code/N	,							
		nce (Code/Na Il er of Exami	,						Disco	
l reque declare	st permis that all	ssion to pres statement m	ent myself fo ade in this ap	plication are true,	nination. I have remitte complete and correct t ibed for the examination	to the best of n	ny knowledge and be	elief. I	Place: Date:	Vidyavihar
request other g	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.									
									St	udent's Signature
This for respon	rm is car sibility o	efully scrutin f fulfillment/r	ectification of	College staff and by	/ me. The information e/she is regular studer					
Place:										
Date:	ate: College Staff Signature Principal/HOD/Chairperson									

		To explo		S. K. Som Application F A.and F.)(with C ized Job Opportunities http://mum.digite	punt on						
	PR			jibility Status:	T	Examination for		Division/Sectio	n. R	oll No.:	6
20		00850887	-	Provisional		084526		B		80	the the
Instruct	tion Med	dium:						Nationality:	India		
						Student's Pers	onal Informati	on			
Studen	nt's Name	e: MANE	ADARSH AS	знок				Mother's Nam	ie: USHA		Gender: Male
Name i	in Verna	icular Langua	age:आदर्श					-			
Addres	s: Room	no. 7 digan	nbar society	LBS nagar Saki	inaka l	Mumbai 400072					
City: Kı	City: Kurla, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400072										
Teleph	elephone no.: Mobile no: 918879542256 Email : adarshmane930@gmail.com										
DOB: S	Sep 28, 1	1999	Ca	ategory: Open			Physically	Handicap: No			
Previou	us Lates	t Examinatio	n Details: Se	em IV(Regular-R	≀ev16)	1	Exam Even	t: Apr-2019		Seat No:	: 0506950 (Status: Pass)
	Exam form appearance type: Fresher										
· · ·	Details:		ase select Pa	aper details whic	ch you	want to appear (UA	,	ssessment,CA	- College As	sessment	,
SN		er Code	F :			Paper Name				T I I I A F I	AM - AT
1		5601		counting VII						Th-UA[];	
2		5602	Cost Accour	•						Th-UA[];	
3		5603 5604		anagement III (Indirect Taxes II	(11)					Th-UA [] ; Th-UA [] ;	
5		5607		Paper III (Indian	,					Th-UA[];	
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	To explore	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! N: Eligibility Status: Examination Form No.: Division/Section: Roll No.:										
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Student's Nam	e: BILIMO	RIA TANAZ PERCY			Mother's Name: M	AHATAB	C	Gender: Female				
Name in Verna	icular Langua	ge:Tanaz										
Address: C-18	/19 Pirojsha n	agar, hillside colony Vikhroli	West) Mumbai, Maharas	htra, 400079								
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400079												
Felephone no.: 25172581 Mobile no: 919769007282 Email : tanazbilimoria@gmail.com												
DOB: Jul 04, 1	IOB: Jul 04, 1998 Category: Open Physically Handicap: No											
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506886 (Status: Pass)												
Exam form appearance type: Fresher												
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1 85	5601	Financial Accounting VII	-			Th-	UA[];Th-	CA[]				
2 85	5602	Cost Accounting IV				Th-	UA[];Th-	CA[]				
3 85	5603	Financial Management III										
4 85		Taxation V (Indirect Taxes III)										
5 85		Economics Paper III (Indian E	conomy)				UA[];Th-					
6 UA F	FSVI.8	Project Work II	••				-UA [] ;Pw					
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Student's Na	ame: MALKA	AR RUTUJA	ANIL			Mother's Name: AS	SHWINI	(Gender: Female	
Name in Ver	rnacular Langua	३ge:मालकर ३	ऋतुजा अनिल							
Address: 5/5	Address: 5/504, MARATHA SADAN KISAN NAGAR NO.3 ROAD NO.16, WAGLE ESTATE									
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604										
<u> </u>	elephone no.: Mobile no: 919867817183 Email : rutuja26january@gmail.com									
DOB: Jan 26, 2000 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506949 (Status: Pass)										
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)										
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other ground	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected. Student's Signature									
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responsibility	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical burse/term work (if any) according to university rules.									
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Instruc	ction Med	Jium:			-		Nationality:	India		-
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Studer	nt's Name	e: GOLE	RUPESH AR.	JUN			Mother's Nam	ne: PUSHPA		Gender: Male
Name	in Verna	cular Langu:	age:रुपेश अर्जुन	ਜ gole						
Addres	ss: ashol	k nagar hill n	o 3 behind hc	meguard near bu	udhha temple ghatkopa	ar(w)				
City: N	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400070									
Teleph	Felephone no.: Mobile no: 917039998794 Email : rupeshgole47@gmail.com									
DOB:	DOB: May 15, 2000 Category: Reserved (SC) Physically Handicap: No									
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506913 (Status: Pass)										
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					Student's Pers	sonal Informati	ion							
Studer	nt's Name	e: SHAIK	H UZMA MOI	HAMMED LIYAKA	гн		Mother's Name:	: SAMEER	A	Gender: Female				
Name	in Verna	icular Langua	age:शैख़ उज़्मा	ा मोहम्मद लियाकत										
Address: f-8, mahavir niwas, mohili village, sakinaka mumbai 400072														
City: mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400072														
Teleph	Pelephone no.: Mobile no: 919930668979 Email : uzmaashaikh17@gmail.com													
DOB: I	Dec 16, 1	1999	Cat	tegory: Open		Physically	/ Handicap: No							
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Name	in Verna	cular Langua	age:મેઠતા શ્રુ	તે સંજય						
Addres	ss: B-501	, smita chs l	Dr.Ambedkar	road, mulund (wes	i) mumbai 400080					
City: m	City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080									
Teleph	Felephone no.: 25618901 Mobile no: 917045588437 Email : meetoverseas@yahoo.co.in									
DOB: /	DOB: Apr 13, 1999 Category: Open Physically Handicap: No									
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506958 (Status: Pass)									
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Declar	ation by	Principal/HC	D/Chairperso	n						
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City: MUM	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400072											
Telephone	elephone no.: Mobile no: 919820207875 Email : crhansie@gmail.com											
DOB: Mar	DOB: Mar 22, 2000 Category: Open Physically Handicap: No											
Previous L	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506891 (Status: Pass)											
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1	85601		Accounting VII					Th-UA [] ;Th-				
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20170	7016400851836		Eligible			A		41		
Instruction	n Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Student's	Name: HARI	IA PRACHI SH	HAILESH			Mother's Name: Al	LPA	(Gender: Female	
Name in V	Vernacular Lang	uage:हरिया प्र	ाची शैलेश							
Address: 8	808, PARASHN	ATH APT., 4T	TH FLOOR r.no.19,a	ajanta compound, dHAM	IANKAR nAK	A,				
City: Bhiw	City: Bhiwandi, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421302									
	elephone no.: Mobile no: 917875193244 Email : hariaprachi26@gmail.com									
DOB: Jan 26, 2000 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506919 (Status: Pass)										
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	eference (Code/									
I request p declare the have gone	hat all statement e through the syl	esent myself f made in this a llabus and the	application are true, e list of books prescr	nination. I have remitted complete and correct to ribed for the examinatior	o the best of n n for which I a	ny knowledge and be am appearing. I shall	elief. I not	Place: Date:	Vidyavihar	
other grou	equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected. Student's Signature									
Declaratic	on by Principal/H	IOD/Chairper								
This form responsib	nis form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical burse/term work (if any) according to university rules.									
Place:	ace:									
Date:										

	University of Mumbai, Mumbai										
	l e				http://mum.digitalunive	ersity.ac/					
				S. K. Somaiya	College of Arts, Scien	nce and Comn	nerce (540)				
				Application Form	for Examination of S	ummer Sessio	n 2020 event.				
			B.Com. (A	and F.)(with Credi	ts)-Regular-Rev16-T.	Y. B.Com. (A.	and F.)-Sem VI [2C0	0456]			
		To explo	re your personaliz	ed Job Opportunities, Co http://mum.digitaluniv	npetitive Exams, Career Fair ersity.ac/. Activate your 'e-S	rs etc., click on 'EAs Suvidha' account an	SY' link in your 'e-Suv d login today!	vidha' account	on		
	PR	N:	Eligi	bility Status:	Examination for 084534	m No.:	Division/Section:	Roll	No.:	and	
2	0170164	00851875		Eligible			А	5	9	Altrady	
Instru	ction Med	lium:		!			Nationality:	India			
					Student's Pers	sonal Informati	on				
Stude	nt's Name	e: KHADE	E GAURAV P	RADIP			Mother's Name: Pe	ALOC	(Gender: Male	
Name	in Verna	cular Langua	age:खडे गौरव	प्रदीप							
Addre	ss: 19/2,	jai shubham	n chs devi ch	owk,shastri nagar o	lombivli(w)						
City: d	City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202										
Telepl	Felephone no.: 2498814 Mobile no: 919920943909 Email : khadegaurav10@gmail.com										
DOB:	DOB: Jan 10, 2000 Category: Reserved (OBC) Physically Handicap: No										
Previc	revious Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506937 (Status: Pass)										
	xam form appearance type: Fresher										
Paper	Details:	Plea	ase select Pa	per details which yo	ou want to appear (UA	A - University A	ssessment,CA - Co	llege Asse	ssment)		
SN	•	r Code			Paper Name	9				AM - AT	
1		601	Financial Acc						I-UA [] ;Th-		
2		602	Cost Accoun	0					-UA[];Th-		
3		603	Financial Ma	•					-UA[];Th-		
4		604 607		ndirect Taxes III)	nomu)				-UA [] ;Th-		
5 6		FSVI.8	Project Work	Paper III (Indian Eco	phomy)				-UA [] ;Th- v-UA [] ;Pw		
-	cation Fe		FI0JECT WORK	Exam Form Late F		Exam Form	Super Late Fee	'	xamination		
	Statemen			Total:					.xamination		
Paym	ent Detai	s: /	Amount Recei	ived:	Co	ollege Receipt	No. and Date:				
DD No	D:			MICR No:		DD Date:		Ba	ank:		
		nce (Code/N	,								
		nce (Code/N									
		ller of Exami							Place:	Vidyavihar	
declar	e that all	statement m	ade in this ap	plication are true, o	ination. I have remitte complete and correct	to the best of n	ny knowledge and be	elief. I	Date:		
reque	st for any	special con	cession such	as change in time o	bed for the examination or day fixed for university	sity Examinatio	n etc. on religious o	r any			
	other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.										
									St	udent's Signature	
	-	-	D/Chairperso								
respo	nsibility o	f fulfillment/r	ectification of		me. The information e/she is regular studer						
Place:					_						
Date:	ate: College Staff Signature Principal/HOD/Chairperson										

3											
		To explo	· ·	ed Job Opportunities, C	lits)-Regular-Rev16-T.Y ompetitive Exams, Career Fairs iversity.ac/. Activate your 'e-Su	etc., click on 'EAS	SY' link in your 'e-Su)0456] ridha' account o	n		
2	PR	N: 00851925	, i i i i i i i i i i i i i i i i i i i	bility Status: Eligible	Examination forr 084535		Division/Section:	Roll N 65	-	Asad .	
	ction Med			g			Nationality:	India			
mouru		ium.			Student's Pers	onal Informati	,	India			
Stude	nt's Name	e KORE	PU KOMAL R	AJU			Mother's Name: A		0	Gender: Female	
			age:कोरेंप् कोम								
		-	- 0		odi						
	Address: bhim nagar tansa pipe line r.n gandhi road rajawadi City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077										
	Felephone no.: Mobile no: 918898851975 Email : komalkorepu257@gmail.com										
	DOB: Jul 25, 2000 Category: Reserved (SC) Physically Handicap: No										
	,			n IV(Regular-Rev	,	Exam Even		Se	eat No: 050	6943 (Status: Pass)	
	ixam form appearance type: Fresher										
	Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN		r Code			Paper Name	· · ·				AM - AT	
1	85	601	Financial Acc	counting VII				Th-	-UA[];Th-0	CA[]	
2	85	602	Cost Accoun	ting IV				Th-	-UA [] ;Th-0	CA[]	
3	85	603	Financial Ma	nagement III				Th-	-UA [] ;Th-0	CA[]	
4	85	604	Taxation V (I	ndirect Taxes III)				Th-	-UA [] ;Th-0	CA[]	
5	85	607	Economics P	aper III (Indian Ec	conomy)			Th-	-UA [] ;Th-0	CA[]	
6	UA_F	FSVI.8	Project Work	11				Pw	-UA [] ;Pw	-CA[]	
Convo	ocation Fe	e		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	kamination	Fees	
Mark	Statemen	t Fee		Total:							
Pavm	ent Detai	e. 1	Amount Recei	ved.	Col	llege Receint	No. and Date:				
DD N		3. 7		MICR No:		DD Date:	No. and Date.	Ва	nk.		
	-	nce (Code/N	ame):			22 2010.		120			
		nce (Code/N	,								
		ller of Exami	,						Place:	Vidyavihar	
decla	re that all	statement m	ade in this ap	plication are true,	nination. I have remitted complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:		
reque other	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be										
cance	elled or rej	ected.							Stu	udent's Signature	
Decla	ration by	Principal/HC	D/Chairperso	n							
respo	nsibility o	f fulfillment/r	ectification of		y me. The information p le/she is regular studen						
Place	:				_						
Date:	ate: College Staff Signature Principal/HOD/Chairperson										

				EMINEM							
		To explo		<i>,</i> (lits)-Regular-Rev16-T.` ompetitive Exams, Career Fain iversity.ac/. Activate your 'e-S		, .)0456] ridha' account o	'n		
2	PR		Eligi	bility Status: Eligible	Examination for 084536	m No.:	Division/Section:	Roll N 61	-	Bronde	
	ction Med			Ligible			Nationality:	India		n gha gung ng n	
msuud		ium.			Student's Pers	onal Informati	,	Inula			
Stude	nt's Name		DE DURVESH	- SHASHIKANT	Olddenits i eis		Mother's Name: SI	HAI AKA KH		Gender: Male	
			age:खंडे दुर्वेश								
			•		broli (E) Mumboi 400	0000					
	Address: B-602,Sai Aashish Behind Vikhroli Bus Depot Vikhroli (E) , Mumbai - 400083 City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083										
,	City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083 Felephone no.: Mobile no: 918097343829 Email : durvesh.k1102@gmail.com										
	DOB: Nov 02, 1999 Category: Open Physically Handicap: No										
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506939 (Status: Pass)										
Exam form appearance type: Fresher											
Paper	Details:	Plea	ase select Pa	per details which y	vou want to appear (UA	A - University A	ssessment,CA - Co	llege Asses	sment)		
SN	Pape	r Code			Paper Name					AM - AT	
1	85	601	Financial Ac	counting VII				Th-	UA [] ;Th-	CA[]	
2	85	602	Cost Accoun	ting IV				Th-	UA[];Th-	CA[]	
3			Financial Ma	•					UA[];Th-		
4		604		ndirect Taxes III)					UA [] ;Th-		
5				Paper III (Indian Ed	conomy)				UA[];Th-		
6		FSVI.8	Project Work	1	F				-UA [] ;Pw		
	Statemen			Exam Form Late Total:	ree	Exam Form	Super Late Fee	EX	amination	rees	
IVIAI K C	Statemen			10(a).							
Paymo	ent Detail	s: A	Amount Rece	ived:	Co	llege Receipt	No. and Date:				
DD No) :			MICR No:		DD Date:		Ba	nk:		
Cente	r Preferei	nce (Code/N	ame):								
		nce (Code/N	,								
		ller of Exami							Place:	Vidyavihar	
declar	e that all	statement m	ade in this ap	plication are true,	nination. I have remitte complete and correct t ribed for the examinatic	o the best of n	ny knowledge and be	elief. I	Date:		
reques	ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected.										
cance	lieu ol rej	ecieu.							St	udent's Signature	
Decla	ration by	Principal/HC	D/Chairperso	on							
respoi	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:					_						
Date:	ate: College Staff Signature Principal/HOD/Chairperson										

	Το εχρίο		S. K. Soma Application F A.and F.)(with C	naiya C Form fo Credits)	ersity of Mumba http://mum.digitalunivers College of Arts, Science or Examination of Sur)-Regular-Rev16-T.Y. wetitive Exams, Career Fairs sity.ac/. Activate your 'e-Sur	sity.ac/ ce and Comm mmer Sessior . B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem V	'l [2C00456] 'e-Suvidha' acco	unt on		
	PRN:	Eligi	ibility Status:		Examination form 084537	n No.:	Division/Secti	ion: R	oll No.:	R.	
201701	6400852147		Eligible				А		44		
Instruction N	ledium:						Nationality:	India			
					Student's Perso	onal Informati	on				
Student's Na	ame: JAGDA	ALE SAHIL SI	UBHASH				Mother's Nar	me: SAYLI		Gender: Male	
Name in Ver	macular Langua	age:जगदाळे र	ताहिल सुभाष								
Address: 7-A/24, Vrindavan Society Thane West											
City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601											
Telephone n	Telephone no.: Mobile no: 919892814054 Email : sahil21101999@gmail.com										
DOB: Oct 21, 1999 Category: Open Physically Handicap: No											
Previous Lat	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506922 (Status: Pass)										
Exam form appearance type: Fresher											
Paper Detail		ase select Pa	per details whic	ch you	want to appear (UA	- University A	ssessment,C/	A - College As	sessment)		
	aper Code				Paper Name					AM - AT	
1	85601	Financial Ac	•						Th-UA [] ;T		
2	85602	Cost Accoun							Th-UA [] ;T		
3	85603 85604		anagement III Indirect Taxes II						Th-UA [] ;T Th-UA [] ;T		
5	85607		Paper III (Indian	,					Th-UA[];T		
	4_FFSVI.8	Project Work			Silly)				Pw-UA [] ;F		
Convocation			Exam Form La	ate Fe	e	Exam Form	Super Late Fe	e	Examinatio		
Mark Statem			Total:					-			
						<u>I</u>					
Payment De	tails:	Amount Rece	I		Coll	lege Receipt I	No. and Date:		1		
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	erence (Code/N	,									
	erence (Code/N	,									
I request per declare that have gone the request for a other ground	Fo, The Controller of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Place: Vidyavihar declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I Date: Date: nave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not Date: Date: wither ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be Student's Signature										
Declaration	by Principal/HC	D/Chairpers	on						- 1		
This form is responsibilit	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.										
Place:	Place:										
Date:					College Sta	aff Signature			Seal and Si Principal/H0	gnature of DD/Chairperson	

A A		To explo		S. K. Som Application F A.and F.)(with C	naiya C Form fo Credits)	rersity of Mumb http://mum.digitalunive College of Arts, Scien for Examination of Su -Regular-Rev16-T.Y potitive Exams, Career Fairs sty.ac/. Activate your 'e-Su	e <u>rsity.ac/</u> nce and Comm ummer Session Y. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2	2C00456] Suvidha' acco	unt on	
	PR			ibility Status:	Т	Examination forr 084538		Division/Section	: R	oll No.:	
20)170164(00852163		Eligible			1111	А		52	Akadan
Instruc	ction Med	lium:			!			Nationality:	India		•
						Student's Pers	onal Informati	on			
Studer	nt's Name	e: KADAN	M AISHWAR	A MILIND				Mother's Name	: MEENA		Gender: Female
Name	in Verna	cular Langua	age:ऐश्वर्या क	दम							
Address: hanuman mandir , walmiki nagar hariyali village, gr. no.5 vikhroli east											
City: m	City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083										
Teleph	Felephone no.: Mobile no: 918286672048 Email : aishwaryakadam622@gmail.com										
DOB: N	May 18, 2	2000	Ca	tegory: Reserve	ed (SC	2)	Physically	Handicap: No			
Previo	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506930 (Status: Pass)										
Exam form appearance type: Fresher											
Paper	Details:		ase select Pa	per details whic	ch you	i want to appear (UA	- University A	ssessment,CA -	College As	sessment)	
SN		er Code				Paper Name					AM - AT
1		601	Financial Ac							Th-UA [] ;Th	
2		602	Cost Accoun	0						Th-UA [] ;Th	
3				anagement III Indirect Taxes I						Th-UA [] ;Th	
5				Paper III (Indian	,					Th-UA [] ;Th Th-UA [] ;Th	
6		FSVI.8	Project Work			Ully)				Pw-UA [] ;Pv	
-	cation Fe			Exam Form La	ate Fe		Exam Form	Super Late Fee		Examination	
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Payme	ent Detail	l s: /	Amount Rece	1		Co	llege Receipt	No. and Date:			
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		nce (Code/N	,								
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l reque declare have g reques	To, The Controller of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Place: Vidyavihar declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I Date: Date: ave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not To appearing. I shall not To appearing. I shall not										
	ther ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be ancelled or rejected. Student's Signature										
Declar	ation by	Principal/HC	D/Chairperso	on							
respor	nsibility of	f fulfillment/r	ectification of			ne. The information p she is regular studen					e. I also undertake the ance and practical
Place:	lace:										
Date:						College St	taff Signature			Seal and Sig Principal/HO	nature of D/Chairperson

	To explo	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account on http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today!											
F	PRN:		http://mum.digitaluniv bility Status:	Examination form		d login today! Division/Section:	Roll N	No.:	- China				
2017016	6400852171		rovisional	084539		В	11	8	Alter of the				
Instruction M	edium:					Nationality:	India						
				Student's Perso	onal Informati	on							
Student's Na	me: SHAH	HITIKSHA MA	ANOJ			Mother's Name: M	EENA	C	Gender: Female				
Name in Ver	nacular Langua	age:hitiksha				·							
Address: 5 bunglow behind woodlands inn opposite bus depot. M.G ROAD													
City: silvassa, Taluka: silvassa, District: Dadra and Nagar Haveli, State: Dadra and Nagar Haveli, PIN: 396230													
Telephone n	Telephone no.: Mobile no: 919824718826 Email : hitikshashah1999@gmail.com												
DOB: Dec 24	l, 1999	Cat	egory: Open		Physically	Handicap: No							
Previous Lat	est Examinatio	n Details: Sen	n IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	eat No: 050	06987 (Status: Pass)				
Exam form a	ppearance typ	e: Fresher			•								
Paper Detail	s: Plea	ase select Pap	per details which yo	ou want to appear (UA	- University A	Assessment,CA - Co	llege Asses	sment)					
SN Pa	per Code			Paper Name					AM - AT				
1	85601	Financial Acc	counting VII				Th-	-UA [] ;Th-	CA[]				
2	85602	Cost Account	ting IV				Th-	-UA [] ;Th-	CA[]				
3	85603	Financial Mai	nagement III				Th-	-UA [] ;Th-	CA[]				
4	85604	Taxation V (Ir	ndirect Taxes III)				Th-	-UA [] ;Th-	CA[]				
5	85607	Economics P	aper III (Indian Eco	onomy)			Th-	-UA[];Th-	CA[]				
6 UA	_FFSVI.8	Project Work	11				Pw	-UA[];Pw	-CA []				
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Mark Statem	ent Fee		Total:			-							
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DD No:			MICR No:		DD Date:		Ba	nk:					
	rence (Code/N	,											
Venue Prefe	rence (Code/N	ame):											
•	troller of Exam	•						Place:	Vidyavihar				
declare that	all statement m	ade in this ap	plication are true, o	ination. I have remitted complete and correct to bed for the examinatior	the best of n	ny knowledge and be	elief. I	Date:					
request for a other ground	nave gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be												
cancelled or rejected. Student's Signature													
Declaration I	y Principal/HC	D/Chairperso	n					-					
responsibility	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.												
Place:	Place:												
Date:	Pate: College Staff Signature Principal/HOD/Chairperson												

A CONTRACTOR	4	To explo		S. K. Soma Application Fo Aand F.)(with Cr	Jniversity of N http://mum.di aiya College of Arts orm for Examinatio redits)-Regular-Re , Competitive Exams, Ca luniversity.ac/. Activate	tigitalunivers ts, Science on of Sur ev16-T.Y	r <u>sity.ac/</u> ce and Comm mmer Sessior ′. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2C00456] ə-Suvidha' acco	unt on	
					luniversity.ac/. Activate Examina						
20	PR	N: 00852186	Ŭ	ibility Status: rovisional	0)84540		Division/Sectior B	n: R	oll No.: 114	Section
-				10015101161	111 101011				India		
Instruc	tion Med	llum:			Studen	+'c Dore	onal Information	Nationality:	India		
Studer	nt's Name		I VASUDEO	SAWANT	Sidden			Mother's Name	. VAIRHAV	1	Gender: Female
								Mourier 3 Marine		<u> </u>	
	Name in Vernacular Language:सिद्धी वासुदेव सावंत Address: 15/266 c.g.s. colony, sector B bhandun (east)										
Address: 15/266 c.g.s. colony sector B bhandup (east)											
	City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042 Telephone no.: Mobile no: 919869685470 Email : sawantsid112@gmail.com										
	DOB: Feb 24, 2000 Category: Open Physically Handicap: No										
	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506983 (Status: Pass)										
	Exam form appearance type: Fresher										
Paper	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN											
1	85	5601	Financial Acc	counting VII						Th-UA [] ;Th	I-CA []
2	85	5602	Cost Accoun	iting IV						Th-UA [] ;Th	I-CA[]
3	85	5603	Financial Ma	nagement III						Th-UA [] ;Th	I-CA []
4	85			Indirect Taxes III	,					Th-UA [] ;Th	I-CA []
5				Paper III (Indian	Economy)					Th-UA [] ;Th	
6			Project Work							Pw-UA [] ;Pv	
	cation Fe			Exam Form La	te Fee		Exam Form	Super Late Fee		Examination	n Fees
Mark S	Statemen	t Fee		Total:			<u> </u>				
Payme	ent Detail	ls: /	Amount Recei	ived:		Col	llege Receipt I	No. and Date:			
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Center	Prefere	nce (Code/N	ame):								
		nce (Code/Na	,								
l reque declare have g reques other g	To, The Controller of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: Date: declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I Date: Date: equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any Date: Date: other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be Date: Date:										
										S	Student's Signature
This fo respon	orm is car	refully scrutir of fulfillment/r	ectification of	College staff and							e. I also undertake the lance and practical
Place:											
Date:											

	? To explo	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today! RN: Eligibility Status: Division/Section: Roll No.:											
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				Student's Pers	onal Informati	on							
Student's N	lame: JOBAL	.IA TIRTH VI	(AS			Mother's Name: DI	EENA	C	Gender: Male				
Name in Ve	ernacular Langu	age:જોબલીચા	તીર્થ વિકાસ					I					
Address: 702 sunrise Yogi hills mulund west Mumbai													
	Address: 702 sunrise Yogi hills mulund west Mumbai City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400080												
	no.: 25616258	,		oile no: 918767387676		Emai	l : tirthjobal	lia20@gma	il.com				
DOB: Aug 18, 1999 Category: Open Physically Handicap: No													
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506929 (Status: Pass)													
Exam form appearance type: Fresher													
Paper Deta	Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)												
SN P	aper Code			Paper Name					AM - AT				
1	85601	Financial Ac	counting VII				Th	n-UA [] ;Th-	CA[]				
2	85602	Cost Accoun	ting IV				Th	-UA [] ;Th-	CA[]				
3	85603	Financial Ma	nagement III				Th	-UA [] ;Th-	CA[]				
4	85604	Taxation V (I	ndirect Taxes III)				Th	-UA [] ;Th-	CA[]				
5	85607	Economics F	Paper III (Indian Ed	conomy)			Th	-UA [] ;Th-	CA[]				
	A_FFSVI.8	Project Work						v-UA[];Pw					
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Venue Pref	erence (Code/N	ame):											
To, The Co	ntroller of Exam	ination,						Place:	Vidyavihar				
declare that	t all statement n	nade in this ap	oplication are true,	nination. I have remitte complete and correct t	o the best of m	ny knowledge and be	elief. I	Date:					
request for other groun	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.												
	i rejecteu.							Stu	udent's Signature				
Declaration	by Principal/HC	D/Chairperso	on										
responsibili	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.												
Place:													
Date:	ate: College Staff Signature Principal/HOD/Chairperson												

	R To expk	· · · ·	S. K. Somaiy Application Forr (A.and F.)(with Cred	http://mum.digitaluniver http://mum.digitaluniver a College of Arts, Scien m for Examination of Su dits)-Regular-Rev16-T.Y ompetitive Exams, Career Fairs iversity.ac/. Activate your 'e-Su	rsity.ac/ nce and Comm Immer Session 7. B.Com. (A. a	nerce (540) n 2020 event. and F.)-Sem VI [2C0)0456] vidha' accou	int on			
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Instruction	Medium:	!				Nationality:	India	ı			
				Student's Perse	onal Informati	on					
Student's I	Name: SONK	AR AVDHES	SH GORAKHNATH			Mother's Name: SA	AVITA	(Gender: Male		
Name in V	/ernacular Langu	age:सोनकर ः	अवधेश गोरखनाथ								
Address: 1	Address: 19/D/004, SANJEEVANI CHS, CHANDIVALI FARM ROAD ANDHERI EAST										
City: MUM	City: MUMBAI, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400072										
Telephone	Felephone no.: Mobile no: 918454935898 Email : sonkaravdhesh251@gmail.com										
DOB: Apr	DOB: Apr 05, 2000 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506998 (Status: Pass)											
Exam form appearance type: Fresher											
Paper Det	ails: Ple	ase select Pa	aper details which y	ou want to appear (UA	University A	Assessment,CA - Co	llege Ass	sessment)			
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5	85607		Paper III (Indian Ec	onomy)				Th-UA [] ;Th-			
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Venue Pre	eference (Code/N	lame):									
I request p declare tha have gone request for other grou	Fo, The Controller of Examination, request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leclare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any there ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.										
	·							St	udent's Signature		
This form i responsibi	eclaration by Principal/HOD/Chairperson his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical burse/term work (if any) according to university rules.										
Place:											
Date:											

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Instructi	ion Med	ium:					Nationality:	India				
					Student's Pers	sonal Informati	on					
Student	's Name	e: SALGI	A PAYAL SU	DHIR			Mother's Name: V	ARSHA	0	Gender: Female		
Name ir	Name in Vernacular Language:પાયલ											
Address: 6 Triveni Vallabh Baug Lane opp. Sai Baba Mandir Ghatkopar (East)												
	Address: 6 Triveni Vallabh Baug Lane opp. Sai Baba Mandir Ghatkopar (East) City: Mumbai, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400077											
Telepho	one no.:	25064102		Mobi	le no: 917738659137		Emai	l : payalsal	lgia123@gr	mail.com		
DOB: A	ug 15, 1	999	Ca	tegory: Open		Physically	Handicap: No					
Previou	Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506979 (Status: Pass)											
Exam fo	Exam form appearance type: Fresher											
Paper D	Details:	Ple	ase select Pa	per details which yo	ou want to appear (U	A - University A	ssessment,CA - Co	llege Asse	ssment)			
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2	85	602	Cost Accoun	ting IV				Th	n-UA [] ;Th-	CA[]		
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To, The	Contro	ller of Exam	ination,						Place:	Vidyavihar		
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request other gr	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not equest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be											
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Declara	Declaration by Principal/HOD/Chairperson											
respons	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.											
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Date:	ate: College Staff Signature Principal/HOD/Chairperson											

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Instruc	ction Med	lium:					Nationality:	India					
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	nt's Name		NISHI KETAI				Mother's Name: M	ANISHA	(Gender: Female			
Name in Vernacular Language:देसाई निशी केतन													
Address: 7 /706 somnath neekanth valley rajawadi ghatkopar east													
,	City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077												
	Telephone no.: Mobile no: 919619535068 Email : nishimanisha17@gmail.com												
DOB: Sep 17, 1999 Category: Open Physically Handicap: No Provious Latest Examination Details: Sam IV/(Pequilar Poul6) Exam Event: Apr 2019 Seat No: 0506805 (Status: Pass)													
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506895 (Status: Pass) Exam form appearance type: Fresher													
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5	85	5607	Economics F	Paper III (Indian Eco	onomy)			Т	ĥ-UA [] ;Th-	CA[]			
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	eclaration by Principal/HOD/Chairperson his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the												
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Instructio	on Med	ium:					Nationality:	India				
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Student's Name: DAND HEMINI KAMLESH Mother's Name: DEENA Gender: Female												
Name in Vernacular Language:दंड हेमिनी कमलेश												
Address: A/8 /84 SHASTRI NAGAR NR ONGC COLONY VIDHYAVIHAR EAST												
City: MU	JMBAI,	Taluka: Kurl	a, District: Mı	umbai Suburban, S	State: Maharashtra, PIN	J: 400077						
Telephor	ne no.:				ile no: 919969195218			l : dandh	nemini@gmai	il.com		
DOB: Jul 15, 1999 Category: Open Physically Handicap: No												
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506892 (Status: Pass)												
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessment)												
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Instruction M	ledium:			-		Nationality:	India						
				Student's Pers	sonal Informati	ion							
Student's Na	me: PAI VA	RUN GURI	UDAS			Mother's Name: Sl	JLOCHAI	NI	Gender: Male				
Name in Vernacular Language:पै वरून gurudas													
Address: 31,gurukripa mysore colony,chembur near rcf gate no:2													
City: MUMBA	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074												
•	elephone no.: Mobile no: 919820557525 Email : varunreus7@gmail.com												
DOB: Jul 01, 1999 Category: Open Physically Handicap: No													
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506964 (Status: Pass)													
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	PRN:		ibility Status:	Examination form 084547		Division/Section	on: R	oll No.:	())	
201701	6401819347		Eligible			А		18	Santosh	
Instruction M	/ledium:			.4		Nationality:	India			
				Student's Perso	onal Informati	on				
Student's Na	ame: DHERE	E SANTOSH	BABAN			Mother's Nan	ne: SHALINI		Gender: Male	
Name in Vernacular Language:ढेरे संतोष बबन										
Address: SANDESH NAGAR KURLA ANDHERI ROAD, BAIL BAZAR KURLA WEST										
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070										
Telephone no.: Mobile no: 918693847815 Email : santosh.dhere2000@gmail.com										
DOB: Jun 16, 2000 Category: Open Physically Handicap: No										
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0506897 (Status: Pass)									06897 (Status: Pass)	
Exam form appearance type: Fresher										
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This form is responsibility	carefully scrutin	nized by the C ectification of	College staff and b f the information. F	by me. The information pr He/she is regular student						
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Instruction Medium: Nationality: India											
Student's Personal Information											
Student's	s Name	e: AGAR'	WAL PRITH	IVI UMESH				Mother's Name: M	EENU		Gender: Male
Name in	Verna	cular Langu	age:अग्रवाल	पृथ्वी उमेश							
		-	-	-		ADAVALI, THANE W	/FST				
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Telephon	-			-		e no: 918850445675		Emai			
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Previous	s Latest	Examinatio	n Details: S	Sem IV(Regular-R	Rev16)	,	Exam Even	t: Apr-2019		Seat No:	0506880 (Status: Pass)
Exam for	rm app	earance type	e: Fresher								
Paper De	etails:	Plea	ase select P	Paper details which	ch you	ı want to appear (UA	۸ - University /	Assessment,CA - Co	llege Ase	sessment)
SN	Paper	r Code	ļ			Paper Name	,				AM - AT
1		601	601 Financial Accounting VII Th-UA [];Th-CA								
2		602	Cost Accou	0						Th-UA [] ;	
3				Management III						Th-UA [] ;	
4		604		/ (Indirect Taxes I	,					Th-UA [] ;	
5				s Paper III (Indian	Econo	omy)				Th-UA[];	
6 Convoca		FSVI.8	Project Wo	Exam Form La	ata Fa			Supor Late Fee		Pw-UA[]; Examinat	
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To, The Controller of Examination, Place: I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not Place:							-				
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Declarati	Student's Signature										
This form responsil	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:											
Date: College Sta										Seal and Signature of Principal/HOD/Chairperson	

A CON		University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today!									
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			age:સેંધાણી આ						·		
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		• •		nandivali road do	mbivali (East) Iharashtra, PIN: 421201						
	hone no.:	i, i aluka. Ka	ilyan, District.		pile no: 919321125885		Emai	il · agnyasi	enghani222	@gmail.com	
	Jan 16, 2	000	Cat	egory: Open	Sile no. 919921129009	Physically	Handicap: No	ii . agiiyasi	chynanizzz	aginali.com	
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2	85	602									
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6	UA_F	FSVI.8	Project Work						w-UA[];Pw	-CA[]	
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To, Tł	ne Contro	ller of Exami	nation,						Place:	Vidyavihar	
declar	re that all	statement m	ade in this ap	plication are true,	nination. I have remitted complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:	·	
reque other	have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be										
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		University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456]									
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PI 20170164	Ashish Candidate's Signa										
Instruction Me	Instruction Medium: Nationality: India										
Student's Personal Information											
Student's Name: DUBEY ASHISH RAMESH Mother's Name: MEENA Gender: Male											
Name in Vern	acular Langua	ge:दुबे आशि	ष रमेश								
Address: 2, B/	ASANTH SET	H CHAWL, JA	AMIL NAGAR, WA	FER TANK ROAD, B	HANDUP WES	Т					
City: MUMBA	, Taluka: Kurla	a, District: Mu	ımbai Suburban, St	ate: Maharashtra, Pl	N: 400078						
Telephone no	.:		Mobi	le no: 918828174348	}	Emai	1:				
DOB: Apr 04,	1999	Cat	egory: Open		Physically	Handicap: No					
			n IV(Regular-Rev1	6)	Exam Even	t: Apr-2019		Seat No: 201 Pass)	7016403361752 (Status:		
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other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. Student's Signature											
Declaration by	/ Principal/HO	D/Chairperso	n					-			
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	4	University of Mumbai, Mumbai http://mum.digitaluniversity.ac/ S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2020 event. B.Com. (A.and F.)(with Credits)-Regular-Rev16-T.Y. B.Com. (A. and F.)-Sem VI [2C00456] To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your 'e-Suvidha' account and login todayl										
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20		03361767	J J	ibility Status: Provisional	084551	084551		_	oll No.: 01	Dhyan Candidate's Signa		
Instruct	tion Med	lium:			<u>.</u>		Nationality:	India				
					Student's Per	sonal Informati	ion					
Studen	t's Name	e: DHYAN	NI ADITYA PF	RAVIN			Mother's Name: M	EENA	(Gender: Male		
Name i	n Verna	cular Langua	age:ध्यानी अ									
		-	-	ARI OM NAGAR, M	/ULUND EAST							
					State: Maharashtra, PIN	N: 400081						
,	one no.:				bile no: 919930879212		Emai	íl :				
DOB: N	<i>I</i> lay 26, 1	1999	Car	tegory: Open		Physically	Handicap: No					
Previou	is Latest	Examinatio	n Details: Ser	m IV(Regular-Rev1	16)	Exam Even	it: Apr-2019		Seat No: 910	0222 (Status: Pass)		
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l reques declare	st permis that all :	statement m	sent myself for ade in this ap	pplication are true,	complete and correct t	Place: Place: Place: Place: Date: Date: ed for the examination for which I am appearing. I shall not						
request other gr	request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected.											
Dealorr	Student's Signature									udent's Signature		
Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.												
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	4	To explo										
	To explore your personalized Job Opportunities, Competitive Exams, Career Fairs etc., click on 'EASY' link in your http://mum.digitaluniversity.ac/. Activate your 'e-Suvidha' account and login today!											
201	PR 170164(igibility Status: Provisional	Division/Section: B	Ro	oll No.: 88	tow				
										Candidate's Signa		
Instruction Medium: Nationality: India Student's Personal Information												
Student'	's Name	e: MEHT/	A ROHIT JI	TESH				Mother's Name: Pl	RITI		Gender: Male	
				रोहित जितश्च								
		-	•		. ROAD, KURLA W	IEST						
					n, State: Maharasht		· 400070					
Telepho					lobile no: 91876732		. 400070	Emai	il ·			
DOB: D			С	Category: Open			Physically	Handicap: No				
Previous	s Lates	t Examinatio	n Details: S	Sem IV(Regular-Re	ev16)		Exam Even	•		Seat No: 9	10221 (Status: Pass)	
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SN	Pape	er Code			Paper	Name					AM - AT	
1	85	5601 Financial Accounting VII Th-UA [];Th-CA								n-CA[]		
2	85	602	Cost Accou	unting IV					-	Th-UA [] ;Tl	n-CA[]	
3	85	603	Financial M	Management III					-	Th-UA [] ;Tl	h-CA[]	
4	85	604	Taxation V	(Indirect Taxes II	1)				-	Th-UA [] ;Tł	h-CA[]	
5	85	607	Economics	s Paper III (Indian	Economy)					Th-UA [] ;Tl	h-CA[]	
6	UA_F	FSVI.8	Project Wo	ork II					I	Pw-UA [] ;P	'w-CA []	
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Declarat	Declaration by Principal/HOD/Chairperson											
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