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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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PRN: E		Eligibility Status:	Examination form 074257	No.: Division/Sec	ction: F	Roll No.:	nodhanty			
	2016016400396743	Eligible		<b>∥</b> A		36	4			
Instru	uction Medium:			Nationality:	India					
			Student's Perso	onal Information						
Stud	ent's Name: MOHAN	ITY POOJA AJAY		Mother's Na	ame: SUJATA		Gender: Female			
Nam	e in Vernacular Langua	ge:मोहंती पूजा अजय सुजाता								
	ess: ROOM NO 38 BAU LA WEST	JDH PURNKUTI DSOUZA EST	ГАТЕ KAJUPADA							
City:	MUMBAI, Taluka: Kurla	, District: Mumbai Suburban, S	State: Maharashtra, PIN:	400072						
Tele	ohone no.:	Mot	pile no: 918425996411		Email : MOH	IANTYPOOJ	A999@GMAIL.COM			
DOB	: Jul 23, 1999	Category: Open		Physically Handicap: N	lo					
Prev	ious Latest Examination	Details: Sem IV(Regular-Rev	16)	Exam Event: Apr-2019		Seat No: 05	551007 (Status: Pass)			
Exan	n form appearance type									
Pape	er Details: Pleas	se select Paper details which y	ou want to appear ( UA	- University Assessment,0	CA - College As	ssessment)				
SN	Paper Code		Paper Name				AM - AT			
1	85501	Central Banking				Th-UA [ ] ;Th	n-CA [ ]			
2 85503 Auditing II T							n-CA [ ]			
3	85504 I	Human Resource Managemen	t			Th-UA [ ] ;Th	n-CA[]			
4	85505	Turnaround Management				Th-UA [ ] ;Th	n-CA [ ]			
5	5 85506 International Business Th-UA [];Th-CA []									
6	UBIFSVI.8	Project Work In Banking and In	surance			Pw-UA [ ] ;P	w-CA [ ]			
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	er Preference (Code/Na	<u>'</u>								
	e Preference (Code/Na	<u> </u>								
	he Controller of Examir					Place	Vidyavihar			
decla	are that all statement ma	ent myself for the ensuing exar ade in this application are true, ous and the list of books prescr	complete and correct to	the best of my knowledge	and belief. I	Date:				
requ	est for any special conc	ession such as change in time	or day fixed for universit	y Examination etc. on reli	gious or any					
	ground. I understand the elled or rejected.	nat in the event of any informat	ion being found false or	incorrect, my candidature	is liable to be					
caric	elled of rejected.					S	Student's Signature			
Deck	aration by Principal/HOI	D/Chairperson								
resp	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	e:									
Date	:		College Sta	aff Signature		Seal and Sig Principal/HC	nature of D/Chairperson			



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Examination form No.:

Disciple 16



	PRN:	Eligibility Status:	074258	i ivo	Division/Section:	Roll No	.:	a the	
	2016016400453845	Eligible			Α	71		Watte.	
nstr	uction Medium:	•			Nationality:	India	•		
			Student's Perso	nal Information	on				
Stud	ent's Name: KATKE	UMA ARUN			Mother's Name: KA	AVITA	C	Gender: Female	
Nam	e in Vernacular Langua	ge:कटके उमा अरुण कविता							
\ddr	ess: ROOM NO 05 SAV	VANT CHAWL INDIRA NAGAF	R SUNDERBAUG KAMA	NI KURLA W	'EST				
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	tate: Maharashtra, PIN:	400070					
Tele	phone no.:	Mob	ile no: 918108892356		Emai	: UMAKATK	E1998@	GMAIL.COM	
DOB	: Nov 26, 1998	Category: Reserved (	SC)	Physically	Handicap: No				
Prev	ious Latest Examinatior	n Details: Sem IV(Regular-Rev1	16)	Exam Event: Apr-2019 Seat No: 0556198 (Status: Pass)					
Exar	n form appearance type								
Pape	er Details: Plea	se select Paper details which y	ou want to appear (UA	- University A	ssessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	85501	Central Banking				Th-U	۲ [] ;Th-(	CA[]	
2	85503	Auditing II				Th-U	۲ [ ] ;Th-۱	CA[]	
3	85504	Human Resource Management	t			Th-U	۲ [ ] ;Th-(	CA[]	
4	85505	Turnaround Management			Th-U	۲ [] ;Th-(	CA[]		
5	85506	International Business				Th-U	Th-UA [] ;Th-CA []		
6	UBIFSVI.8	Project Work In Banking and In	surance			Pw-U	A [ ] ;Pw	-CA[]	
Conv	ocation Fee	Exam Form Late	Fee	e Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee	Total:							
Davr	nent Details:	mount Received:	Call	ege Receipt I	No and Date:				
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	ue Preference (Code/Na	<u> </u>							
	The Controller of Examin	•					Place:	Vidyavihar	
•		ent myself for the ensuing exan	nination. I have remitted	the prescribe	ed fee for the same.	hereby	riace.	viuyaviiiai	
decla	are that all statement ma	ade in this application are true,	complete and correct to	the best of m	y knowledge and be	lief. I	Date:		
		bus and the list of books prescries ession such as change in time							
othe	r ground. Í understand t	hat in the event of any informati							
canc	elled or rejected.						Stı	udent's Signature	
Decl	aration by Principal/HO	D/Chairperson						Julian Sugrama	
		ized by the College staff and by	me. The information pr	inted in the fo	orm is correct to the	best of my kn	owledae	. I also undertake the	
resp	esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical								
cour	se/term work (if any) ac	cording to university rules.							
nie -									
Plac	<del>U</del> .								
Date	:		College Staff Signature		Seal and Signature of				
			College Stall Signature			Principal/HOD/Chairperson			



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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: EI		Eligi	bility Status:	074259	II INO	Division/Section:	Roll No	).:	Fred	
	2016016400547776		Eligible			Α	43		Parkhe	
Instru	uction Medium:					Nationality:	India			
		_		Student's Pers	onal Informat	on				
Stud	ent's Name: PANDE	Y BARKHA				Mother's Name: SI	JMAN	G	ender: Female	
Nam	e in Vernacular Languaç	je:पांडे बरखा								
Addr	ess: HAJI MALANG RO	AD NEAR N	AMASKAR DHABA	A FLAT NO 101 TUKAI	RAM PLAZA					
City:	KALYAN, Taluka: Kalya	ın, District: T	hane, State: Maha	rashtra, PIN: 421306						
Telep	ohone no.:		Mobi	ile no: 918767675264		Emai	il : rameshpan	ndey1174	@gmail.com	
DOB	: Apr 02, 1998	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	Details: Ser	n IV(Regular-Rev1	6)	Exam Ever	t: Nov-2018	Sea	t No: 334	1936 (Status: Pass)	
Exan	n form appearance type:	Fresher								
Pape	r Details: Pleas	se select Par	per details which yo	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessn	nent)		
SN Paper Code Paper Name									AM - AT	
						Th-U	A [ ] ;Th-C	CA[]		
2 85503 Auditing II T						Th-U	A [ ] ;Th-C	CA[]		
3 85504 Human Resource Management T							Th-U	Th-UA [] ;Th-CA []		
4 85505 Turnaround Management Ti							Th-U	h-UA [] ;Th-CA []		
5 85506 International Business Th							Th-U	A [ ] ;Th-C	CA[]	
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-C								·CA []		
Conv	rocation Fee		Exam Form Late F	ee	Exam Form	Super Late Fee	Exa	mination l	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details: A	mount Recei	ived:	Co	llege Receipt	No. and Date:				
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	ie Preference (Code/Na	-								
To, T	he Controller of Examin	ation,						Place:	Vidyavihar	
decla	uest permission to presente that all statement ma	ade in this ap	oplication are true, o	complete and correct to	o the best of r	ny knowledge and be	elief. I	Date:		
reque other	gone through the syllab est for any special conce ground. I understand th	ession such	as change in time of	or day fixed for univers	ity Examination	on etc. on religious o	r any			
canc	cancelled or rejected. Student's Signature									
Deck	aration by Principal/HOI	D/Chairperso	n							
respo	form is carefully scrutini onsibility of fulfillment/re se/term work (if any) acc	ctification of	the information. He							
Place										
Date	:									



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'e-Suvidha' account on



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	PRN:	Eligi	ibility Status:	Examination form 074260	n No.:	Division/Section:	Roll No	).:	1901.0
:	2016016400551252		Eligible		l III	Α	55		Nisha
nstrı	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stud	ent's Name: SAKHA	RE NISHA N	IARAYAN			Mother's Name: Sh	HASHIKALA	(	Gender: Female
lam	e in Vernacular Langua	ge:SAKHAR	E NISHA NARAYA	N					
ddr	ess: ANJUMAN CHAW	L ROOM/11	SAKINAKA PIPEL	INE MOHILI VILLAGE (	GHATKOPAF	(W) MUMBAI-72			
City:	MUMBAI, Taluka: Kurla	a, District: Mı	umbai Suburban, S	State: Maharashtra, PIN:	: 400072				
eler	phone no.:		Mob	ile no: 919920295945		Emai	l : nishasakha	ire6@gn	nail.com
OOB: Apr 28, 1999 Category: Open Physically Handicap: N									
revi	ious Latest Examinatior	n Details: Ser	m IV(Regular-Rev1	6)	Exam Even	t: Nov-2018	Seat	t No: 334	41937 (Status: Pass)
xam form appearance type: Fresher									
ape	er Details: Plea	ise select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	lege Assessn	nent)	
SN	Paper Code			Paper Name					AM - AT
1	85501	Central Bank	king				Th-U/	A [ ] ;Th-	·CA[]
2	85503	Auditing II					Th-U/	A [ ] ;Th-	·CA[]
3	85504	Human Resc	ource Management	i .			Th-U/	A [ ] ;Th-	·CA[]
4	85505	Turnaround I	Management				Th-UA [];Th-CA []		
5	85506	International	Business				Th-U/	A [ ] ;Th-	·CA[]
6	UBIFSVI.8	Project Work	k In Banking and In	surance			Pw-U	IA [];Pw	/-CA[]
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				complete and correct to ibed for the examination				Date.	
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	r ground. I understand ti elled or rejected.	hat in the eve	ent of any informati	ion being found false or	incorrect, my	candidature is liable	to be		
<u></u>								St	udent's Signature
	aration by Principal/HO	=							
				y me. The information pr					
	onsibility of fulfillment/re se/term work (if any) ac			e/she is regular student	ા of this Colleડ્	je and has complete	d the required	J attenua	ance and practical
Place	e:								
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)ate:	•								
				College St	aff Signature				nature of
				Somege stam eightene			Principal/HOD/Chairperson		



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Examination form No.:

B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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PRN: Eligibility Status:			bility Status:	Examination forr 074261	n No.:	Division/Section:	Roll No	).:	0	
	2017016400420795		Eligible		III	Α	69			
Instru	uction Medium:					Nationality:	India	•		
				Student's Pers	onal Informati	on				
Stud	ent's Name: VORA	HASTI HARS	HAD			Mother's Name: B	HARTI	G	ender: Female	
Nam	e in Vernacular Langua	age:vora hast	i harshad							
Addr	ess: b/8 laxman chaya	gogras wadi	patharvi road, dom	bivali east						
City:	MUMBAI, Taluka: Tha	ne, District: T	hane, State: Maha	rashtra, PIN: 421201						
	phone no.:		Mob	ile no: 918451896932		Ema	il : hastivora27	7@gmail.	com	
DOB	: Nov 27, 1999	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Sei	m IV(Regular-Rev1	(6)	Exam Even	t: Apr-2019	Sea	t No: 055	1037 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessn	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Bank	ting				Th-U	A [ ] ;Th-C	CA[]	
2	85503	Auditing II					Th-U	A [ ] ;Th-C	CA[]	
3	85504	Human Resc	ource Management	t			Th-U	A [ ] ;Th-C	CA[]	
4	85505	Turnaround I	Management	-				Th-UA [];Th-CA []		
5	85506	International	Business				Th-U	Th-UA [];Th-CA []		
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []								CA []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination l	Fees	
Mark	Statement Fee		Total:							
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	er Preference (Code/N									
	ue Preference (Code/N							1		
	The Controller of Exami					16 6 11		Place:	Vidyavihar	
decla	are that all statement m	nade 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 be	elief. I	Date:		
requ	est for any special cond	cession such	as change in time	or day fixed for universi	ity Examination	on etc. on religious o	r any			
	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							Stu	dent's Signature	
Deck	aration by Principal/HC	DD/Chairperso	on							
resp	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 purse/term work (if any) according to university rules.									
Place	ə:									
Date										
Dale				College Staff Signature  Seal and Signature of Principal/HOD/Chairperso						



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Application Form for Examination of Summer Session 2020 event.

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	PRN:	Eligi	ibility Status:	Examination t 07426		Division/Section:	Roll No.	).:	The state of the s	
	2017016400420806		Eligible		-	Α	19	ŀ	The same of the sa	
Instr	uction Medium:	-				Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: GOSAI	I DARSHANA	NITIN			Mother's Name: NI	ITA		Gender: Female	
Nam	ne in Vernacular Langua	age:gujrati								
Addr	ress: Room no. 201,Sha	antaram Niwa	as Azadepada roac	shiv Parvati Mandi	r Azadepada Dor	nbivali East				
City:	Dombivali, Taluka: Kal	lyan, District:	Thane, State: Mar	arashtra, PIN: 4212	.01					
Tele	phone no.:		Moh	oile no: 91989226848	81	Emai	il : darshnagos	swami19	9@gmail.com	
DOB	3: Nov 19, 1999	Cat	tegory: Open		Physically	Handicap: No				
Prev	rious Latest Examinatior	n Details: Ser	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Seat	t No: 05	50991 (Status: Pass)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear (	UA - University A	Assessment,CA - Col	llege Assessn	nent)		
SN	Paper Code			Paper Nar	me				AM - AT	
1	85501	Central Bank	king				Th-U/	A [ ] ;Th-	-CA[]	
2	85503	Auditing II					Th-U/	A [ ] ;Th-	-CA[]	
3	85504	Human Resc	ource Management	t			Th-U/	A [ ] ;Th-	-CA[]	
4	85505	Turnaround I	Management				Th-U/	Th-UA [] ;Th-CA []		
5	85506	International	Business				Th-U/	A [ ] ;Th-	-CA[]	
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []										
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:			-				
		Amount Recei	T		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	ter Preference (Code/Na									
	ue Preference (Code/Na									
To, T	The Controller of Examin	nation,					1	Place:	Vidyavihar	
decla	uest permission to pres are that all statement ma gone through the syllal	nade in this ap	pplication are true,	complete and correct	ct to the best of m	ny knowledge and be	elief. I	Date:		
	est for any special conc									
othe:	r ground. Í understand t									
canc	celled or rejected.						l	St	tudent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on							
resp	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	ectification of	f the information. H	/ me. The informatio e/she is regular stud	n printed in the for dent of this Collect	orm is correct to the ge and has complete	best of my knowd the required	owledge d attenda	e. I also undertake the ance and practical	
Place	e:									
Date	:			College	e Staff Signature		Seal :	and Sigi	nature of	
				Conege otali dignature			Principal/HOD/Chairperson			



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'e-Suvidha' account on



PRN: Eligibility Status:				Examination for 074263	m No.:	Division/Section:	Roll No	).:		
	2017016400839441		Eligible			Α	03		teisal	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	sonal Informati	on				
Stud	ent's Name: BERA	HIRAL KANJ				Mother's Name: H	ANSA	(	Gender: Female	
Nam	e in Vernacular Langua	age:बेरा हिरल	कांजी							
Addr	ess: 901 Mahaveer tov	vers								
City:	Thane, Taluka: Thane	, District: Tha	ne, State: Maharas	shtra, PIN: 400601						
Tele	ohone no.:		Mob	ile no: 919820752233		Emai	l : hiralbera34	15@gma	il.com	
DOB	: Apr 23, 1999	Ca	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Se	m IV(Regular-Rev	6)	Exam Even	t: Apr-2019	Sea	t No: 05	50978 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name	}				AM - AT	
1	85501	Central Bank	ting				Th-U	A [ ] ;Th-	CA[]	
2	85503	Auditing II					Th-U	A [ ] ;Th-	CA[]	
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4	85505	Turnaround	Management					Th-UA [ ] ;Th-CA [ ]		
5 85506 International Business Th-UA [];Th-CA []										
6	6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []									
	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Rece	ived:	Co	llege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	C:		
Cent	er Preference (Code/N	ame):			1		<u> </u>			
Venu	ie Preference (Code/N	ame):								
To, T	he Controller of Exami	nation,						Place:	Vidyavihar	
l req	uest permission to pres	ent myself fo	r the ensuing exan	nination. I have remitte	d the prescribe	ed fee for the same.	I hereby		•	
	are that all statement magne through the sylla							Date:		
requ	est for any special cond	cession such	as change in time	or day fixed for univers	sity Examination	n etc. on religious o	r any			
	ground. I understand telled or rejected.	that in the eve	ent of any informat	on being found false o	r incorrect, my	candidature is liable	e to be			
canc	elied of rejected.							St	udent's Signature	
Deck	aration by Principal/HC	D/Chairperso	on							
	form is carefully scruting									
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular studer	nt of this Colle	ge and has complete	d the required	d attenda	ance and practical	
				I						
Place	<b>9</b> :									
				_						
Date	:									
				College Staff Signature Seal and Signature of						
							Principal/HOD/Chairperson			



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	074264	II INO	Division/Section:	Roll No	<b>)</b> .:	Mas -	
	2017016400839472	Eligible			А	16		(A)	
Instru	uction Medium:	<del>.</del>			Nationality:	India			
			Student's Pers	onal Informat	ion				
Stud	ent's Name: GOHIL	NIKUNJ NAROTTAMBHAI			Mother's Name: Bl	HARTI		Gender: Male	
Nam	e in Vernacular Langua	ge:Nikunj							
Addr	ess: Room no.24, Nare	ndra Niwas, Natthu bhavsar	Estate, Near Chirag Nag	ar Police Stat	ion, Ghatkopar (Wes	t)			
City:	MUMBAI, Taluka: , Dis	trict: Mumbai City, State: Ma	narashtra, PIN: 400086						
Tele	ohone no.:	N	obile no: 919167061859		Emai	l : nikunjgohi	l056@gm	nail.com	
DOB	: Apr 05, 1999	Category: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sem IV(Regular-R	ev16)	Exam Ever	nt: Apr-2019	Sea	ıt No: 055	50988 (Status: ATKT)	
Exan	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Paper details whic	you want to appear ( UA	- University A	Assessment,CA - Col	lege Assessi	ment)		
SN	Paper Code		Paper Name					AM - AT	
1	85501	Central Banking				Th-U	IA [ ] ;Th-	·CA[]	
2	85503	Auditing II				Th-U	IA [ ] ;Th-	·CA[]	
3	85504	Human Resource Managem	ent			Th-U	IA [ ] ;Th-	·CA[]	
							Th-UA [ ] ;Th-CA [ ]		
5 85506 International Business Th-							IA [ ] ;Th-	·CA[]	
6	UBIFSVI.8	Project Work In Banking and	Insurance			Pw-L	JA [ ] ;Pw	/-CA []	
Conv	ocation Fee	Exam Form La	te Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee	Total:							
		·							_
		mount Received:	Co	<del>,                                    </del>	No. and Date:				_
DD N		MICR No:		DD Date:		Banl	K:		_
Cent	er Preference (Code/Na	ame):							
Venu	ie Preference (Code/Na	nme):							_
To, T	he Controller of Examin	nation,					Place:	Vidyavihar	
decla	are that all statement ma	ent myself for the ensuing ex ade in this application are trubus and the list of books pre	e, complete and correct to	o the best of r	ny knowledge and be	elief. I	Date:		
requ	est for any special conc	ession such as change in tin hat in the event of any inforn	e or day fixed for univers	ity Examination	on etc. on religious or	any			
canc	cancelled or rejected. Student's Signature								
Deck	aration by Principal/HO	D/Chairperson							
resp	onsibility of fulfillment/re	ized by the College staff and ectification of the information cording to university rules.							
Place	<b>Э</b> :								
Date	:								



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PRN: Eligibility Status:			bility Status:	Examination 07426		Division/Section:	Roll No	.:	Vicen
	2017016400839681		Eligible			Α	33		ALGEIT
Instr	uction Medium:	•				Nationality:	India		
				Student's P	ersonal Informati	on			
Stud	ent's Name: <b>MEHT</b>	A VIREN PRA	DIP			Mother's Name: D.	AXA	(	Gender: Male
Nam	e in Vernacular Langua	age:વીરેન પ્રદી	lu MEHTA						
Addr	ess: T-1,19/ 20,nutan s	sandesh, valla	bhbag lane extens	sion,garodia nagar					
City:	mumbai, Taluka: Mum	bai, District: N	Mumbai City, State	: Maharashtra, PIN:	400077				
Tele	ohone no.:		Mob	ile no: 9196196917	14	Ema	il : virenmehta	1998@ູ	gmail.com
DOB	: Nov 06, 1998	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatio	n Details: Ser	n IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Seat	t No: 055	51005 (Status: Pass)
Exar	n form appearance type	e: Fresher							
Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - Co								nent)	
SN	Paper Code			Paper Na	me				AM - AT
1	85501	Central Bank	ing				Th-U	A [ ] ;Th-	CA[]
2	85503	Auditing II					Th-U	A [ ] ;Th-	CA[]
3	85504	Human Reso	ource Managemen	İ			Th-U	A [ ] ;Th-	CA[]
4	85505	Turnaround I	Management				Th-U	A [ ] ;Th-	CA[]
5 85506 International Business Th-UA [];Th-CA []								CA[]	
6	6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []								
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	Amount Recei	ived:		College Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bank	:	
Cent	er Preference (Code/N	ame):	I .		I				
	ie Preference (Code/N	-							
To, 1	he Controller of Exami	ination,						Place:	Vidyavihar
	uest permission to pres are that all statement m							Date:	
have	gone through the sylla	bus and the l	ist of books prescr	ibed for the examina	ation for which I a	m appearing. I shall	not		
	est for any special cond ground. I understand								
	elled or rejected.		one or any imprinat	on boing round raio	o or moorroot, my		3 10 50		
								St	udent's Signature
	aration by Principal/HC			The Constitution			h		Later and all other
resp	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								
cour	se/term work (if any) ac	ccording to un	iversity rules.						
Place	e:								
	<del>-</del> ·								
Date									
	•			College	e Staff Signature		Seal a	and Sigr	nature of
						Principal/HOD/Chairperson			



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	PRN:	Eligibility Status:	Examination forr 074266	m No.:	Division/Section:	Roll No	.:	Ankita
	2017016400840123	Eligible		III	Α	20		- I-TITLE TO
nstrı	uction Medium:	<del>!</del>			Nationality:	India		
			Student's Pers	onal Informati	on			
Stud	ent's Name: GUSAI	ANKITA RAMESHPURI			Mother's Name: PA	RVATIBEN	(	Gender: Female
Nam	e in Vernacular Langua	ge:गुसाई अंकिता रमेशपुरी						
Addr	ess: 51/3RD FLOOR, L	AXMI BHAVAN 1, KISAN NAC	GAR NO.1, WAGLE ES	TATE, THANI	E WEST			
City:	THANE, Taluka: Thane	e, District: Thane, State: Mahar	ashtra, PIN: 400604					
Tele	phone no.:	Mot	ile no: 917506552510		Email	: ankitagosw	ami963(	@gmail.com
DOB	: Aug 05, 1999	Category: Open		Physically	Handicap: No			
⊃rev	ous Latest Examination	n Details: Sem IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Seat	: No: 055	50992 (Status: Pass)
Exan	n form appearance type	e: Fresher						
Pape	r Details: Plea	se select Paper details which y	ou want to appear ( UA	- University A	ssessment,CA - Col	lege Assessn	nent)	
SN	Paper Code		Paper Name					AM - AT
1	85501	Central Banking				Th-UA	4 [ ] ;Th-	CA[]
2	85503	Auditing II				Th-U	4 [ ] ;Th-	CA[]
3	85504	Human Resource Managemen	<u>t</u>				4 [ ] ;Th-	
4	85505	Turnaround Management		Th			4 [ ] ;Th-	CA[]
5	85506	International Business				Th-U	4 [ ] ;Th-	CA[]
6	UBIFSVI.8	Project Work In Banking and In	surance			Pw-U	A [ ] ;Pw	-CA[]
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee	Total:						
Pavn	nent Details:	mount Received:	Col	llege Receipt	No. and Date:			
DD N		MICR No:	L	DD Date:		Bank	:	
Cent	er Preference (Code/Na	ame):				<u> </u>		
√enι	e Preference (Code/Na	ame):						
Γo, Τ	he Controller of Exami	nation,					Place:	Vidyavihar
req	uest permission to pres	ent myself for the ensuing exar	nination. I have remitted	d the prescribe	ed fee for the same. I	hereby		.,.
		ade in this application are true, bus and the list of books prescr					Date:	
equ	est for any special cond	ession such as change in time	or day fixed for univers	ity Examinatio	n etc. on religious or	any		
		hat in the event of any informat	ion being found false or	r incorrect, my	candidature is liable	to be		
Janic	elled or rejected.						St	udent's Signature
Deck	aration by Principal/HO	D/Chairperson						
		ized by the College staff and b						
		ectification of the information. He cording to university rules.	e/she is regular studen	t of this Collec	ge and has completed	d the required	d attenda	ance and practical
Jour	20/13/11/ WORK (II diriy) do	cording to university fules.						
Place	<del>)</del> :							
	-		_					
Date	•							
			College St	aff Signature				nature of
			3 3 3 3 3 3			Princi	pal/HOD	D/Chairperson



# University of Mumbai, Mumbai

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PRN: Eligibility S		bility Status:	Examination form 074267	n No.:	Division/Section:	Roll N	lo.:	_kash-		
;	2017016400840193		Eligible			Α	25		_Kasar-	
Instru	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: KANDP	AL ADITI NA	VIN			Mother's Name: LA	ALITA	C	Gender: Female	
Nam	e in Vernacular Langua	ıge:अदिति								
Addr	ess: 302 A/1 Swastik A	pt Khopat, T	hane West							
City:	Thane, Taluka: Thane,	District: Tha	ne, State: Maharas	shtra, PIN: 400601						
Telep	ohone no.:		Mob	ile no: 919869698745		Emai	il : kandpala	diti30@gn	nail.com	
DOB	: May 30, 2000	Cat	tegory: Open		Physically Handicap: No					
Previ	ious Latest Examinatior	n Details: Sei	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Se	at No: 055	50998 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ise select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Asses	sment)		
SN	Paper Code			Paper Name					AM - AT	
1		Central Bank	king					UA [ ] ;Th-		
2		Auditing II					Th-	UA [ ] ;Th-	CA[]	
3		Human Reso	ource Managemen	t				Th-UA [] ;Th-CA []		
4	85505		Management					UA [ ] ;Th-		
5	85506	International	Business				Th-	UA [ ] ;Th-	CA[]	
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw-	·UA [ ] ;Pw	-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	amination	Fees	
Mark	Statement Fee		Total:							
Davn	nent Details:	mount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N		inount riece	MICR No:		DD Date:	No. and Date.	Bar	nk.		
	er Preference (Code/Na	ame).	INIOTY NO.		DD Date.		Dai	iik.		
	ie Preference (Code/Na									
	he Controller of Examin							Place:	Vidyavihar	
			r the ensuing exan	nination. I have remitted	the prescribe	ed fee for the same.	I hereby	li lace.	vidyaviilai	
decla	are that all statement ma	ade in this ap	oplication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
	0 ,			ibed for the examinatior or day fixed for universi		11 0				
other	r ground. Í understand t			ion being found false or						
canc	ncelled or rejected. Student's Signature									
Decla	aration by Principal/HO	D/Chairperso	on							
		•		y me. The information p	rinted in the f	orm is correct to the	best of my k	nowledge	. I also undertake the	
respo	onsibility of fulfillment/re	ectification of	the information. H	e/she is regular student						
cour	se/term work (if any) ac	coraing to ur	iiversity rules.							
Place	a·									
iact	<b>少.</b> 									
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Application Form for Examination of Summer Session 2020 event.

B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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	PRN:	Eligi	ibility Status:	Examination fo 074268		Division/Section:	Roll No.	.:	0.3	
2	2017016400840274		Eligible			Α	35	1	Ange	
Instru	uction Medium:	_		<u> </u>		Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stude	ent's Name: MIRGU	JLE AMEESH	IA VASANT			Mother's Name: SH	ЮВНА	(	Gender: Female	
Nam	e in Vernacular Langua	age:मिरगुळे	अमिषा वसंत							
Addr	ess: 817, SHYAM SUN	IDER SOCIE	TY HANUMAN NA	GAR VIKHROLI PAR	KSITE					
	MUMBAI, Taluka: Kurla	a, District: Μι	umbai Suburban, S	state: Maharashtra, Pl	IN: 400079					
	phone no.:		Mob	oile no: 919167173208	8	Emai	I : ameeshami	irgule83	@gmail.com	
	: May 08, 2000		tegory: Reserved (	· · · · · · · · · · · · · · · · · · ·	Physically	Handicap: No				
	ious Latest Examination		m IV(Regular-Rev	16)	Exam Even	nt: Apr-2019	Seat	، No: 91	0023 (Status: Pass)	
	xam form appearance type: Fresher									
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (U	JA - University A	Assessment,CA - Col	lege Assessn	nent)		
SN	Paper Code			Paper Nam	ie				AM - AT	
1	85501	Central Bank	king				Th-U/	A [ ] ;Th-	-CA[]	
2	85503	Auditing II					Th-U/	A [ ] ;Th-	-CA[]	
3 85504 Human Resource Management						Th-U/	Th-UA [];Th-CA []			
4	85505	Turnaround I	Management				Th-U/	Th-UA[];Th-CA[]		
5	5 85506 International Business Th-UA [];Th-CA []									
6	6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [];Pw-CA []									
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details:	Amount Recei	wived:		College Receipt	No and Date:				
DD N			MICR No:		DD Date:	NO. and Date.	Bank			
	er Preference (Code/Na		IVIIOTT IVO.		DD Date.		Daim.	<u>·</u>		
	ue Preference (Code/Na									
	The Controller of Exami	,						Place:	Vidyavihar	
	uest permission to pres		or the ensuing exar	nination. I have remitt	ed the prescribe	ed fee for the same.	I hereby	r iacc.	Viuyaviilai	
decla	are that all statement m	nade in this ap	pplication are true,	complete and correct	t to the best of m	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond									
other	r ground. I understand t									
cance	elled or rejected.						1	St	tudent's Signature	
Deck	aration by Principal/HO	DD/Chairpers	on .							
This	form is carefully scrutin	nized by the C	College staff and by							
respo	onsibility of fulfillment/re	rectification of	f the information. H							
cours	se/term work (if any) ac	cording to un	iiversity rules.							
Place	<u> </u>									
- Iau	,. 									
Date:										
Jaic.				College	Staff Signature		Seal a	and Sigr	nature of	
				College Stall Signature			Seal and Signature of Principal/HOD/Chairperson			



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PRN: Eligibility Status:			bility Status:	Examination 07426		Division/Section:	Roll N	0.:	- Hatabara		
:	2017016400840436		Eligible			Α	60		, See . Co		
Instru	uction Medium:					Nationality:	India				
				Student's P	ersonal Informati	on					
Stud	ent's Name: SHAIKI	H KHADIJAT	ULKUBRA KHADI	M ALI		Mother's Name: A	MENA	(	Gender: Female		
Nam	e in Vernacular Langua	ıge:खदिजा									
Addr	ess: B/306, MANAVDR	ISHTI SOCIE	TY OPP. KURLA	COURT L.B.S ROA	D						
City:	MUMBAI, Taluka: Mun	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN	l: 400070						
Telep	ohone no.:		Mot	ile no: 9198677868	82	Ema	l : mohd.kha	dim92@g	mail.com		
DOB	: Sep 19, 1998	Cat	tegory: Open		Physically	Handicap: No					
Previ	ous Latest Examination	n Details: Sei	m IV(Regular-Rev	16)	Exam Event: Apr-2019 Seat No: 0551030 (Status: Pass)						
Exan	n form appearance type	e: Fresher									
Pape	r Details: Plea	ment)									
SN	Paper Code			Paper Na	Paper Name				AM - AT		
1	85501	Central Bank	ting					JA [ ] ;Th-	CA[]		
2	85503	Auditing II					Th-L	JA [ ] ;Th-	CA[]		
3	85504	Human Resc	ource Managemen				Th-L	Th-UA [];Th-CA []			
4	85505	Turnaround I	Management				Th-L	Th-UA [];Th-CA []			
5 85506 International Business									CA[]		
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw-l	JA [ ] ;Pw	-CA []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	Fees		
Mark	Statement Fee		Total:								
Pavn	nent Details:	mount Rece	ived:		College Receipt	No. and Date:					
DD N			MICR No:		DD Date:		Ban	k:			
	er Preference (Code/Na	ame):									
	e Preference (Code/Na										
To, T	he Controller of Exami	nation,						Place:	Vidyavihar		
	uest permission to pres							Date:	•		
	re that all statement m gone through the sylla							Date.			
reque	est for any special cond	ession such	as change in time	or day fixed for univ	ersity Examination	on etc. on religious o	r any				
other	ground. I understand telled or rejected.	hat in the eve	ent of any informat	ion being found fals	e or incorrect, my	candidature is liable	e to be				
canc	cilca di rejectea.							Stı	udent's Signature		
Deck	Declaration 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 sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical										
	onsibility of fulfillment/re se/term work (if any) ac			e/she is regular stud	dent of this Colle	ge and has complete	d the require	ed attenda	ance and practical		
- Court				T							
Place	<del>)</del> :										
				_							
Date											
				College Staff Signature Seal and Signature							
							Princ	Principal/HOD/Chairperson			



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'e-Suvidha' account on



PRN: Eligibility Status:			Examination form 074270	1 NO.:	Division/Section:	Roll No	o.:	4 sug			
	2017016400840452		Eligible			А	22		4)=		
nstrı	uction Medium:					Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: JAIN A	AKANSHA R	AJESH MAMTA			Mother's Name: M.	AMTA	(	Gender: Female		
lam	e in Vernacular Langua	ge:आकांक्षा									
ddr	ess: SHOP NO 6 KRUT	IKA STORE	S OPPOSITE MMI	RDA COLONY							
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN:	400078						
	ohone no.:			ile no: 918452835062	no: 918452835062 Email : jainaakansha14@gmail.com						
	: May 14, 1999		tegory: Open		Physically Handicap: No						
	ious Latest Examination		m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	t No: 05	50994 (Status: Pass)		
	n form appearance type										
		se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assess	ment)			
SN	Paper Code			Paper Name					AM - AT		
1		Central Bank	king					IA [ ] ;Th-			
2		Auditing II				Th-U	IA [ ] ;Th-	CA[]			
3			ource Management					IA [ ] ;Th-			
4			Management				Th-UA [ ] ;Th-CA [ ]				
5 85506 International Business Th-UA [];Th-CA []											
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []											
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees		
/lark	Statement Fee		Total:								
Payn	nent Details: A	mount Rece	ived:	Coll	lege Receipt	No. and Date:					
D N	lo:		MICR No:	•	DD Date:		Ban	k:			
Cent	er Preference (Code/Na	ame):					'				
/enu	e Preference (Code/Na	ime):									
o, T	he Controller of Examir	nation,						Place:	Vidyavihar		
lecla	uest permission to presone are that all statement ma	ade in this ap	oplication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:			
	gone through the syllal est for any special conc										
the	ground. Í understand tl		•	,	,	•	,				
anc	elled or rejected.							St	udent's Signature		
)ecl	aration by Principal/HO	D/Chairners	on .					<u> </u>			
	• •	•		me. The information p	rinted in the fo	orm is correct to the	best of mv kr	nowledae	. I also undertake the		
esp	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										
cour	se/term work (if any) ac	cording to ur	niversity rules.								
Place											
				_							
)ate	:										
				College Staff Signature		Seal and Signature of					
						Principal/HOD/Chairperson					



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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



	PRN:	Eligi	bility Status:	Examination for 074271	m No.:	Division/Section:	Roll No	.:		
:	2017016400840622		Eligible			Α	63		Religi	
Instru	uction Medium:	•				Nationality:	India	-		
				Student's Pers	onal Informat	on				
Stud	ent's Name: SAKSH	II MADAN SI	NGH			Mother's Name: M	ADHU SINGH	1 0	Gender: Female	
Nam	e in Vernacular Langua	age:साक्षी मद	न सिंह							
Addr	ess: B 404 LAXMI NA	RAYAN RES	IDENCY DEVDAY	A NAGAR THANE WE	ST					
City:	THANE, Taluka: Than	e, District: Th	ane, State: Mahara	ashtra, PIN: 400610						
Tele	phone no.:		Mob	ile no: 919930496783		Ema	il : aalyaneela	m@gma	i.com	
DOB	: May 07, 1998	Ca	tegory: Open		Physically Handicap: No					
Prev	ous Latest Examinatio	n Details: Se	m IV(Regular-Rev	16)	Exam Event: Apr-2019 Seat No: 0551032 (Status: Pass)					
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name	Paper Name				AM - AT	
1	85501	Central Bank	king		1				CA[]	
2	85503	Auditing II				Th-U	4 [ ] ;Th-	CA[]		
3	85504	Human Reso	ource Managemen	İ		Th-U	۲ [ ] ;Th-۱	CA[]		
4	85505	Turnaround	Management			Th-U	Th-UA [];Th-CA []			
5	85506	International	Business				Th-U	۲ [ ] ;Th-۱	CA[]	
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw-U	A [ ] ;Pw	'-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Dove	eent Deteiler	\max.mt Daga	i. rod.	0	llaga Dagaint	No. and Data:				
DD N		Amount Rece	MICR No:	00	DD Date:	No. and Date:	Bank			
			MICK NO.		DD Date.		Dank			
	er Preference (Code/N									
	e Preference (Code/N							Ι		
•	he Controller of Exami	•	r the energine even	sination I have remitte	d the properih	ad faa far tha aama	l horoby	Place:	Vidyavihar	
decla	re that all statement m	ade in this ap	oplication are true,	nination. I have remitte complete and correct t ibed for the examination	o the best of r	ny knowledge and b	elief. I	Date:		
				or day fixed for univers						
		that in the eve	ent of any informat	ion being found false o	r incorrect, my	candidature is liabl	e to be			
canc	elled or rejected.							Stu	udent's Signature	
Deck	aration by Principal/HC	D/Chairperso	on					•		
resp	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	e:									
				-						
Date										
			College S	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

Examination form No.:

B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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PRN: Eligibilit			ibility Status:	Examination for 074272	m No.:	Division/Section:	Roll No	).:		
;	2017016400840661		Eligible			Α	61		Achen	
nstrı	uction Medium:	•				Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: SHETH	I AAGAM KA	MLESH			Mother's Name: N	IPA	C	Gender: Male	
Nam	e in Vernacular Langua	age:शेठ आगम	न कमलेश							
٩ddr	ess: C/402 CHHEDA H	IEIGHTS LBS	S MARG BHANDU	P WEST						
City:	MUMBAI, Taluka: Kurl	a, District: Mi	umbai Suburban, S	State: Maharashtra, PIN	l: 400078					
Tele	ohone no.:		Mob	ile no: 918369264047	no: 918369264047					
OOB	: Aug 31, 1999	Ca	tegory: Open		Physically Handicap: No					
⊃rev	ious Latest Examinatio	n Details: Se	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Sea	t No: 055	51031 (Status: Pass)	
	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name	!				AM - AT	
1	85501	Central Bank	king				Th-U	A [ ] ;Th-	CA[]	
2	85503	Auditing II				Th-U	A [ ] ;Th-	CA[]		
3	85504	Human Reso	ource Managemen	t		Th-U	A [ ] ;Th-	CA[]		
4	85505	Turnaround	Management				Th-UA [];Th-CA []			
								A [ ] ;Th-		
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []									-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Rece	ived:	Co	llege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	C:		
Cent	er Preference (Code/N	ame):			1		<u> </u>			
/enu	ie Preference (Code/Na	ame):								
Го, Т	he Controller of Exami	nation,						Place:	Vidyavihar	
	uest permission to pres							Date:		
	are that all statement m gone through the sylla							Date.		
equ	est for any special cond	cession such	as change in time	or day fixed for univers	ity Examination	on etc. on religious o	r any			
	r ground. I understand t elled or rejected.	that in the ev	ent of any informat	ion being found false o	r incorrect, my	candidature is liable	e to be			
Jano	onou or rojoutou.							Sti	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on							
This	form is carefully scrutir	nized by the (	College staff and by	me. The information p	orinted in the f	orm is correct to the	best of my kn	owledge	. 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.									
				1						
Place	e:									
				_						
Date	•									
				College Staff Signature			Seal and Signature of			
								Principal/HOD/Chairperson		



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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	PRN:	Eligi	bility Status:	Examination for 074273	m No.:	Division/Section:	Roll No	.:	C.	
	2017016400840711	Р	rovisional		IIII	Α	39		/ smaran	
Instr	uction Medium:	•				Nationality:	India	-		
				Student's Pers	onal Informat	on				
Stud	ent's Name: <b>NAHAF</b>	R SIMRAN RA	AJENDRA			Mother's Name: S	UDARSHNA	C	Gender: Female	
Nam	e in Vernacular Langua	age:सिमरन न	ाहर							
Addr	ess: C-504 shreeji enc	lave plot 18 s	ec 13 kharghar na	vi mumbai						
City:	Kharghar, Taluka: Pan	vel, District: I	Raigad, State: Mah	arashtra, PIN: 410210						
Tele	ohone no.:		Mob	ile no: 919930253624		Ema	il : simrannaha	ar19@gr	nail.com	
DOB	: Feb 12, 2000	Ca	tegory: Open		Physically Handicap: No					
Prev	ious Latest Examinatio	n Details: Se	m IV(Regular-Rev1	(6)	Exam Event: Apr-2019 Seat No: 0551010 (Status: Pass)					
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name	Paper Name				AM - AT	
1	85501	Central Bank	king			Th-UA	۲ [] ;Th-۱	CA[]		
2	85503	Auditing II				Th-UA	۲ [] ;Th-	CA[]		
3	85504	Human Reso	ource Management	t		Th-U	4 [ ] ;Th-	CA[]		
4	85505	Turnaround I	Management			Th-UA	Th-UA [] ;Th-CA []			
5	85506	International	Business				Th-U	4 [ ] ;Th-	CA[]	
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw-U	A [ ] ;Pw	-CA[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Rece	ived:	Co	Illege Receipt	No. and Date:				
DD N		unount rece	MICR No:	00	College Receipt No. and Date:  DD Date:  Bank:					
	er Preference (Code/N	ame).	INIOTYTO.		DD Date.		Bank			
	ie Preference (Code/N	-								
	The Controller of Exami							Disease	\C.d. and her	
	uest permission to pres		r the ensuing exan	nination. I have remitte	d the prescrib	ed fee for the same	I herehy	Place:	Vidyavihar	
decla	are that all statement m	ade in this ap	oplication are true,	complete and correct t	o the best of n	ny knowledge and b	elief. I	Date:		
	gone through the sylla est for any special cond									
othe	ground. I understand									
canc	elled or rejected.							Stu	udent's Signature	
Decl	aration by Principal/HC	D/Chairperso	on .					0	adoni o oignataro	
This resp	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	ə:									
				_						
Date	:									
			College S	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	Examination form 074274	No.:	Division/Section:	Roll No.	.:	6	
:	2017016400840807		Eligible				68		Fipelo	
Instru	uction Medium:		Į.			Nationality:	India			
				Student's Perso	nal Informati	on				
Stud	ent's Name: VADHV	ANA DIPESI	H RAMESH			Mother's Name: M.	ADHU	(	Gender: Male	
Nam	e in Vernacular Langua	ge:વધવાના ક	ીપેશ રમેશ							
Addr	ess: NEAR RCF GATE	NO.3,Dr.C.G	ROAD, GANDHI	NAGAR,, OPP BLDG N	O-27,CHEM	BUR				
City:	MUMBAI, Taluka: Kurla	ı, District: Μι	ımbai Suburban, S	tate: Maharashtra, PIN:	400074					
Tele	ohone no.:		Mob	ile no: 919702571662		Emai	l : dipeshvadh	ıvana99	@gmail.com	
DOB	: Aug 30, 1999	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	Details: Ser	n IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Seat	No: 055	51036 (Status: Pass)	
Exan	n form appearance type	: Fresher								
Pape	er Details: Pleas	se select Pa <sub>l</sub>	oer details which yo	ou want to appear ( UA	- University A	Assessment,CA - Co	lege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1 85501 Central Banking					Th-U/	4 [ ] ;Th-	CA[]			
2 85503 Auditing II						Th-UA	۲ [ ] ;Th-	CA[]		
3 85504 Human Resource Management						Th-UA	۲ [ ] ;Th-	CA[]		
4	4 85505 Turnaround Management Th-UA [];Th-CA []								CA[]	
5	5 85506 International Business Th-UA [];Th-CA []									
6	UBIFSVI.8	Project Work	In Banking and Ins	surance			Pw-U	A [ ] ;Pw	/-CA [ ]	
Conv	vocation Fee		Exam Form Late I	-ee	Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee		Total:							
Payr	nent Details: A	mount Recei	ved:	Coll	ege Receipt	No. and Date:				
DD N			MICR No:	<u> </u>	DD Date:		Bank	:		
Cent	er Preference (Code/Na	ıme):		1						
Venu	ie Preference (Code/Na	me):								
To, T	he Controller of Examir	nation,						Place:	Vidyavihar	
	uest permission to prese							Date:	•	
	are that all statement magne that all statement magne through the syllat							Dute.		
requ	est for any special conc	ession such	as change in time	or day fixed for universit	y Examinatio	n etc. on religious o	any			
	ground. I understand the elled or rejected.	nat in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
	Student's Signature									
	Declaration by Principal/HOD/Chairperson									
resp	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	e:									
Date	Pate:									



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 074275	n No.:	Division/Section:	Roll No	.:	- Construction		
:	2017016400841486	Eligible		III	Α	30		Again		
Instru	uction Medium:				Nationality:	India				
			Student's Pers	onal Informati	on					
Stud	ent's Name: <b>MAHAN</b>	A ARCHANA ANANT KABIT	Ā		Mother's Name: K	ABITA	G	Gender: Female		
Nam	e in Vernacular Languaç	ge:अर्चना								
Addr	ess: R.no-9,Dattatry Ch	awl No-5,Indira Nagar Saina	th Ngr Rd,Ghatkopar(We	st)						
City:	Mumbai, Taluka: Kurla,	District: Mumbai Suburban,	State: Maharashtra, PIN:	400086						
Telep	ohone no.:	M	obile no: 917506568118		Ema	il : archumaha	ına@gma	ail.com		
DOB	: Sep 04, 1999	Category: Open		Physically	Handicap: No					
Previ	ious Latest Examination	Details: Sem IV(Regular-Re	ev16)	Exam Event: Apr-2019 Seat No: 0551002 (Status: Pass)						
Exan	n form appearance type:	: Fresher								
Pape	er Details: Pleas	se select Paper details which	n you want to appear ( UA	University A	Assessment,CA - Co	llege Assessn	nent)			
SN	Paper Code		Paper Name					AM - AT		
1	85501	Central Banking				Th-U	A [ ] ;Th-C	CA[]		
2	85503 A	Auditing II				Th-U	A [ ] ;Th-C	CA[]		
3 85504 Human Resource Management TI						Th-U	「h-UA[];Th-CA[]			
4 85505 Turnaround Management The							A [ ] ;Th-C	CA[]		
5 85506 International Business Th-							A [ ] ;Th-C	CA[]		
6	UBIFSVI.8 F	Project Work In Banking and	Insurance			Pw-U	A [ ] ;Pw-	-CA[]		
Conv	ocation Fee	Exam Form La	te Fee	Exam Form	Super Late Fee	Exar	mination l	Fees		
Mark	Statement Fee	Total:								
_	.=		lo .							
_		mount Received:	Col		No. and Date:	ln I				
DD N		MICR No:		DD Date:		Bank				
_	er Preference (Code/Na									
	e Preference (Code/Na	<u> </u>								
	he Controller of Examin		and and a state of the state of	d 10 20-		I been de	Place:	Vidyavihar		
decla	are that all statement ma	ent myself for the ensuing ex ade in this application are tru ous and the list of books pres	e, complete and correct to	the best of n	ny knowledge and b	elief. I	Date:			
reque other	est for any special conce ground. I understand the	ession such as change in timat in the event of any inform	e or day fixed for universi	ity Examinatio	on etc. on religious o	r any				
canc	ancelled or rejected. Student's Signature									
Deck	eclaration 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	e:									
Date	:									



#### University of Mumbai, Mumbai

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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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'e-Suvidha' account on

Seal and Signature of Principal/HOD/Chairperson



Examination form No.: PRN: Eligibility Status: Division/Section: Roll No.: 074276 2017016400841737 Provisional Instruction Medium: Nationality: India Student's Personal Information Student's Name: SASANE VAIBHAVI ARUN Mother's Name: VANDANA Gender: Female Name in Vernacular Language:ससाणे वैभवी अरुण Address: B004, SHIV PRERANA CHS ANDHERI-GHATKOPAR LINK ROAD ASALPHA, GHATKOPAR (W) City: MUMBAI, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400072 Telephone no.: 25148196 Mobile no: 918805371186 Email: vaibhavisasane30@gmail.com DOB: Jan 30, 2000 Category: Reserved (SBC) Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0551025 (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 Paper Name AM - AT 85501 Th-UA [];Th-CA [] Central Banking 85503 Th-UA [ ] ;Th-CA [ ] 2 Auditing II \_\_\_ Th-UA [ ] ;Th-CA [ ] 3 85504 Human Resource Management 4 85505 Th-UA [ ] ;Th-CA [ ] Turnaround Management 5 85506 International Business Th-UA [ ] ;Th-CA [ ] UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [ ] ;Pw-CA [ ] Exam Form Late Fee Convocation Fee Exam Form Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, The Controller of Examination, Place: Vidyavihar I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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 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:



# University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

 $B. Com.\ (B.\ and\ I.) (with\ Credits) - Regular-Rev16-T.Y.\ B. Com.\ (B.\&\ I.) - Sem\ VI\ [2C00346]$ 

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link in your 'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN:	Eligibility Status:	Examination form 074277	າ No.:	Division/Section:	Roll No.:	(A) 10				
2017016400841857	Eligible			Α	05	Bhosale				
Instruction Medium:		1		Nationality:	India					
		Student's Perso	onal Informati	on						
Student's Name: BHOSALE	E MANGAL BANSI			Mother's Name: SU	JREKHA	Gender: Female				
Name in Vernacular Language	 >:भोसले मंगल बन्सी									
Address: NEW GAUTAM NAG	AR PLOT NO-4, GOVANDI									
City: MUMBAI, Taluka: Kurla, [	District: Mumbai Suburban, S	State: Maharashtra, PIN:	400043							
Telephone no.:	Mob	oile no: 919702848371		Email	: pratikshabansi85	4@gmail.com				
DOB: Dec 31, 1999	Category: Open		Physically	Handicap: No						
Previous Latest Examination D	Details: Sem IV(Regular-Rev1	16)	Exam Even	t: Apr-2019	Seat No: 0	0550980 (Status: Pass)				
Exam form appearance type: F	Fresher									
Paper Details: Please	e select Paper details which y	ou want to appear ( UA	- University A	ssessment,CA - Coll	ege Assessment)					
SN Paper Code		Paper Name				AM - AT				
1 85501 Ce	entral Banking				Th-UA [ ] ;T	h-CA[]				
2 85503 Au	uditing II				Th-UA [ ] ;T	h-CA [ ]				
3 85504 Hu	uman Resource Management	t			Th-UA [ ] ;T	Th-UA [];Th-CA []				
4 85505 Tu	urnaround Management				Th-UA [ ] ;T	h-CA [ ]				
5 85506 Int	ternational Business				Th-UA [ ] ;T	h-CA[]				
6 UBIFSVI.8 Pro	roject Work In Banking and In:	surance			Pw-UA [ ] ;F	Pw-CA []				
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Examination	on Fees				
Mark Statement Fee	Total:									
<u> </u>	nount Received:		<u> </u>	No. and Date:						
DD No:	MICR No:		DD Date:		Bank:					
Center Preference (Code/Nam										
Venue Preference (Code/Name	•									
To, The Controller of Examinat					Place	e: <b>Vidyavihar</b>				
I request permission to present declare that all statement made						:				
have gone through the syllabus	is and the list of books prescri	ribed for the examination	n for which I a	m appearing. I shall i	not					
request for any special conces other ground. I understand that										
cancelled or rejected.	till tile event of any imorniau	off being found raise of	IIICOITECI, IIIy	Calluluature is habic						
	Student's Signature									
eclaration by Principal/HOD/Chairperson  is 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										
This form is carefully scrutinize responsibility of fulfillment/recti course/term work (if any) acco	tification of the information. H									
Place:										



# University of Mumbai, Mumbai

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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility		ibility Status:	074278	II INO	Division/Section:	Roll No	u:	(y)gita		
2	017016400842613		Eligible			Α	38		- Jack	
nstru	ction Medium:		<u>.</u>			Nationality:	India			
				Student's Perso	onal Informati	on				
Stude	nt's Name: MULIK	YOGITA RA	VINDRA			Mother's Name: S	НОВНА	(	Gender: Female	
Name	in Vernacular Langua	ge:मुळीक यो	गिता रविंद्र							
Addre	ss: PANCHPARMESH	HWAR APT.	ROOM NO. 105 RC	OAD NO16, KISAN NAC	GAR WAGLE	ESTATE , THANE	(W)			
City:	ΓΗΑΝΕ, Taluka: Thane	e, District: Th	nane, State: Mahara	shtra, PIN: 400604						
ГеІер	hone no.:		Mobi	ile no: 918419986753	o: 918419986753 Email : vilas.d.sawant338@gmail.com					
DOB:	Apr 30, 1999	Ca	tegory: Open		Physically	Handicap: No				
Previo	ous Latest Examination	n Details: Se	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Seat	t No: 05	51009 (Status: Pass)	
Exam	form appearance type	: Fresher								
Pape	r <b>Details:</b> Plea	se select Pa	per details which yo	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Banl	king				Th-U	A [ ] ;Th-	CA[]	
2 85503 Auditing II				Tr				A [ ] ;Th-	CA[]	
3	85504	Human Res	ource Management				Th-UA	Th-UA [] ;Th-CA []		
4	85505	Turnaround	Management				Th-U	A [ ] ;Th-	CA[]	
5	85506	International	Business				Th-U	A [ ] ;Th-	CA[]	
6	UBIFSVI.8	Project Worl	k In Banking and Ins	surance			Pw-U	A[];Pw	/-CA [ ]	
Conv	ocation Fee		Exam Form Late F	ee	e Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee		Total:							
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DD N		mount Rece	MICR No:		<u> </u>	No. and Date:	Danie			
	er Preference (Code/Na	-mo):	IWICK NO.		DD Date:		Bank			
	e Preference (Code/Na									
	he Controller of Exami							I		
		•	or the ensuing ever	ination. I have remitted	l the procerib	ad foo for the same	Lhoroby	Place:	Vidyavihar	
decla	re that all statement ma	ade in this a	pplication are true, o	complete and correct to bed for the examination	the best of n	ny knowledge and be	elief. I	Date:		
eque	st for any special conc	ession such	as change in time of	or day fixed for universi	ty Examination	on etc. on religious o	r any			
	her ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be uncelled or rejected.									
Jance	illed of rejected.							St	udent's Signature	
Decla	ration by Principal/HO	D/Chairpers	on							
respo		ectification o	f the information. He	me. The information pre/she is regular student						
Place										



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Examination form No.:

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PRN:		Eligi	bility Status:	Examination form 074279	n No.:	Division/Section:	Roll	No.:	Alexand.		
	2017016400842795		Eligible			Α	1-	4	O.M.		
nstrı	uction Medium:					Nationality:	India				
				Student's Perso	onal Informat	ion					
Stud	ent's Name: GANDI	HI APEKSHA	SURESH			Mother's Name:	ALPA	(	Gender: Female		
Nam	e in Vernacular Langua	age:GANDHI	APEKSHA SURES	SH							
Addr	ess: A- 201 HARE KRI	SHNA NIWA	S PANDURANG W	ADI MANPADA ROAD							
_		lyan, District		harashtra, PIN: 421201							
	ohone no.:			ile no: 918080796416	T		nail : apeksha	gandhi43@	@gmail.com		
	: Dec 18, 1999		tegory: Open		Physically Handicap: No						
	ious Latest Examination		m IV(Regular-Rev1	6)	Exam Ever	it: Apr-2019	S	eat No: 05	50987 (Status: Pass)		
	n form appearance type										
		se select Pa	per details which ye	ou want to appear ( UA	- University A	Assessment,CA - C	College Asses	ssment)			
SN	Paper Code			Paper Name					AM - AT		
1		Central Bank	ting					-UA [ ] ;Th-			
2		Auditing II				Th	-UA [ ] ;Th-	-CA[]			
3	85504		ource Management	:		Th	-UA [ ] ;Th-	-CA[]			
4	85505	Turnaround I	Management				Th-UA [] ;Th-CA []				
5	85506	International	Business					Th-UA [] ;Th-CA []			
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw	/-UA [ ] ;Pw	v-CA []		
Conv	ocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	E	xamination	Fees		
Mark	Statement Fee		Total:								
Dov.m	nent Details:	Amount Rece	ivod:	Call	logo Possint	No. and Data:					
DD N		Amount Nece	MICR No:		DD Date:	No. and Date:	l P	ank:			
	er Preference (Code/N	amo):	IVIICK NO.		DD Date.		Do	IIIK.			
	ie Preference (Code/Na										
	The Controller of Exami							T			
			er the encuing even	nination. I have remitted	the procerib	ad foo for the same	a I horoby	Place:	Vidyavihar		
decla	are that all statement m	ade in this ap	oplication are true,	complete and correct to	the best of r	ny knowledge and	belief. I	Date:			
				ibed for the examinatior or day fixed for universited the contraction in the contraction							
othe	ground. I understand t			on being found false or							
canc	elled or rejected.							St	udent's Signature		
Deck	aration by Principal/HO	D/Chairners						<u> </u>	adonto oignataro		
This resp	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	e:										
				_							
Date	•										
Jale.				College Sta	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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PRN: Eligibility Status:		Examination 07428		Division/Section:	Roll No	·:	Vikraso			
	2017016400842934		Eligible			Α	34		Vikrasov	
Instru	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: VIKRA	M MAHESH I	MEISHERI			Mother's Name: G	JNWANTI	(	Gender: Male	
Nam	e in Vernacular Langu	age:विक्रम महे	श मेईशेरी							
Addr	ess: 60 "SHAMMANI"	URBAN BANI	K COLONY SHIVN	ERIMARG STATIC	N ROAD					
City:	AHME, Taluka: Ahme	dnagar, Distri	ct: Ahmednagar, S	tate: Maharashtra, F	PIN: 414001					
Tele	ohone no.:		Mob	ile no: 9195456789	54	Emai	l : vikrammeis	sheri123	@gmail.com	
DOB	: Jan 18, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Sei	m IV(Regular-Rev	6)	Exam Even	t: Apr-2019	Seat	t No: 05	51006 (Status: Pass)	
Exan	n form appearance typ	e: Fresher								
Pape	er Details: Ple	ase select Pa	per details which y	ou want to appear (	UA - University A	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Bank	ting	Т				A [ ] ;Th-	CA[]	
2	85503	Auditing II					Th-U	A [ ] ;Th-	CA[]	
3	85504	Human Reso	ource Managemen				Th-U	A [ ] ;Th-	CA[]	
4	85505	Turnaround I	Management				Th-U	Th-UA [];Th-CA []		
5	85506	International	Business				Th-U	A [ ] ;Th-	CA[]	
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []								/-CA [ ]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
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		Amount Rece	ı		College Receipt	No. and Date:	lni			
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	er Preference (Code/N									
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	he Controller of Exam					. d f f db	l banab	Place:	Vidyavihar	
decla	uest permission to pres are that all statement n gone through the sylla	nade in this ap	plication are true,	complete and corre	ct to the best of m	ny knowledge and be	elief. I	Date:		
requ	est for any special con	cession such	as change in time	or day fixed for univ	ersity Examination	n etc. on religious o	any			
othei	ground. I understand elled or rejected.	that in the eve	ent of any informat	on being found false	e or incorrect, my	candidature is liable	to be			
Caric	elled of rejected.							St	udent's Signature	
Deck	aration by Principal/HC	DD/Chairperso	on							
resp	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	ə:									
Date	:			-						
			College	College Staff Signature		Seal and Signature of Principal/HOD/Chairperson				



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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

Examination form No.: PRN: Eligibility Status: Division/Section: Roll No.: 074281 2017016400843334 Eligible Nationality: Instruction Medium: India Student's Personal Information Student's Name: CHUDASAMA RITIKA DINESH Mother's Name: RASHMIBEN Gender: Female Name in Vernacular Language: CHUDASAMA RITIKA DINESH Address: ROOM NO. 31.SAHAKAR SOCIETY PANCHPARMESHWAR TEMPLE ROAD. KISAN NAGAR NO. 1. City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604 Mobile no: 919930325675 Email: ritikachudasma12@gmail.com Telephone no.: DOB: Nov 08, 1999 Physically Handicap: No Category: Open Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 910024 (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 AM - AT SN Paper Name 85501 Central Banking Th-UA [1:Th-CA [1 2 85503 Auditing II Th-UA[];Th-CA[] 3 85504 Human Resource Management Th-UA [ ] ;Th-CA [ ] 4 85505 Turnaround Management Th-UA [ ] ;Th-CA [ ] 5 85506 International Business Th-UA[];Th-CA[] \_\_\_\_\_ Pw-UA [ ] ;Pw-CA [ ] 6 **UBIFSVI.8** Project Work In Banking and Insurance Convocation Fee Exam Form Late Fee **Examination Fees** Exam Form Super Late Fee Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: DD Date: Bank: DD No. MICR No: Center Preference (Code/Name): Venue Preference (Code/Name): To, The Controller of Examination, Place: Vidyavihar I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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 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:



# University of Mumbai, Mumbai

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	PRN:	Eligi	ibility Status:	Examination f 07428		Division/Section:	Roll No	o.:	61111	
2	2017016400843423		Provisional			Α	21		(Siddhard)_	
Instru	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati					
Stude	ent's Name: SIDDH	ANT GAJAN/	AND JADHAV			Mother's Name: SA	ANGITA	(	Gender: Male	
Name	e in Vernacular Langua	 age:सिद्धांत ग	 गजानंद जाधव		-		-			
	ess: c/7,kamal kunj hou	- •		a metro station						
	mumbai, Taluka: Kurla				IN: 400084					
Telep	phone no.:		Mot	oile no: 91702496909	99	Emai	I : siddhantja	dhav774	8@gmail.com	
DOB	: Jul 09, 1999	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Sea	nt No: 055	50993 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear (	UA - University F	Assessment,CA - Col	llege Assessi	ment)		
SN	Paper Code			Paper Nar	me				AM - AT	
1	85501	Central Bank	king		1				CA[]	
2	85503	Auditing II					Th-U	JA [ ] ;Th-	CA[]	
3	85504	Human Resc	ource Management	t .		Th-UA [];Th-CA []				
4	85505	Turnaround I	Management				Th-U	Th-UA[];Th-CA[]		
5 85506 International Business Th-UA[];Th-CA[]									CA[]	
6	UBIFSVI.8	Project Work	k In Banking and In	surance			Pw-L	JA [ ] ;Pw	/-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
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	ue Preference (Code/Na									
	The Controller of Exami							Place:	Vidyavihar	
	uest permission to pres		or the ensuing exar	nination. I have remi	tted the prescribe	ed fee for the same.	I hereby	i iacc.	Vluyaviiiai	
decla	are that all statement m	nade in this ap	pplication are true,	complete and correct	ct to the best of m	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond									
other	r ground. I understand t									
cance	elled or rejected.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutin									
	se/term work (if any) ac			-		,	-		·	
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Date:							İ			
Daic.				College	e Staff Signature					
				College Staff Signature		Princi		Seal and Signature of Principal/HOD/Chairperson		



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	PRN:	Eligi'	ibility Status:	074283	III NO	Division/Section:	Roll No	<i>i.</i> :	nal	
2	2017016400843647		Eligible		<b>     </b>	Α	12		Eleginal	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informat	ion				
Stude	ent's Name: EDDULA	A KOMAL SI	HRINIVAS			Mother's Name: JA	AYSHREE		Gender: Female	
Name	e in Vernacular Languag	ge:इद्दुला को	मिल श्रीनिवास							
	ess: SHANKAR NIWAS									
City:	AMBARNATH, Taluka:	Ambarnath,	District: Thane, Str	ate: Maharashtra, PIN:	421505					
Telep	phone no.:			ile no: 917030563431		Ema	il : komaleddu	la11@gr	mail.com	
	3: Jun 04, 1999		tegory: Open		Physically	/ Handicap: No				
Previ	ious Latest Examination	Details: Ser	m IV(Regular-Rev1	6)	Exam Ever	nt: Apr-2019	Seat	t No: 055	50985 (Status: Pass)	
Exam	n form appearance type:	: Fresher								
Pape	er Details: Pleas	se select Par	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	85501 C							A [ ] ;Th-	·CA[]	
2	85503 A	Auditing II							「h-UA [ ] ;Th-CA [ ]	
3	+	Human Resc	ource Management		A [ ] ;Th-					
4	85505 T	Turnaround I	Management				Th-U/	A [ ] ;Th-	·CA[]	
5								A [ ] ;Th-		
6	UBIFSVI.8 F	<sup>2</sup> roject Work	k In Banking and Ins	surance			Pw-U	IA [ ] ;Pw	<i>i</i> -CA []	
Conv	vocation Fee		Exam Form Late F	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details: Ar	mount Recei		Col	Illege Receipt	No. and Date:				
DD N		1100	MICR No:		DD Date:					
	ter Preference (Code/Na	 ime);			122 - 2					
	ue Preference (Code/Nar									
_	The Controller of Examin							Place:	Vidyavihar	
l requ	uest permission to prese	ent myself fo							Vidyaviilai	
	are that all statement ma gone through the syllab							Date:		
reque	est for any special conce	ession such	as change in time of	or day fixed for universi	ity Examination	on etc. on religious o	r any			
other	r ground. I understand th elled or rejected.	at in the eve	ent of any informati	on being found false or	r incorrect, my	/ candidature is liable	e to be			
cance	elled or rejected.							Str	udent's Signature	
Decla	aration by Principal/HOD	)/Chairperso	วท							
respo	form is carefully scrutiniz onsibility of fulfillment/red se/term work (if any) acc	ectification of	f the information. He							
Place	э:							_		
Date:	ei:									



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S. K. Somaiya College of Arts, Science and Commerce (540)

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Examination form No.:



PRN: Eligibility Status:			bility Status:	074284	III INO	Division/Section:	Roll No	o.:	Mestil.	
	2017016400843686		Eligible			Α	48		Fiend	
nstr	uction Medium:	•				Nationality:	India			
				Student's Pers	sonal Informati	on				
Stud	ent's Name: PATIL	MOKSHADA	HARESH			Mother's Name: H.	ARSHDA	(	Gender: Female	
Nam	e in Vernacular Langua	age:पाटील मो	क्षदा हरेश							
Addr	ess: 123/18 BANDYA E	BAPU CHAW	L CHAFEGALI SIC	ON CHUNABHATTI SI	ON CHUNABL	IATTI				
City:	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN	N: 400022					
Γele∣	ohone no.:		Mob	ile no: 919769615598		Ema	il : patilmoksh	nada854@	@gmail.com	
OOB	: May 13, 2000	Ca	tegory: Reserved (	OBC)	Physically	Handicap: No				
⊃rev	ious Latest Examinatio	n Details: Se	m IV(Regular-Rev1	(6)	Exam Even	t: Apr-2019	Sea	t No: 05	51018 (Status: Pass)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( U/	A - University A	Assessment,CA - Co	llege Assess	ment)		
SN Paper Code Paper Name									AM - AT	
1	85501	Central Bank	king	Th-U	A [ ] ;Th-	CA[]				
2	85503	Auditing II					Th-U	A[];Th-	CA[]	
3	85504	Human Reso	uman Resource Management Th-UA [];Th-CA []							
4	85505	Furnaround Management   Th-UA [];Th-CA []							CA[]	
5	85506	International	Business				Th-U	A [ ] ;Th-	CA[]	
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [];Pw-CA []									r-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Rece		Co	ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:			Bank:		
Cent	er Preference (Code/N	ame):			1					
	ue Preference (Code/Na									
	he Controller of Exami							Place:	Vidyavihar	
	uest permission to pres							Data		
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equ	est for any special cond	cession such	as change in time	or day fixed for univers	sity Examination	on etc. on religious o	r any			
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Janic	elled of rejected.							St	udent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutir									
	onsibility of fulfillment/r			e/she is regular studer	nt of this Colle	ge and has complete	ed the require	d attenda	ance and practical	
cour	se/term work (if any) ac	cording to ur	inversity rules.						٦,	
Place:										
iuci	<b>J.</b>									
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Jale	•			College S	Staff Signature		Seal	and Sigr	nature of	
					College Stall Digitators			Principal/HOD/Chairperson		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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 $B. Com.\ (B.\ and\ I.) (with\ Credits)-Regular-Rev16-T.Y.\ B. Com.\ (B.\&\ I.)-Sem\ VI\ [2C00346]$ 

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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi!	ibility Status:	074285	II INO	Division/Section:	Roll No	ა.:	a side
	2017016400843895		Eligible		·IIII	Α	31		Bitte
Instru	uction Medium:					Nationality:	India		
				Student's Person	onal Informat	ion			
Stude	ent's Name: MANE A	ADITI RAVIN	IDRA			Mother's Name: S	UVARNA		Gender: Female
Name	e in Vernacular Langua	ge:माने अदित	नी रवींद्र						
Addr	ess: BUILDING NO 19 F	ROOM NO 2	10 CGSCOLON	Y GHATKOPAR WES	jΤ				
City:	MUMBAI, Taluka: Mum	ıbai, District:			00086				
	phone no.:			pile no: 918452809258		Ema	il : maneaditi(	@gmail.c	:om
	8: May 09, 2000		tegory: Open			/ Handicap: No			
	ious Latest Examination		m IV(Regular-Rev1	6)	Exam Ever	nt: Apr-2019	Sea	at No: 055	51003 (Status: Pass)
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SN	Paper Code			Paper Name					AM - AT
1		Central Bank	ing		JA [ ] ;Th-0				
2		Auditing II		·CA[]					
3			ource Management					JA [ ] ;Th-0	
4			Management					JA [ ] ;Th-0	
5		International			JA [ ] ;Th-0				
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []									/-CA [ ]
Conv	vocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Payn	ment Details:	Amount Recei	ived:	Co	llege Receipt	No. and Date:			
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Cent	ter Preference (Code/Na	ame):							
Venu	ue Preference (Code/Na	ame):							
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other	r ground. Í understand th								
cance	celled or rejected.							l <sub>Sti</sub>	udent's Signature
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cours	se/term work (if any) acc	cording to un	niversity rules.	-		•	•		·
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Date:	c								



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Application Form for Examination of Summer Session 2020 event.

B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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	PRN:	Eligibility Status:	Examination for 074286	m No.:	Division/Section:	Roll No.	:	252			
	2017016400844032	Eligible			Α	17		Phose			
nstrı	uction Medium:	·			Nationality:	India					
			Student's Pers	sonal Informati	on	,					
Stud	ent's Name: GORE	ANITA GANPAT			Mother's Name: LA	XMI	(	Gender: Female			
Nam	e in Vernacular Langua	ige:गोरे अनिता गणपत									
Addr	ess: room no-13,chawl	no.31, shiv krupa soc. kamraj r	ager. ghatkopar east	mumbai 40007	77						
City:	mumbai, Taluka: Kurla	, District: Mumbai Suburban, Si	ate: Maharashtra, PIN	: 400077							
Tele	ohone no.:	Mot	ile no: 918108701121		Emai	: instituterajc	ompute	r@gmail.com			
OOB	: Feb 29, 2000	Category: Reserved (	NT-2 (NT-C))	Physically	Handicap: No						
Prev	ious Latest Examination	No: 055	50989 (Status: Pass)								
Exan	xam form appearance type: Fresher										
Pape	er Details: Plea	se select Paper details which y	ou want to appear ( UA	A - University A	ssessment,CA - Col	lege Assessm	nent)				
SN	Paper Code			AM - AT							
1	85501	Central Banking				Th-UA	۲ [];Th-	CA[]			
2	85503	Auditing II		Th-UA	۲ [];Th-	CA[]					
3	85504	Human Resource Managemen	Th-UA	Th-UA [] ;Th-CA []							
4	85505	Turnaround Management	Th-UA	۲[];Th-	CA[]						
5	85506	Th-UA	۲[];Th-	CA[]							
6	UBIFSVI.8	Pw-U	A [ ] ;Pw	/-CA []							
Conv	ocation Fee	Exan	nination	Fees							
Mark	Statement Fee	Total:									
Pavn	nent Details:	Amount Received:	Co	ollege Receipt	No. and Date:						
DD N		MICR No:		DD Date:			:				
	er Preference (Code/Na										
	ie Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·									
	he Controller of Exami	,					Place:	Vidyavihar			
		ent myself for the ensuing exar	nination. I have remitte	d the prescribe	ed fee for the same.	hereby	1 1000.	vidyaviilai			
decla	are that all statement m	ade in this application are true,	complete and correct t	to the best of m	ny knowledge and be	lief. I	Date:				
		bus and the list of books prescression such as change in time									
othe	ground. I understand t	hat in the event of any informat									
canc	elled or rejected.						St	udent's Signature			
Deck	aration by Principal/HO	D/Chairperson									
		nized by the College staff and b									
		ectification of the information. He cording to university rules.	e/she is regular studer	nt of this Collec	ge and has complete	d the required	l attenda	ance and practical			
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iact	<b>.</b>										
Date	-										
Jaie	•		College S	taff Signature		Seal a	and Sigr	nature of			
				=		Seal and Signature of Principal/HOD/Chairperson					



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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status:				Examination form 074287	Examination form No.: 074287		Roll	No.:	Amoraia	
2	2017016400844175		Eligible			Α	3	37	Trace	
Instru	ction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stude	ent's Name: MORBI	A YAMINI SU	JRESH			Mother's Name: R.	AJSHREE	(	Gender: Female	
Name	e in Vernacular Langua	ge:મોરબીઅર	ાજશ્રી							
Addre	ess: 159,TAMBAKUWA	LA BLDG, 3	RD ,FLOOR ,ROO	M NO.62(A) BHAWANI	SHANKAR F	ROAD ,DADAR (WE	ST)			
City:	MUMBAI, Taluka: Mum	bai, District:	Mumbai City, State	e: Maharashtra, PIN: 40	0028					
Telep	hone no.:		Mob	ile no: 919029751951		Ema	il : rajshree	emorabia@g	gmail.com	
DOB:	Apr 07, 1999	Cat	tegory: Open		Physically	Handicap: No				
Previ	ous Latest Examinatior	n Details: Sei	m IV(Regular-Rev1	16)	Exam Even	t: Apr-2019	S	Seat No: 055	51008 (Status: Pass)	
Exam	form appearance type	: Fresher								
Pape	r Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Asse	essment)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Bank	ting				Th	n-UA [ ] ;Th-	CA[]	
2	85503	Auditing II		Th	Th-UA [];Th-CA []					
3	85504	Human Reso	ource Management	t			Th	n-UA [ ] ;Th-	CA[]	
4	85505	Turnaround I	Management	Th	n-UA [ ] ;Th-	CA[]				
5 85506 International Business Th-								n-UA [ ] ;Th-	CA[]	
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []									r-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	E	xamination	Fees	
Mark	Statement Fee		Total:							
		mount Rece	1		College Receipt No. and Date:			Т		
DD N			MICR No:		DD Date:			Bank:		
	er Preference (Code/Na									
	e Preference (Code/Na									
	he Controller of Examir							Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
have	gone through the syllal	bus and the l	ist of books prescr	ibed for the examination	n for which I a	m appearing. I shall	not			
				or day fixed for universit						
	ground. I understand ti elled or rejected.	nat in the eve	ent of any informat	ion being found false or	incorrect, my	candidature is liable	e to be			
								St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
respo		ectification of	the information. H	y me. The information po e/she is regular student						
Place	<b>:</b> :									
Data										



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	PRN:	Eligi	ibility Status:	Examination 1 07428		Division/Section:	Roll No	).:	Propali		
2	2017016400844191		Eligible			Α	04	l	, kavari		
Instru	ıction Medium:					Nationality:	India				
				Student's P	Personal Informati	on					
Stude	ent's Name: BHALE	EKAR PRANA	LI VASANT			Mother's Name: VA	AISHALI	(	Gender: Female		
Name	e in Vernacular Langua	age:भालेकर प्र	णाली वसंत								
Addre	ess: MRUTUNJAY HS0	G SOCIETY I	NEW KATODI PAI	A GOLIBAR ROAD	)						
City: I	MUMBAI, Taluka: Kurl	la, District: Mı	umbai Suburban, S	tate: Maharashtra, f	PIN: 400086						
Telep	phone no.:		Moh	oile no: 91970223208	83	Emai	il : padyindia@	⊉gmail.c	com		
DOB:	Oct 02, 1999	Cat	tegory: Reserved (	NT-1 (NT-B))	Physically	Handicap: No					
Previo	ous Latest Examination	n Details: Ser	m IV(Regular-Rev	6)	Exam Even	nt: Apr-2019	Sea	t No: 05	50979 (Status: Pass)		
Exam	xam form appearance type: Fresher										
Pape	aper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )										
SN	Paper Code			Paper Nar	me				AM - AT		
1	85501	Central Bank	king				Th-U	A [ ] ;Th-	-CA[]		
2	85503	Auditing II			Th-U	A [ ] ;Th-	-CA[]				
3	85504	Human Resc	ource Management	A [ ] ;Th-	-CA[]						
4	<u> </u>								-CA[]		
5	85506	International	Business				Th-U	A [ ] ;Th-	-CA[]		
6	UBIFSVI.8	Project Work	k In Banking and In	surance			Pw-U	JA [ ] ;Pw	v-CA []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees		
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	he Controller of Exami							T <sub>D</sub> ,			
	uest permission to pres		or the enquing eyer	nination. I have rem	ittad the prescrib	ad foo for the same	Lhoroby	Place:	Vidyavihar		
decla	re that all statement m	nade in this ap	pplication are true,	complete and correct	ct to the best of m	ny knowledge and be	elief. I	Date:			
	gone through the sylla est for any special cond										
other	ground. I understand t										
cance	elled or rejected.							St	tudent's Signature		
Decla	aration by Principal/HO	D/Chairperso	on						-		
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Place	E.										
Date:				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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	PRN:	Eligi	ibility Status:	Examination 07428		Division/Section:	Roll No.	.:	and 19		
:	2017016400844651	P	Provisional			А	64		Land S		
Instru	uction Medium:					Nationality:	India				
		_		Student's P	Personal Informati	on	-				
Stud	ent's Name: SONI C	CHINTAN HIT	ESH			Mother's Name: DI	NA	(	Gender: Male		
Nam	e in Vernacular Langua	age:CHINTAN	NH SONI								
Addr	ess: HITESH AGENCY	/ DIVYAMAN	I COMPLEX THOE	3H STREET							
City:	BHUJ, Taluka: Bhuj, Di	istrict: Kachc	hh, State: Gujarat,	PIN: 370001							
Teler	phone no.: 252393		Mot	oile no: 9199254196	62	Emai	il : chintansoni2	229@gr	mail.com		
DOB	: Jan 23, 1999	Cat	tegory: Open		Physically	Handicap: No					
Previ	ious Latest Examinatior	n Details: Ser	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Seat	No: 055	51033 (Status: ATKT)		
	xam form appearance type: Fresher										
Pape	aper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )										
SN	Paper Code			Paper Nai	me				AM - AT		
1	85501	Central Bank	king				Th-UA	4 [ ] ;Th-	·CA[]		
2	85503	Auditing II			Th-UA	4 [ ] ;Th-	CA[]				
3	85504	Human Resc	ource Management	Th-UA	Th-UA [] ;Th-CA []						
4	85505	Turnaround I	Management				Th-UA	4 [ ] ;Th-	·CA []		
5	85506	International	Business				Th-UA	4 [ ] ;Th-	CA[]		
6	UBIFSVI.8	Project Work	k In Banking and In	surance			Pw-U/	A [ ] ;Pw	<i>i</i> -CA []		
Conv	ocation Fee		Exam Form Late	Exam Form	Super Late Fee	Exam	mination	Fees			
Mark	Statement Fee		Total:								
		Amount Recei	T		College Receipt	No. and Date:					
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	ue Preference (Code/Na										
	The Controller of Examin							Place:	Vidyavihar		
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	r ground. I understand ti elled or rejected.	that in the eve	ent of any informati	on being found false	e or incorrect, my	candidature is liable	to be				
Janic								St	tudent's Signature		
Deck	aration by Principal/HO	D/Chairperso	on								
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	ectification of	f the information. H	/ me. The information e/she is regular student	on printed in the for dent of this Collect	orm is correct to the ge and has complete	best of my kno d the required	owledge I attenda	I also undertake the ance and practical		
Place	<b>)</b> :							<u> </u>			
Date	<del></del>			College	e Staff Signature			Seal and Signature of			
						ļ	Princir	pal/HOΓ	D/Chairperson		



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	PRN:	Eligi	ibility Status:	Examination fo 074290		Division/Section:	Roll No.	).:	73		
2	2017016400844701		Eligible			Α	24		-		
Instru	uction Medium:	_				Nationality:	India				
				Student's Pe	ersonal Informati	on					
Stude	ent's Name: KADAN	NE RUCHITA	YASHWANT			Mother's Name: SH	IRADDHA	(	Gender: Female		
Name	e in Vernacular Langua	age:ऋचिता य	शवंत कडणे								
Addr	ess: Hirabaug, Kamaw	vadi, Behind F	R.K. Studio Chemb	our, Mumbai							
City:	Mumbai, Taluka: Kurla	a, District: Mur	mbai Suburban, St	ate: Maharashtra, PII	N: 400088						
	phone no.:		Mot	oile no: 91810897444	1	Emai <sup>r</sup>	l : ruchitakada	ane1999	@gmail.com		
	: Oct 15, 1999		tegory: Open		Physically	Handicap: No					
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0550997 (Status: Pass)											
	Exam form appearance type: Fresher										
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( L	JA - University A	ssessment,CA - Col	lege Assessn	nent)			
SN	Paper Code			Paper Nam	ne				AM - AT		
1	85501	Central Bank	entral Banking						-CA[]		
2	85503	Auditing II			Th-U/	A [ ] ;Th-	·CA[]				
3									-CA[]		
<u> </u>									-CA[]		
5 85506 International Business Th-UA [];Th-CA []									·CA[]		
6	UBIFSVI.8	Project Work	k In Banking and In	surance	·		Pw-U	JA [ ] ;Pw	v-CA []		
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee		Total:								
Pavn	ment Details:	Amount Recei	ived:		College Receipt	No and Date:					
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	er Preference (Code/N		1		1			-			
	ue Preference (Code/N										
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other	r ground. I understand										
canc.	elled or rejected.						!	St	tudent's Signature		
Decla	aration by Principal/HC	OD/Chairperso	on								
	form is carefully scrutir onsibility of fulfillment/r										
	se/term work (if any) ac						<u></u>				
Place	۵۰										
				_							
Date:	ž										
				College	Staff Signature				nature of		
						1	Princi	ipal/HOΓ	D/Chairperson		



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'e-Suvidha' account on

Seal and Signature of Principal/HOD/Chairperson



Examination form No.: Eligibility Status: PRN: Division/Section: Roll No.: 074291 2017016400846023 Eligible Instruction Medium: Nationality: India Student's Personal Information PATEL SUMIT RAMESH Student's Name: Mother's Name: URMILA Gender: Male Name in Vernacular Language:समित Address: SAKPAL CHAWL, DATTATRAYA NAGAR, JAGADUSHA NAGAR, City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086 Telephone no.: Mobile no: 919870291102 Email: adarshpatel750@gmail.com DOB: Dec 14, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0551015 (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 Paper Name AM - AT 85501 Th-UA [];Th-CA [] Central Banking 85503 Th-UA [ ] ;Th-CA [ ] 2 Auditing II \_\_\_ Th-UA [ ] ;Th-CA [ ] 3 85504 Human Resource Management 4 85505 Turnaround Management Th-UA[];Th-CA[] 5 85506 International Business Th-UA [ ] ;Th-CA [ ] UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [ ] ;Pw-CA [ ] Exam Form Late Fee Convocation Fee Exam Form Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, The Controller of Examination, Place: Vidyavihar I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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 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:



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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Examination form No.:



	PRN:	Eligi'	ibility Status:	074292	II INO	Division/Section:	Roll No	ა.:		
:	2017016400846054		Eligible		III	Α	40		· Fello	
nstrı	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stud	ent's Name: <b>DEEPA</b>	SANJAY NA	ANAVARE			Mother's Name: RE	ESHMA	(	Gender: Female	
lam	e in Vernacular Languaç	ge:मराठी								
ddr	ess: Sanjay nanavare ro	oom no, 2 G	. B. Road near Wes	st, Thane Sanjay nanav	vare room no	, 2 G. B. Road, near	water tank th	ane Doç	garipada thane	
City:	Thane , Taluka: Thane,	, District: The	ane, State: Mahara	shtra, PIN: 400615						
ele	phone no.: 9819613604			pile no: 918652470503		Emai	il : deepenana	avare28@	@gmali.com	
ОВ	3: Feb 28, 2000	Cat	tegory: Reserved (	SC)	Physically	/ Handicap: No				
rev	ious Latest Examination	า Details: Ser	m IV(Regular-Rev1	(6)	Exam Even	nt: Apr-2019	Sea	t No: 055	51011 (Status: Pass)	
xan	n form appearance type	: Fresher								
<u> </u>	er Details: Pleas	se select Par	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Bank	ting				Th-U	JA [ ] ;Th-	-CA[]	
2	85503 A	Auditing II	uditing II Th-UA [];Th-CA []							
3	85504 H	Human Resc	uman Resource Management Th-UA [];Th-CA []							
4	85505	Turnaround I	Th-UA [];Th-CA []							
5	85506 I	International	Business					JA [ ] ;Th-		
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []								v-CA [ ]		
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_		Amount Recei	T	<u> </u>	College Receipt No. and Date:					
N DC			MICR No:		DD Date:		Bank	K:		
	ter Preference (Code/Na									
	ue Preference (Code/Na									
•	The Controller of Examin	•	· Oring aver	of the state of th	t the evaporib	the come	I bearing	Place:	Vidyavihar	
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eque	est for any special conce	ession such	as change in time	or day fixed for universit	ity Examinatio	on etc. on religious or	r any			
ther	r ground. I understand th	nat in the eve	ent of any informati	on being found false or	incorrect, my	/ candidature is liable	e to be			
anc	elled or rejected.							St	tudent's Signature	
)ecl	aration by Principal/HOI	D/Chairperso	on							
This esp	form is carefully scrutini onsibility of fulfillment/re se/term work (if any) acc	nized by the Cectification of	College staff and by f the information. He							
Place	a:									
Date	:			College St	aff Signature			Seal and Signature of		
						ļ	, Princ	ipai/HOL	D/Chairperson	



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PRN: Eligibility Status:				Examination 6		Division/Section:	Roll No	).:	推
	2017016400846785	Р	rovisional		-	Α	41		in EV
Instr	uction Medium:					Nationality:	India		
				Student's P	ersonal Informati	on			
Stud	ent's Name: NANGA	RE SIDDHI	RAJAN			Mother's Name: R	AJASHREE	(	Gender: Female
Nam	e in Vernacular Langua	ge:नांगरे सिद	धी राजन						
Addr	ess: 1/4 PEDEKAR MA	NZIL , SARV	ODYA BHANDUF	(W), MUMBAI					
City:	mumbai, Taluka: Kurla,	District: Mu	mbai Suburban, S	ate: Maharashtra, P	IN: 400078				
Tele	phone no.:		Mol	ile no: 9186526623	51	Emai	l : siddhinang	are1412	1999@gamil.com
DOB	: Dec 14, 1999	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	Details: Sei	m IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Sea	t No: 05	51012 (Status: Pass)
Exar	n form appearance type	: Fresher							
Pape		se select Pa	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessr	ment)	
SN	Paper Code			Paper Nar	me				AM - AT
1	85501	Central Bank	ting				Th-U	A [ ] ;Th-	CA[]
2	85503	Auditing II					Th-U	A [ ] ;Th-	CA[]
3			ource Managemen	i .				A [ ] ;Th-	
4		Turnaround I	Management					A [ ] ;Th-	
5 85506 International Business Th-UA [];Th-CA []									
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw-U	JA [ ] ;Pw	/-CA [ ]
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	mount Rece	ived <sup>.</sup>		College Receipt	No and Date:			
DD 1			MICR No:		DD Date:		Bank	······································	
	er Preference (Code/Na	ıme):							
	ue Preference (Code/Na								
To, 1	The Controller of Examir	nation,						Place:	Vidyavihar
	uest permission to prese							Data	·
	are that all statement mage gone through the syllat							Date:	
requ	est for any special conc	ession such	as change in time	or day fixed for unive	ersity Examination	on etc. on religious o	any		
	r ground. I understand the elled or rejected.	nat in the eve	ent of any informat	on being found false	e or incorrect, my	candidature is liable	e to be		
canc	clica of rejected.							St	udent's Signature
Declaration by Principal/HOD/Chairperson									
	is 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								
	se/term work (if any) ac			e/sile is regular stuc	ient of this Colleç	ge and has complete	u trie required	u allenud	ance and practical
Plac	e:								
				-					
Date	:				0. "0.				
			College Staff Signature			and Sigr ipal/HOI	D/Chairperson		



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'e-Suvidha' account on



PRN: Eligibility Status:				Examination for 074294	m No.:	Division/Section:	Roll No	ı.:	
	2017016400847057		Eligible		III	Α	23		
Instr	uction Medium:					Nationality:	India		
				Student's Pers	sonal Informati	on			
Stud	ent's Name: JAIN J	YAN RAJES	SH			Mother's Name: U	SHA	(	Gender: Male
Nam	e in Vernacular Langua	ige:जयन							
Addr	ess: 405 ,Shiv Srushti,	Ashok Kedar	e Chowk, Bhandu	o-West.					
	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN	N: 400078				
Tele	ohone no.:		Mob	ile no: 919892716154		Emai	l : jayan.jain5	4@gmai	il.com
	: Jul 29, 1999		tegory: Open			Handicap: No			
	ious Latest Examination		m IV(Regular-Rev	6)	Exam Even	t: Apr-2019	Sea	t No: 055	50995 (Status: Pass)
	n form appearance type								
		ise select Pa	per details which y	ou want to appear ( U		Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Name	)				AM - AT
1		Central Bank	king					A [ ] ;Th-	
2	85503	Auditing II						A [ ] ;Th-	
3			ource Managemen					A [] ;Th-	
5	85506	International	Management					A [ ] ;Th-	
6			In Banking and In	curanco				A [ ] ;Th-  A [ ] ;Pw	
_	ocation Fee	Project Work	Exam Form Late		Evam Form	Super Late Fee	<u>'</u>	mination	
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Payr	nent Details:	Amount Rece	ived:	Co	ollege Receipt	No. and Date:			
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Cent	er Preference (Code/N	ame):							
	ie Preference (Code/Na	<u> </u>							
	he Controller of Exami							Place:	Vidyavihar
decla	uest permission to pres are that all statement m gone through the sylla	ade in this ap	oplication are true,	complete and correct	to the best of n	ny knowledge and be	elief. I	Date:	
requ	est for any special cond ground. I understand t	ession such	as change in time	or day fixed for univers	sity Examination	on etc. on religious o	r any		
	elled or rejected.	inat in the eve	one of any informat	on being lound raise c	n incorrect, my	candidatare is liable	o to be		
		D (0)						St	udent's Signature
This resp	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 sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical hurse/term work (if any) according to university rules.								
Place	ə:								
Date	:			_			_		ِ
				College S	College Staff Signature		Seal and Signature of Principal/HOD/Chairperson		



Date:

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eli			bility Status:	Examination form 074295	No.:	Division/Section:	Roll No	0.:	D.K. SHAH
:	2017016400847282	Pi	rovisional			Α	58		
Instru	uction Medium:	•				Nationality:	India		
				Student's Perso	nal Informati	on			
Stud	ent's Name: SHAH [	DHRUVISHA	KETANBHAI			Mother's Name: AS	SHABEN		Gender: Female
Nam	e in Vernacular Langua	ge:शाह ध्रुविश	ग केतनभाई						
Addr	ess: ROOM NO 4, SEC	OND FLOOF	R, DRAUPATI NIW	/AS SANGITAWADI NE	RURKAR RO	OAD, DOMBIVLI EAS	ST .		
City:	DOMBIVLI, Taluka: Ka	lyan, District:	Thane, State: Ma	harashtra, PIN: 421201					
Tele	phone no.:		Mob	pile no: 918655334040		Emai	l : Dhruvisha	s16@gm	ail.com
DOB	: Jul 16, 2000	Cat	tegory: Open		Physically Handicap: No				
Prev	ious Latest Examinatior	n Details: Ser	m IV(Regular-Rev1	16)	Exam Even	t: Apr-2019	Sea	at No: 055	51027 (Status: Pass)
Exan	n form appearance type								
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessi	ment)	
SN	Paper Code			Paper Name					AM - AT
1		Central Bank	king					JA [ ] ;Th-	
2		Auditing II						JA [ ] ;Th-	
3			ource Management	t				JA [ ] ;Th-	
4			Management .					JA [ ] ;Th-	
5		International						JA [ ] ;Th-	
6		Project Work	In Banking and In					JA [ ] ;Pw	
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	mount Recei	ived:	Coll	ege Receint	No. and Date:			
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	er Preference (Code/Na	ame):					1		
	ue Preference (Code/Na								
To, T	he Controller of Examin	nation,						Place:	Vidyavihar
				nination. I have remitted complete and correct to				Date:	•
have	gone through the syllal	bus and the l	ist of books prescr	ibed for the examination	for which I a	m appearing. I shall	not	$\vdash$	
				or day fixed for universit ion being found false or					
	celled or rejected.								
		- /a: .						Sti	udent's Signature
	aration by Principal/HO form is carefully scrutin	•		y me. The information pr	inted in the fo	orm is correct to the	best of my kr	nowledge	e. I also undertake the
	onsibility of fulfillment/re se/term work (if any) ac			e/she is regular student	of this Collec	ge and has complete	d the require	d attenda	ance and practical
Place	e:								
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	PRN:	Eligi	bility Status:	Examination form 074296	ı No.:	Division/Section:	Roll N	lo.:	liyati"	
	2017016400847444	P	rovisional			Α	59	)	- Juguer	
nstrı	uction Medium:					Nationality:	India			
				Student's Perso	nal Informati	on				
Stud	ent's Name: SHAH I	NYATI AMIT				Mother's Name: JY	OTI	(	Gender: Female	
lam	e in Vernacular Langua	ge:નિયાતિ								
Addr	ess: 402-SAMRIDDHI (	GANESHGA	/DE ROAD BEHIN	D VIJAYA BANK						
City:	MULUND, Taluka: Mur	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN: 40	08000					
ele	ohone no.:		Mob	ile no: 918487845165		Emai	l : sniyati19	9@gmail.c	com	
ОВ	: Mar 08, 1999	Cat	egory: Open		Physically	Handicap: No				
rev	ious Latest Examination	n Details: Ser	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	at No: 055	51029 (Status: Pass)	
	n form appearance type	: Fresher								
ape	r Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	lege Asses	sment)		
SN	Paper Code			Paper Name					AM - AT	
1		Central Bank	ing				Th-	UA [ ] ;Th-	CA[]	
2		Auditing II						UA [ ] ;Th-		
3			ource Management					UA [ ] ;Th-		
4			Management					Th-UA [ ] ;Th-CA [ ]		
5		International						UA [ ] ;Th-		
6		Project Work	In Banking and In					-UA [ ] ;Pw		
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	amination	Fees	
/lark	Statement Fee		Total:							
ayn	nent Details:	mount Recei	ived:	Coll	ege Receipt	No. and Date:				
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Cent	er Preference (Code/Na	ame):					'			
/enu	ie Preference (Code/Na	ime):								
o, T	he Controller of Exami	nation,						Place:	Vidyavihar	
lecla	are that all statement ma	ade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
				bed for the examination or day fixed for universited the contraction in the contraction						
the	ground. I understand t			on being found false or						
anc	elled or rejected.							St	udent's Signature	
Deck	claration by Principal/HOD/Chairperson									
esp	s 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 ponsibility 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	<del>)</del> :									
Date	:			College Sta	aff Signature			al and Sign	nature of	



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	PRN:	Elig	ibility Status:	Examination f 07429		Division/Section:	Roll No	D.:	- Canara
2017	016400847452		Eligible			А	8		J. Milion
Instruction	n Medium:					Nationality:	India		
				Student's Pe	ersonal Informat				
Student's	Name: CHOTA	ALIYA TRUP	TI CHANDRAKAN	T JYOTSNA		Mother's Name: J	OTSNA	(	Gender: Female
Name in V	/ernacular Langua	age:તૃપ્તિ						•	
Address:	144,1/3, PANCHS	SEEL CHS N	EAR MUKATI DHA	M BHIMWADI DR.R	R.P.RD MULUND	) WEST			
City: MUN	MBAI, Taluka: Mur	mbai, District:	Mumbai City, Stat	e: Maharashtra, PIN:	: 400080				
Telephone	e no.:		Mob	ile no: 91900435656	69	Emai	l : Truptichota	aliya215(	@gmail.com
DOB: Jun	24, 1999	Ca	tegory: Open		Physically	Handicap: No			
Previous L	Latest Examinatio	n Details: Se	m IV(Regular-Rev1	6)	Exam Ever	nt: Apr-2019	Sea	t No: 055	50983 (Status: Pass)
	n appearance type	e: Fresher							
Paper Det	tails: Plea	ase select Pa	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessi	ment)	
	Paper Code			Paper Nan	ne				AM - AT
1	85501	Central Banl	king					A [ ] ;Th-	
2	85503	Auditing II						A [ ] ;Th-	
3	85504		ource Management	:				A [ ] ;Th-	
4	85505		Management					A [ ] ;Th-	
5	85506	International						A [ ] ;Th-	
6	UBIFSVI.8	Project Worl	k In Banking and In		lee	0		JA [ ] ;Pw	
Convocati			Exam Form Late	-ee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark State	ement Fee		Total:						
Payment I	Details:	Amount Rece	ived:		College Receipt	No. and Date:			
DD No:	•		MICR No:		DD Date:		Banl	<b>C</b> :	
Center Pro	eference (Code/N	lame):							
Venue Pre	eference (Code/N	ame):							
	ontroller of Exami							Place:	Vidyavihar
						ed fee for the same. ny knowledge and be		Date:	
have gone	e through the sylla	bus and the	list of books prescr	bed for the examina	tion for which I a	am appearing. I shall	not		
						on etc. on religious o / candidature is liable			
	or rejected.	uiai iii uie ev	ent of any informat	on being lound raise	or incorrect, my	Candidature is liable	e to be		
								St	udent's Signature
	on by Principal/HC			T1 . 6					
	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								
	rm work (if any) ac					<b>5</b>			
Place:									
Date:				Callana	Stoff Cianature		Ca-l	and Cic-	noture of
				College Staff Signature		Seal and Signature of Principal/HOD/Chairperson			



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Eligibility Status: Examination form No.:

'e-Suvidha' account on



	PRN:	Eligi	bility Status:	07429	8	Division/Section:	Roll N	10.:	ATTACK!
	2017016400848447		Eligible			Α	50		
Instr	uction Medium:	•				Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: PENDS	SE AKSHATA	RAM			Mother's Name: B	HAVANA	(	Gender: Female
Nam	e in Vernacular Langua	age:अक्षता							
	ess: ROOM NO 9,BHA G,VISVESHVAR MAN			ISVESHVAR MAND	OIR ,OLD KURLA	WEST ROOM NO	9,BHAVE C	OMPOND	,KALE
City:	MUMBAI, Taluka: Mur	nbai, District:	Mumbai City, State	e: Maharashtra, PIN:	400070				
Tele	ohone no.:		Mob	ile no: 91992083987	7	Ema	il : akshatarp	endse@g	gmail.com
DOB	: Sep 27, 1999	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatio	n Details: Ser	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	at No: 05	51020 (Status: Pass)
Exar	n form appearance type	e: Fresher							
Pape	er Details: Plea	se select Pa <sub>l</sub>	per details which ye	ou want to appear ( l	JA - University A	Assessment,CA - Co	llege Assess	sment)	
SN	Paper Code			Paper Nan	ne				AM - AT
1	85501	Central Bank	ing				Th-l	JA [ ] ;Th-	·CA[]
2	85503	Auditing II					Th-l	JA [ ] ;Th-	·CA[]
3	85504	Human Reso	urce Management				Th-l	JA [ ] ;Th-	·CA[]
4	85505	Turnaround N	Management				Th-l	JA [ ] ;Th-	·CA[]
5	85506	International	Business				Th-l	JA [ ] ;Th-	·CA[]
6	UBIFSVI.8	Project Work	In Banking and Ins	surance			Pw-	UA [ ] ;Pw	/-CA[]
Conv	ocation Fee		Exam Form Late I	-ee	Exam Form	Super Late Fee	Ex	amination	Fees
Mark	Statement Fee		Total:						
_				1.					
		Amount Recei			College Receipt	No. and Date:	15		
DD N			MICR No:		DD Date:		Bar	ık:	
	er Preference (Code/N								
	ie Preference (Code/N	<u> </u>						_	
	he Controller of Exami							Place:	Vidyavihar
decla	uest permission to pres are that all statement m gone through the sylla	ade in this ap	plication are true,	complete and correc	t to the best of n	ny knowledge and be	elief. I	Date:	
requ othe	est for any special cond ground. I understand	cession such	as change in time	or day fixed for unive	ersity Examination	n etc. on religious o	r any		
cancelled or rejected.  Student's Signature								udent's Signature	
Decl	aration by Principal/HC	D/Chairperso	on						
resp	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	e:								
Date:				College	Staff Signature			l and Sigr	nature of D/Chairperson



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status:			ility Status:	Examination for 074299	m No.:	Division/Section:	Roll No	.:	Anagh
:	2017016400848706	E	Eligible		Ш	А	01		Aresit
Instru	uction Medium:					Nationality:	India		
				Student's Pers	onal Informat	on			
Stude	ent's Name: AKASH	KAMLESH AJ	JMERA			Mother's Name: NI	EELAM	G	iender: Male
Nam	e in Vernacular Langua	ge:आकाश							
Addr	ess: 34 Baburao patil ni	was gandhina	gar dombivli east						
City:	dombivli, Taluka: Kalya	n, District: Tha	ane, State: Mahar	ashtra, PIN: 421201					
Telep	ohone no.:		Mobi	ile no: 917715950128		Emai	l : aajmera72	@gmail.c	com
	: Sep 24, 1999		gory: Open	_	<del></del>	Handicap: No			
Previ	ious Latest Examination	Details: Sem	IV(Regular-Rev1	6)	Exam Ever	t: Apr-2019	Seat	t No: 055	0977 (Status: Pass)
Exan	n form appearance type	: Fresher							
Pape	r Details: Pleas	se select Pape	er details which yo	ou want to appear ( UA	A - University A	Assessment,CA - Co	lege Assessn	nent)	
SN	Paper Code			Paper Name	!				AM - AT
1		Central Bankin	ng				Th-U	A [ ] ;Th-0	CA[]
2		Auditing II					Th-U	A [ ] ;Th-0	CA[]
3	85504 I	Human Resou	ırce Management				Th-U	A [ ] ;Th-0	CA[]
4	85505	Turnaround Ma	anagement				Th-U	h-UA [ ] ;Th-CA [ ]	
5	85506 I	nternational B	Business				Th-U	A [ ] ;Th-0	CA[]
6	UBIFSVI.8	Project Work In	n Banking and Ins	surance			Pw-U	A [ ] ;Pw-	·CA [ ]
Conv	ocation Fee	E	Exam Form Late F	-ee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee	Т	Total:						
		mount Receive		Co		No. and Date:	- In .		
DD N			MICR No:		DD Date:		Bank	:	
	er Preference (Code/Na								
	ie Preference (Code/Na	-							
	he Controller of Examir	•						Place:	Vidyavihar
decla	uest permission to prese are that all statement ma gone through the syllat	ade in this app	olication are true, o	complete and correct to	o the best of r	ny knowledge and be	elief. I	Date:	
reque other	est for any special conce ground. I understand the	ession such as	s change in time o	or day fixed for univers	ity Examination	on etc. on religious or	any		
canc	cancelled or rejected. Student's Signature								
Decla	aration by Principal/HOI	D/Chairperson	1						
respo	form is carefully scruting consibility of fulfillment/re se/term work (if any) acc	ctification of th	he information. He						
Place	e:								
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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 074300	ı No.:	Division/Section:	Roll No	).:	
:	2017016400848714	Eligible		II	Α	26	Riyax	
Instru	uction Medium:				Nationality:	India	•	
		_	Student's Perso	onal Informati	on			
Stude	ent's Name: KATARI	MAL RIYA KANTILAL			Mother's Name: SA	KRI	Gender: Female	
Nam	e in Vernacular Languaç	ge:Katarmal Riya Kantital						
Addr	ess: Room no 4, F chaw	vl ,Shivaji Nagar Asalpha JM ro	oad Ghatkopar -(west)					
City:	Mumbai , Taluka: Mumb	bai, District: Mumbai City, State	e: Maharashtra, PIN: 400	0084				
Telep	ohone no.:	Mob	pile no: 917506021623		Email	: sakrikatarm	nal1234@gmail.cim	
DOB	: Sep 13, 1999	Category: Open		Physically	Handicap: No			
Previ	ious Latest Examination	Details: Sem IV(Regular-Rev1	16)	Exam Even	t: Apr-2019	Seat	t No: 0550999 (Status: Pass)	
Exan	n form appearance type:	: Fresher						
Pape	er Details: Pleas	se select Paper details which y	ou want to appear ( UA -	- University A	Assessment,CA - Coll	ege Assessn	ment)	
SN	Paper Code		Paper Name				AM - AT	
1	85501	Central Banking				Th-U	A [] ;Th-CA []	
2	85503 A	Auditing II				Th-U	A [ ] ;Th-CA [ ]	
3	85504 H	Human Resource Management	t			Th-U	A [ ] ;Th-CA [ ]	
4	85505	Turnaround Management				Th-U	A [ ] ;Th-CA [ ]	
5	85506 I	nternational Business				Th-U	-UA [] ;Th-CA []	
6	UBIFSVI.8 F	Project Work In Banking and In	surance			Pw-U	v-UA [] ;Pw-CA []	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination Fees	
Mark	Statement Fee	Total:						
_			Call	ege Receipt	No. and Data			
Payn	nent Details: Ai	mount Received:	COII		No. and Date:			
Payn DD N		mount Received: MICR No:		DD Date:	No. and Date:	Bank	<u> </u>	
DD N		MICR No:			No. and Date:	Bank	C	
DD N Cent	lo:	MICR No:			No. and Date:	Bank	c	
DD N Cente	No: er Preference (Code/Na	MICR No:			No. and Date:	Bank	T	
DD N Center Venue To, T	er Preference (Code/Na le Preference (Code/Na The Controller of Examin luest permission to prese are that all statement ma	me): me): nation, ent myself for the ensuing exanuade in this application are true,	nination. I have remitted complete and correct to	DD Date: the prescribe the best of m	ed fee for the same. I ny knowledge and bel	hereby ief. I	Place: <b>Vidyavihar</b> Date:	
DD N Center Venue To, T I requested have requested other	er Preference (Code/Na ie Preference (Code/Na The Controller of Examin uest permission to prese are that all statement ma gone through the syllab est for any special concer ground. I understand the	me): me): mation, ent myself for the ensuing exam	nination. I have remitted complete and correct to ibed for the examination or day fixed for university	DD Date: the prescribe the best of many for which I at the text of	ed fee for the same. I ny knowledge and bel m appearing. I shall r en etc. on religious or	hereby lief. I not any	Place: <b>Vidyavihar</b>	
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DD N Cente Venu To, T I requested thave requested their cance This responses	er Preference (Code/Na le Preference (Code/Na	me): me): me): metion, ent myself for the ensuing exan ade in this application are true, bus and the list of books prescr ession such as change in time at in the event of any information.  D/Chairperson ized by the College staff and by actification of the information. H	nination. I have remitted complete and correct to ibed for the examination or day fixed for universition being found false or i	the prescribe the best of many for which I at the Examination incorrect, my	ed fee for the same. I ny knowledge and bel m appearing. I shall r on etc. on religious or candidature is liable orm is correct to the b	hereby lief. I not any to be	Place: Vidyavihar  Date:  Student's Signature  owledge. I also undertake the	



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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PRN: Eligibility Status:				Examination form 074301	1 No.:	Division/Section:	Roll No	o.:	Aug Hadis	
;	2017016400848881		Eligible			Α	67		DILL	
Instru	uction Medium:		-			Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: VRUS	SHALI SURESI	H UMBARKAR			Mother's Name: St	JCHITA	(	Gender: Female	
Nam	e in Vernacular Lang	uage:वृषाली सुरे	श उंबरकर							
	dev Nagar ghatla nea			lagar ghatla near ckhs s 100071 Room no MMD,					8 arvind Patil wadi s school chembur Mumbai	
City:	Mumbai, Taluka: Mu	mbai, District: N	Mumbai City, State	: Maharashtra, PIN: 400	071					
Telep	phone no.:		Mob	e no: 919967266061 Email			: vrushaliumbarkar3@gmail.com			
DOB	: Nov 06, 1998	Cat	tegory: Reserved (	OBC)	Physically	Handicap: No				
Previ	ous Latest Examinat	ion Details: Sei	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	t No: 05	51035 (Status: Pass)	
Exan	n form appearance ty	pe: Fresher					•			
Pape	r Details: Ple	ease select Pa	per details which ye	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Bank	ing				Th-U	A [ ] ;Th-	-CA[]	
2	85503	Auditing II					Th-U	A [ ] ;Th-	-CA[]	
3	85504	Human Reso	ource Management				Th-U	A [ ] ;Th-	-CA[]	
4	85505	Turnaround I	Management				Th-U	Th-UA [];Th-CA []		
5	85506	International	Business					A [ ] ;Th-	-CA[]	
6	UBIFSVI.8	Project Work	In Banking and Ins	rance			Pw-L	Pw-UA [] ;Pw-CA []		
Conv	ocation Fee		Exam Form Late I	ee Exam Form Super Late Fee			Exa	mination	Fees	
Mark	Statement Fee		Total:							
Davn	nent Details:	Amount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N		Amount Nece	MICR No:	Con	DD Date:	No. and Date.	Bank	··		
	er Preference (Code/	Name).	IMIOIT IVO.		DD Date.		Dani	· .		
	e Preference (Code/									
	he Controller of Exar	•						Disease	V fields and discour	
			r the ensuing evan	nination. I have remitted	the prescribe	ad fee for the same	l herehy	Place:	Vidyavihar	
decla	re that all statement	made 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 universited						
				on being found false or						
canc	elled or rejected.		-	-				St	udent's Signature	
Deck	aration by Principal/H	OD/Chairperso	on							
This respo	is 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	ā.									
				_						
Date	:									
				College Sta	aff Signature				nature of D/Chairperson	
				•						



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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PRN: Eligibility Status:				Examination for 074302	m No.:	Division/Section:	Roll No	.:	(0)
	2017016400850817	Pi	rovisional			Α	15		Bon.
Instr	uction Medium:	•				Nationality:	India		
				Student's Pers	onal Informati	on			
Stud	ent's Name: VASHI	SHTH PRAM	OD GIRI			Mother's Name: D	EEPA GIRI	(	Gender: Male
Nam	e in Vernacular Langua	age:वशिष्ठ प्रम	नोद गिरी						
Addr	ess: c-303 woodland h	eights chandi	vali chandivali farn	n road opp magnotape	studio near na	ahars amrit shakti			
City:	mumbai, Taluka: Kurla	a, District: Mur	mbai Suburban, St	ate: Maharashtra, PIN:	400072				
Tele	ohone no.:		Mob	ile no: 919665125997		Ema	il : vashishth.g	jiri24@g	mail.com
	: Feb 17, 1999		egory: Reserved (		Physically	Handicap: No			
Prev	ious Latest Examinatio	n Details: Ser	n IV(Regular-Rev1	(6)	Exam Even	t: Apr-2019	Sea	t No: 910	0026 (Status: Pass)
	n form appearance typ	e: Fresher							
Pape	er Details: Plea	ase select Pa	oer details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Name	!				AM - AT
1	85501	Central Bank	ing				Th-U	A [ ] ;Th-	CA[]
2	85503	Auditing II					Th-U	A [ ] ;Th-	CA[]
3	85504	Human Reso	urce Management	<u> </u>			Th-U	A [ ] ;Th-	CA[]
4	85505	Turnaround N	Management				Th-U	A [ ] ;Th-	CA[]
5	85506	International	Business				Th-U	A [ ] ;Th-	CA[]
6	UBIFSVI.8	Project Work	In Banking and In					A[];Pw	
Con	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	Amount Recei	ved:	Co	llege Receipt	No. and Date:			
DD N			MICR No:	l .	DD Date:		Bank	:	
Cent	er Preference (Code/N	lame):			1		I		
Venu	ie Preference (Code/N	ame):							
To, 1	he Controller of Exam	ination,						Place:	Vidyavihar
decla	are that all statement m	nade in this ap	plication are true,	nination. I have remitte complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:	
				ibed for the examinatio or day fixed for univers					
othe	ground. I understand			on being found false o					
cano	elled or rejected.							St	udent's Signature
Decl	aration by Principal/HC	DD/Chairperso	n						
resp	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.								
Plac	e:								
Date	:			College S	taff Signature				nature of D/Chairperson



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'e-Suvidha' account on



PRN: Eligibility Status:				Examination form 074303	n No.:	Division/Section:	Roll No	).:	and the second	
	2017016400850906		Eligible			Α	28		Sales time	
Instr	uction Medium:		-			Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: KHAN	SOHEB MAL	AY			Mother's Name: A	ASHMA	(	Gender: Male	
Nam	e in Vernacular Langua	age:खान सोहे	MALAY							
Addr	ess: 404, BUILDING N	O.1, DHARA	MVEER NAGAR V	ASANT VIHAR						
City:	THANE, Taluka: Than	e, District: Th	ane, State: Mahara	ashtra, PIN: 400610						
	ohone no.:			ile no: 918108693228		Emai	l : sohebkhan	78632@	)gmail.com	
	: Dec 22, 1999		tegory: Open		<del>, , , ,</del>	Handicap: No				
	ious Latest Examinatio		m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	t No: 05	51001 (Status: Pass)	
	n form appearance type							- \		
		ise select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code	0		Paper Name				A	AM - AT	
1	85501	Central Bank	king					A [ ] ;Th-		
2	85503	Auditing II	NA					A [ ] ;Th-		
3	85504 85505		ource Management	:				A [ ] ;Th-		
5	85506	International	Management					Th-UA [];Th-CA [] Th-UA [];Th-CA []		
6	UBIFSVI.8		In Banking and In	suranco				JA []; Pw		
_	ocation Fee	Floject Wolf	Exam Form Late					mination		
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- Iviaii	- Clatement 1 CC		1 otal.							
Payr	nent Details:	Amount Rece	ived:	Col	lege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	<b>(</b> :		
Cent	er Preference (Code/N	ame):								
Venu	ie Preference (Code/Na	ame):								
To, 1	he Controller of Exami	nation,						Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
				ibed for the examination or day fixed for universi						
				on being found false or						
canc	elled or rejected.		•	-	·			<sub>St</sub>	udent's Signature	
Decl	aration by Principal/HO	D/Chairners	on .					01	udent's dignature	
	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									
resp	onsibility of fulfillment/r	ectification of	the information. H	e/she is regular student						
cour	se/term work (if any) ac	ccording to ur	niversity rules.							
Place										
				_						
Date	<u>.</u>									
				College Staff Signature		Seal and Signature of				
						Principal/HOD/Chairperson				



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S. K. Somaiya College of Arts, Science and Commerce (540)

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B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination f		Division/Section:	Roll No	):	Alesta
	2017016400851001		Eligible			Α	44		CA
nstr	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: PATEL	. AKSHIBEN I	KANTILAL			Mother's Name: C	HANDRIKABE	EN (	Gender: Female
Nam	e in Vernacular Langua	age:पटेल अक	शीबेन कांतीलाल						
Addr	ess: Mansarovar Socie	ety, Room 12/	A, Bldg No. 18, Na	vare Nagar, Ambarna	ath East				
City:	Ambarnath, Taluka: A	mbarnath, Dis	strict: Thane, State	: Maharashtra, PIN: 4	121501				
Tele	ohone no.:		Mot	ile no: 91703822837	6	Emai	l : kantipatel6	78@gm	ail.com
	: Feb 23, 2000		tegory: Open		Physically	Handicap: No			
	ious Latest Examinatio		m IV(Regular-Rev	6)	Exam Event: Apr-2019 Seat No: 0551014 (Status: Pass)				
	n form appearance typ								
		ase select Pa	per details which y	ou want to appear ( l		Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code	0		Paper Nan	ne				AM - AT
1	85501	Central Bank	ring					A [ ] ;Th-	
3	85503 85504	Auditing II						A [] ;Th-	
4	85505		ource Management Management	•				A[];Th-	
5	85506	International						Th-UA [];Th-CA [] Th-UA [];Th-CA []	
6	UBIFSVI.8		In Banking and In	surance				A[];Pw	
_	ocation Fee	i roject vvork	Exam Form Late				<u> </u>	mination	
	Statement Fee		Total:		Exami om	ouper Lute 1 cc	Exai	- Initiation	1 000
					I				
Payr	nent Details:	Amount Rece	ived:	(	College Receipt	No. and Date:			
N DC	lo:		MICR No:		DD Date:		Bank	Ε.	
	er Preference (Code/N								
	ie Preference (Code/N								
	he Controller of Exam							Place:	Vidyavihar
decla	uest permission to pres are that all statement m gone through the sylla	nade in this ap	plication are true,	complete and correc	t to the best of n	ny knowledge and be	elief. I	Date:	
equ	est for any special con-	cession such	as change in time	or day fixed for unive	rsity Examination	n etc. on religious o	r any		
	ground. I understand elled or rejected.	that in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be		
							St	udent's Signature	
This resp	claration by Principal/HOD/Chairperson is 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	e:								
Date:				College	Staff Signature				nature of D/Chairperson



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

 $B.Com.\ (B.\ and\ I.) (with\ Credits)-Regular-Rev16-T.Y.\ B.Com.\ (B.\&\ I.)-Sem\ VI\ [2C00346]$ 

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination fo 074305		Division/Section:	Roll No	).:	what	
:	2017016400851361	Eligible			А	46		Wathat	
Instru	uction Medium:		-		Nationality:	India			
			Student's Per	rsonal Informat	on				
Stude	ent's Name: PATHAI	K MANSI SHAILESH			Mother's Name: Al	-KA	C	Gender: Female	
Nam	e in Vernacular Langua	ge:पाठक मानसी शैलेश							
Addr	ess: JANTA PRAGATI S	SANGH, RAJAWADI, GHAT	KOPAR (E)						
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban	, State: Maharashtra, PI	N: 400077					
	ohone no.:	1	obile no: 919004286207	1		l : pathakman	ısi199@g	gmail.com	
	: Sep 29, 1999	Category: Open		Physically	Handicap: No				
		n Details: Sem IV(Regular-Re	:v16)	Exam Ever	t: Apr-2019	Seat	t No: 055	51016 (Status: Pass)	
	n form appearance type								
	er Details: Pleas	se select Paper details which	you want to appear ( U	IA - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code		Paper Name	е				AM - AT	
1		Central Banking					A [ ] ;Th-(		
2		Auditing II						CA[]	
3		Human Resource Manageme	ent				Th-UA [] ;Th-CA []		
4		Turnaround Management					A [ ] ;Th-(		
5		International Business					A [ ] ;Th-0		
6	UBIFSVI.8	Project Work In Banking and				Pw-U	A [ ] ;Pw	-CA []	
Convocation Fee Exam Form Late			e Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Payra	nent Details:	mount Received:		ollege Receipt	No. and Date:				
DD N		MICR No:		DD Date:	No. and Date.	Bank			
	er Preference (Code/Na			DD Date.		Bank			
	ue Preference (Code/Na								
	The Controller of Examir						Place:	\ /id: co. ib o a	
		ent myself for the ensuing ex	amination I have remitte	ed the prescrib	ed fee for the same	l hereby	Place.	Vidyavihar	
decla	are that all statement ma	ade in this application are tru	e, complete and correct	to the best of r	ny knowledge and be	elief. I	Date:		
		bus and the list of books presession such as change in time							
other	r ground. I understand th	hat in the event of any inform							
canc	elled or rejected.						Stu	udent's Signature	
Deck	aration by Principal/HOI	D/Chairnerson					0	adoni o dignataro	
This respo	form is carefully scruting onsibility of fulfillment/re	ized by the College staff and ectification of the information cording to university rules.							
Place	e:								
Date									



## University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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Seal and Signature of Principal/HOD/Chairperson



	PRN:	Eligibility Status:	Examination fo 074306		Division/Section:	Roll No.	).:	7.104
2	2017016400851442	Eligible			Α	42		1 Same
Instru	uction Medium:		-		Nationality:	India		
			Student's Per	rsonal Informati	on			
Stude	ent's Name: PADHY	PRIYA RAMKRISHNA			Mother's Name: RA	NJEETA	C	Gender: Female
Name	e in Vernacular Languaç	ge:PRIYA						
Addre	ess: 4/1 Waghmare chl,	, Ashtavinayak path Tagore r	agar 4 Vikhroli East					
City:	Mumbai, Taluka: Kurla,	, District: Mumbai Suburban,	State: Maharashtra, PIN	1: 400083				
Telep	phone no.:	M	obile no: 918879425525	5	Email	l : padhypriya	1@gmai	l.com
DOB	3: Aug 24, 1999	Category: Open		Physically	Handicap: No			
Previ	ious Latest Examination	n Details: Sem IV(Regular-Re	:v16)	Exam Even	t: Apr-2019	Seat	ι No: 055	51013 (Status: Pass)
	n form appearance type:							
Pape	er Details: Pleas	se select Paper details which	you want to appear ( U	A - University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code		Paper Name	е				AM - AT
1	85501	Central Banking				Th-UA	A [ ] ;Th-0	CA[]
2	85503 A	Auditing II		Т				CA[]
3	85504 H	Human Resource Manageme	ent			Th-UA	A [ ] ;Th-0	CA[]
4	85505	Turnaround Management				Th-UA	A [ ] ;Th-0	CA[]
5	85506 I	International Business				Th-UA	A [ ] ;Th-0	CA[]
6	UBIFSVI.8 F	Project Work In Banking and	Insurance			Pw-U/	IA [ ] ;Pw	-CA []
Conv	vocation Fee	Exam Form La	e Fee	Exam Form	Super Late Fee	Exan	mination	Fees
Mark	Statement Fee	Total:						
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		Amount Received:		college Receipt	No. and Date:	lp i		
DD N		MICR No:		DD Date:		Bank	<u>:                                    </u>	
	ter Preference (Code/Na							
	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·						
	The Controller of Examin		Control Observation	100 magazile	. Con Constanting		Place:	Vidyavihar
		ent myself for the ensuing ex ade in this application are tru					Date:	
have	gone through the syllab	bus and the list of books pres	cribed for the examination	ion for which I a	m appearing. I shall	not	├──	
reque	est for any special conce r ground I understand the	cession such as change in time that in the event of any inform	e or day fixed for univer- lation being found false	sity Examination	n etc. on religious or candidature is liable	any to be		
cance	elled or rejected.	nacin and over a conjument	2001 2011g 102	JI 1110011 001,,	ouridiada. o io ii	10 20		
							Stu	udent's Signature
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respo	onsibility of fulfillment/re	nized by the College staff and ectification of the information. ecording to university rules.						
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Date:	ri							



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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

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'e-Suvidha' account on

Principal/HOD/Chairperson

Examination form No.: and Reissone Eligibility Status: PRN: Division/Section: Roll No.: 074307 2017016400852101 10 Eligible Instruction Medium: Nationality: India Student's Personal Information Student's Name: **DALVI VISHAKHA SANJAY** Mother's Name: JYOSTANA Gender: Female Name in Vernacular Language:दळवी विशाखा संजय Address: D/O SANJAY DALVI4 SANTA KRUPA CHAWL RAMCHANDRA NAGAR NO. 1 City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604 Telephone no.: Mobile no: 917045366857 Email: vishakhadalvi27@gmail.com DOB: Jan 27, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0550984 (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 Paper Name AM - AT 85501 Th-UA [];Th-CA [] Central Banking 85503 Th-UA [ ] ;Th-CA [ ] 2 Auditing II \_\_\_ Th-UA [ ] ;Th-CA [ ] 3 85504 Human Resource Management 85505 4 Turnaround Management Th-UA[];Th-CA[] 5 85506 International Business Th-UA [ ] ;Th-CA [ ] UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [ ] ;Pw-CA [ ] Exam Form Late Fee Convocation Fee Exam Form Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, The Controller of Examination, Place: Vidyavihar I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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 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 Staff Signature Seal and Signature of



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Application Form for Examination of Summer Session 2020 event.

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Seal and Signature of Principal/HOD/Chairperson



PRN:		Eligi	bility Status:	Examination form 074308	m No.:	Division/Section:	Roll No	.:	Wahek	
2	2017016400852124		Eligible		III	Α	27		-	
nstru	uction Medium:					Nationality:	India	•		
				Student's Pers	onal Informati	on				
Stude	ent's Name: KHALFI	MAHEK FA	ATIMA HASRAT			Mother's Name: M	EENAZ	G	Gender: Female	
Name	e in Vernacular Langua	ge:MAHEK F	ATIMA HASRAT I	KHALFE				·		
Addre	ess: 303. B- WING, MO	ON APARTI	MENT PIPE ROAD	KURLA (WEST)						
City:	MUMBAI, Taluka: Kurla	n, District: Μι	ımbai Suburban, S	tate: Maharashtra, PIN	1: 400070					
Telep	phone no.: 66744542		Mob	ile no: 918454027096		Emai	l : mahekkhal	fe1304@	gmail.com	
	: Apr 13, 2000		tegory: Open		Physically	Handicap: No				
Previ	ous Latest Examination	Details: Sei	m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Seat	No: 055	1000 (Status: Pass)	
	n form appearance type									
		se select Pa	per details which y	ou want to appear ( UA	University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1		Central Bank	ting					4 [ ] ;Th-(		
2		Auditing II							CA[]	
3			ource Management					Th-UA[];Th-CA[] Th-UA[];Th-CA[]		
4			Management							
5		nternational						4 [] ;Th-(		
6		Project work	In Banking and In		Г Г	Company of the Company	<del>'</del>	A [ ] ;Pw-		
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viaik	Statement Fee		Total:							
Paym	nent Details: A	mount Rece	ived:	Со	llege Receipt	No. and Date:				
DD N	lo:		MICR No:	· ·	DD Date:		Bank	:		
Cente	er Preference (Code/Na	ime):			•		•			
√enu	e Preference (Code/Na	me):								
Γο, T	he Controller of Examir	nation,						Place:	Vidyavihar	
	uest permission to prese							Doto	-	
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eque	est for any special conc	ession such	as change in time	or day fixed for univers	ity Examination	on etc. on religious o	any			
	ground. I understand tl elled or rejected.	nat in the eve	ent of any informati	on being found false of	r incorrect, my	candidature is liable	e to be			
								Stu	ıdent's Signature	
	aration by Principal/HO	-								
respo	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 possibility 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	<b>e</b> :									
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Jato.										



## University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

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	PRN:	Eligibility Status:	Examination form 074309	n No.:	Division/Section:	Roll No	D.:	ile	
:	2017016400852155	Provisional		III	Α	65		manali.	
nstru	uction Medium:				Nationality:	India			
			Student's Perso	onal Informati	on				
Stude	ent's Name: THAKK	ER MANALI HEMANT			Mother's Name: Sh	HILPA	(	Gender: Female	
Nam	e in Vernacular Langua	age:टककर मनाली हेमंत							
Addr	ess: 53, KOTHARI EST	ΓΑΤΕ, GULSHAN GALI, B.P.RC	AD, MULUND WEST						
City:	MUMBAI, Taluka: Kurl	a, District: Mumbai Suburban, S	tate: Maharashtra, PIN	: 400080					
ГеІер	ohone no.:	Mob	ile no: 918879356633		Emai	l:			
OOB	: Jun 02, 1998	Category: Open		Physically	Handicap: No				
Previ	ous Latest Examination	n Details: Sem IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	t No: 910	0025 (Status: Pass)	
Exan	n form appearance type	e: Fresher							
<sup>2</sup> ape	r Details: Plea	ase select Paper details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessi	ment)		
SN	Paper Code		Paper Name					AM - AT	
1	85501	Central Banking				Th-U	A [ ] ;Th-	CA[]	
2	85503	Auditing II				Th-U	A [ ] ;Th-	CA[]	
3	85504	Human Resource Management				Th-UA [] ;Th-CA []			
4	85505	Turnaround Management				Th-UA[];Th-CA[]			
5	85506	International Business				Th-U	A [ ] ;Th-	CA[]	
6	UBIFSVI.8	Project Work In Banking and In	surance			Pw-L	JA [ ] ;Pw	-CA []	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee	Total:							
avn	nent Details:	Amount Received:	Col	lege Receipt	No. and Date:				
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Го, Т	he Controller of Exami	nation,					Place:	Vidyavihar	
		ent myself for the ensuing exan					Date	-	
decla	are that all statement m	ade in this application are true, bus and the list of books prescr	complete and correct to thed for the examination	the best of m	ny knowledge and be m appearing I shall	lief. l not	Date:		
eque	est for any special cond	cession such as change in time	or day fixed for universi	ty Examination	n etc. on religious or	any			
	ground. I understand telled or rejected.	that in the event of any informat	on being found false or	incorrect, my	candidature is liable	to be			
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Decla	aration by Principal/HO	D/Chairperson		· · · · ·					
		nized by the College staff and by							
		ectification of the information. Hacording to university rules.	e/she is regular student	t of this Collec	ge and has complete	d the require	d attenda	ance and practical	
Jours									
Place	<b>9</b> :								
			_						
Date:									
			College Staff Signature			and Sigr			
				Conogo otan oignataro			Principal/HOD/Chairperson		



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S. K. Somaiya College of Arts, Science and Commerce (540)

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Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibili	ity Status:	Examination form 074310	n No.:	Division/Section:	Roll	No.:	TALAIR	
:	2017016400852221	Eli	igible			Α	57	7	1 ACATO	
Instru	uction Medium:	•	•			Nationality:	India			
				Student's Person	onal Informati	on				
Stud	ent's Name: SATRA	PALAK RAJES	SH			Mother's Name: Pf	RAFULLA	C	Gender: Male	
Nam	e in Vernacular Langua	ge:पालक								
Addr	ess: 102 VAGAD APT	JOSHIWADA TI	HANE W							
City:	THANE, Taluka: Thane	e, District: Than	e, State: Mahara	shtra, PIN: 400602						
Telep	ohone no.:		Mob	ile no: 919699954764		Emai	I : PALAKS	ATRA44@	GMAIL.COM	
DOB	: Dec 02, 1999	Categ	jory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatior	n Details: Sem I	IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Se	eat No: 055	51026 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape		se select Paper	r details which yo	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Asses	sment)		
SN	Paper Code			Paper Name					AM - AT	
1	85501	Central Banking	g				Th-	·UA [ ] ;Th-	CA[]	
2	85503	Auditing II				Th-	UA [ ] ;Th-	CA[]		
3	85504	Human Resour	ce Management				Th-	UA [ ] ;Th-	CA[]	
4	85505	Turnaround Ma	inagement				Th-	·UA [ ] ;Th-	CA[]	
5	85506	International Bu	usiness				Th-	·UA [ ] ;Th-	CA[]	
6	UBIFSVI.8	Project Work In	Banking and Ins	surance			Pw	-UA [ ] ;Pw	/-CA[]	
Conv	ocation Fee	E	xam Form Late I	<sup>=</sup> ee	Exam Form	Super Late Fee	E	kamination	Fees	
Mark	Statement Fee	T	otal:							
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	er Preference (Code/Na									_
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	he Controller of Exami			ta a tra a la fina de la casa de			I leave to	Place:	Vidyavihar	
	uest permission to pres are that all statement ma							Date:		
have	gone through the sylla	bus and the list	of books prescri	bed for the examination	n for which I a	m appearing. I shall	not			-
	est for any special conc ground. I understand t									
	elled or rejected.	nat in the event	or any miorina	on boing round raise or	moon oot, my	Carialadia o lo llabio				
								Sti	udent's Signature	-
	aration by Principal/HO	-								
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B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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Examination form No.:

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	PRN:	Eligi	ibility Status:	074311	II NO	Division/Section:	Roll No	<b>)</b> .:	The state of the s	
2	2017016400852283		Eligible		III	Α	62			
Instru	ıction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stude	ent's Name: SHUKL	LA KOMAL SU	URENDRA			Mother's Name: SI	UMAN	(	Gender: Female	
Name	e in Vernacular Langua	age:शुक्ल कोम	<b>ਜ</b> ਲ							
Addre	ss: CHAWL NO.55 ,R	ROOM NO.51	0,RAMABAI COLO	ONY V.N MARG GHATK	KOPAR EAST	Г МИМАВІ 4000755				
City: I	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	State: Maharashtra, PIN:	: 400075					
	phone no.:			oile no: 918652552515		Ema	il : singhrobin	3653@g	mail.com	
DOB:	: Jan 29, 1999	Cat	tegory: Open		Physically	Handicap: No				
	ous Latest Examination		m IV(Regular-Rev1	16)	Exam Even	nt: Apr-2019	Sea	t No: 910	0027 (Status: Pass)	
	n form appearance type									
<del></del> -		ase select Par	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	Ilege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1		Central Bank	king					IA [ ] ;Th-		
2		Auditing II						IA [ ] ;Th-		
3			ource Management	<u>t</u>				IA [ ] ;Th-		
4			Management					IA [ ] ;Th-		
5		International						IA [ ] ;Th-		
6		Project Work	k In Banking and In				<u>'</u>	JA [ ] ;Pw		
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavm	nent Details:	Amount Recei		Col	lege Receipt	No. and Date:				
DD N			MICR No:	<u> </u>	DD Date:		Bank	 k:		
	er Preference (Code/Na	lame):								
	e Preference (Code/Na									
	he Controller of Exami							Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:	-	
have	gone through the sylla	abus and the l	list of books prescri	ribed for the examination	n for which I a	am appearing. I shall	not			
reque	est for any special cond	cession such	as change in time	or day fixed for universit	ity Examination	on etc. on religious o	r any			
	ground. I understand t elled or rejected.	that in the eve	ant or any informati	ion being found false or	incorrect, my	candidature is liable	e to be			
-								St	udent's Signature	
	aration by Principal/HO	•								
				y me. The information pr le/she is regular student						
cours	se/term work (if any) ac	ccording to un	niversity rules.	-		•	-		·	
Place	j.									
				_						
Date:										
				College Staff Signature			Seal and Signature of			
								Principal/HOD/Chairperson		



Date:

## 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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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Examination form No.:

Disciple 16

'e-Suvidha' account on

Seal and Signature of Principal/HOD/Chairperson



	PRN:	Eligibility Status:	074312	II NO	Division/Sectio	n: R	oll No.:	Goden .	
2	2017016400852302	Eligible		III	Α		51		
Instru	ıction Medium:				Nationality:	India			
			Student's Perso	onal Informati	on				
Stude	ent's Name: POLAI S	SANDEEP RANJAN			Mother's Nam	e: SAIRINDI	<b>₹</b> I	Gender: Male	
Name	e in Vernacular Langua	ge:संदीप							
Addre	ess: yasho kutir, room r	no 5, 1st floor,near balaji nagar,	, thakurli east						
City:	MUMBAI, Taluka: DOM	IBIVLI, District: , State: Mahara	ashtra, PIN: 421201						
Telep	phone no.:	Mob	pile no: 917045390456		E	Email : sande	eeppolai3@g	mail.com	
DOB	: Jun 10, 1999	Category: Open		Physically	Handicap: No				
Previ	ous Latest Examinatior	n Details: Sem IV(Regular-Rev1	16)	Exam Even	t: Apr-2019		Seat No: 05	51021 (Status: Pass)	
Exan	n form appearance type	: Fresher							
Pape	r Details: Plea	se select Paper details which y	ou want to appear ( UA	- University A	Assessment,CA	- College As	sessment)		
SN	Paper Code		Paper Name					AM - AT	
1	85501	Central Banking					Th-UA [ ] ;Th	-CA[]	
2	85503	Auditing II					Th-UA [ ] ;Th	-CA[]	
3	85504 I	Human Resource Management	t				Th-UA [ ] ;Th	-CA[]	
4	85505	Turnaround Management					Th-UA [ ] ;Th	-CA[]	
5	85506 I	International Business					Th-UA [ ] ;Th	-CA[]	
6	UBIFSVI.8	Project Work In Banking and In	surance				Pw-UA [ ] ;Pv	w-CA []	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee		Examination	n Fees	
Mark	Statement Fee	Total:							
Davr	nent Details:	mount Received:	Cal	logo Possint	No. and Date:				_
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	er Preference (Code/Na			DD Date.			Dalik.		
	e Preference (Code/Na	•							_
	he Controller of Examir	•					l pu	\	٦
•		•	nination. I have remitted	the procerib	ad foo for the sa	ma I harahi	, Place:	Vidyavihar	
		ent myself for the ensuing exan ade in this application are true,					Date:		
		bus and the list of books prescr							$\dashv$
		ession such as change in time hat in the event of any informati							
cance	elled or rejected.	•	ū					tudent's Signature	
Dools	aration by Principal/HOI	D/Chairnerson					3	tudent's dignature	_
This respo	form is carefully scrutin onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H							
cours	se/term work (if any) ac	cording to university rules.							
Place	 e:								
			1			1			



Date:

## University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	Examination forr 074313	n No.:	Division/Section:	Roll No.	.:	4
	2017016400852325		Eligible		III	Α	47		Sam
nstrı	uction Medium:					Nationality:	India		
				Student's Pers	onal Informati	on			
Stud	ent's Name: PATHA	N SAMIN ZA	MEERAHMED			Mother's Name: NA	AGMA	(	Gender: Female
lam	e in Vernacular Langua	ge:PATHAN	SAMIN ZAMEERA	AHMED				,	
۸ddr	ess: A/ 110, OM SHRE	E GANESH	CHS, OLD MUMB	AI PUNE ROAD,OPP N	MANISHA NA	GAR GATE NO. 1 KA	ALWA (W) TH	ANE 40	0605
City:	Kalwa, Taluka: Thane,	District: Tha	ne, State: Maharas	htra, PIN: 400605					
ele	phone no.:		Mob	ile no: 918879420522		Email	: saminpatha	n99@g	mail.com
ОВ	: Jul 07, 1999	Cat	tegory: Open		Physically	Handicap: No			
rev	ious Latest Examinatior	n Details: Sei	m IV(Regular-Rev1	(6)	Exam Even	t: Apr-2019	Seat	No: 055	51017 (Status: Pass)
xan	n form appearance type	: Fresher							
ape	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code			Paper Name					AM - AT
1	85501	Central Bank	king					4 [ ] ;Th-	
2	85503	Auditing II					Th-UA	4 [ ] ;Th-	CA[]
3	85504 I	Human Reso	ource Management	t			Th-UA	4 [ ] ;Th-	CA[]
4	85505	Turnaround I	Management					4 [ ] ;Th-	
5		International	Business					4 [ ] ;Th-	
6	UBIFSVI.8	Project Work	In Banking and In				Pw-U	A [ ] ;Pw	/-CA[]
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees
/lark	Statement Fee		Total:						
Pavn	nent Details:	mount Rece	ived:	Col	lege Receipt	No. and Date:			
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	er Preference (Code/Na	ame).	MICITIO.		DD Date.		Bank	•	
	ue Preference (Code/Na								
	The Controller of Examir							Place:	Vidyavihar
	uest permission to prese		r the ensuing exan	nination. I have remitted	the prescrib	ed fee for the same. I	hereby	i iace.	Vidyaviilai
	are that all statement ma							Date:	
	gone through the syllatest for any special conc								
	r ground. I understand th	nat in the eve	ent of any informat	on being found false or	incorrect, my	candidature is liable	to be		
anc	elled or rejected.							St	udent's Signature
)ecl	aration by Principal/HOI	D/Chairperso	on					-	
esp	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) acc	ectification of	the information. H						
Place	e:								



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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PRN:		Eligi	ibility Status:	Examination 1 07431		Division/Section:	Roll No.	).:	$\sim$
:	2017016401741713		Eligible			Α	32		Des
Instru	uction Medium:		-			Nationality:	India		
				Student's P	Personal Informati	ion			
Stude	ent's Name: MANJR	REKAR DATT	TAPRASAD CHANI	DRASHEKHAR		Mother's Name: St	JSHMA		Gender: Male
Nam	e in Vernacular Langua	age:मांजरेकर र	दत्तप्रसाद चंद्रशेखर						
Addr	ess: H NO 287 AP PO	SHIRODA KI	HASBAGWADI						
City:	SHIRODA, Taluka: Vei	ngurle, Distric	ct: Sindhudurg, Sta	ite: Maharashtra, PI	N: 416518				
	phone no.:		Mob	oile no: 9191121611			I : DATTAMAI	NJREKA	AR34@GMAIL.COM
	: Dec 26, 1998		tegory: Reserved (	•	Physically	y Handicap: No			
Previ	ious Latest Examination	n Details: Ser	m IV(Regular-Rev1	6)	Exam Even	nt: Apr-2019	Seat	t No: 055	51004 (Status: Pass)
Exan	n form appearance type								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (	UA - University /	Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Nar	me				AM - AT
1	85501	Central Bank	ting				Th-U/	A [ ] ;Th-	·CA[]
2	85503	Auditing II					Th-U/	A [ ] ;Th-	·CA []
3	85504	Human Resc	ource Management	ί			Th-U/	A [ ] ;Th-	-CA[]
4	85505	Turnaround I	Management				Th-U/	A [ ] ;Th-	CA[]
5	85506	International	Business				Th-U/	A [ ] ;Th-	·CA[]
6	UBIFSVI.8	Project Work	k In Banking and In	surance			Pw-U	JA [ ] ;Pw	/-CA []
Conv	ocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
		Amount Recei	T		College Receipt	No. and Date:	<del></del>		
DD N			MICR No:		DD Date:		Bank	ε	
	er Preference (Code/Na								
	ue Preference (Code/Na	•							
•	The Controller of Exami	-					1	Place:	Vidyavihar
decla	uest permission to pres are that all statement m gone through the sylla	nade in this ap	pplication are true,	complete and correct	ect to the best of n	my knowledge and be	elief. I	Date:	
reque	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examination	on etc. on religious or	r any		
	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false	e or incorrect, my	/ candidature is liable	e to be		
Cario								St	udent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	rectification of	f the information. He						
Place	<b>)</b> :								
Date:				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson	
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B.Com. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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PRN: Eligibility Status:		Examination f 07431		Division/Section:	Roll No	).:	fatil_		
	2017016401795254		Eligible			Α	53		datil
Instru	uction Medium:					Nationality:	India	-	
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: RAI SA	HIL LALLUB	ABU			Mother's Name: S	HARMILA	G	Gender: Male
Nam	e in Vernacular Langua	age:साहिल रार	1						
Addr	ess: NIKUNJ CHS WI	NG D FLAT N	IO. 1 SECTOR 4 K	HARGHAR					
City:	NAVI MUMBAI , Taluk	a: Panvel, Dis	strict: Raigad, State	e: Maharashtra, PIN:	410210				
Tele	ohone no.:		Mob	ile no: 91961972395	55	Ema	il : sahilrai459	@gmail.d	com
DOB	: Apr 02, 2000	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatio	n Details: Ser	n IV(Regular-Rev1	16)	Exam Even	t: Apr-2019	Sea	t No: 055	1023 (Status: Pass)
Exan	n form appearance type	e: Fresher							
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear ( l	JA - University A	Assessment,CA - Co	llege Assessr	ment)	
SN	Paper Code			Paper Nan	ne				AM - AT
1	85501	Central Bank	ing				Th-U	A [ ] ;Th-0	CA[]
2	85503	Auditing II					Th-U	A [ ] ;Th-0	CA[]
3	85504	Human Resc	ource Management	Ī			Th-U	A [ ] ;Th-0	CA[]
4	85505	Turnaround I	Management				Th-U	A [ ] ;Th-0	CA[]
5	85506	International	Business				Th-U	A [ ] ;Th-0	CA[]
6	UBIFSVI.8	Project Work	In Banking and In	surance			Pw-U	JA [];Pw-	-CA[]
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Davr	nent Details:	Amount Recei	ived:	10	College Receipt	No. and Date:			
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	e Preference (Code/N								
	he Controller of Exami							Place:	Vidyavihar
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	are that all statement managed and all statement managed and are some through the sylla							Date:	
	est for any special cond								
othe:	ground. Í understand								
canc	elled or rejected.							Stu	ident's Signature
Deck	aration by Principal/HC	D/Chairperso	n						
resp	s 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 consibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical rse/term work (if any) according to university rules.								
Place	e:								
Date:				College	College Staff Signature			and Sign	ature of



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'e-Suvidha' account on



	PRN:	Eligi	ibility Status:	Examination fo 074316		Division/Section:	Roll No	<b>)</b> .:	Combrid	
2	2017016401795312		Eligible			Α	13	l	Con	
Instru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: GAMBI	HIR GAURAV	/I DADASO			Mother's Name: St	JNITA	(	Gender: Female	
Name	e in Vernacular Langua	age:गंभीर गौर	.वी दादासो							
Addre	ess: 33/112, SWADES	HI MILL CHA	WL SWADESHI M	ILL ROAD SION, CH	IUNABHARRI					
<u> </u>	KURLA, Taluka: Thane	e, District: Th								
	phone no.:			oile no: 91983302014	6	Emai	il : gauravigan	nbhir30@	@gmail.com	
	: Dec 30, 1999		tegory: Open		Physically	Handicap: No				
	ious Latest Examination		m IV(Regular-Rev1	ı6)	Exam Even	t: Apr-2019	Sea	t No: 05	50986 (Status: Pass)	
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Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( L	JA - University A	Assessment,CA - Co	llege Assessr	nent)		
SN	Paper Code	<u> </u>		Paper Nam	ne				AM - AT	
1		Central Bank	king					A[];Th-		
2		Auditing II					Th-U	A [ ] ;Th-	-CA[]	
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4	85505	Turnaround I	Management					A [ ] ;Th-		
5	85506	International	Business				Th-U	A[];Th-	-CA[]	
6		Project Work	k In Banking and In	surance			Pw-U	JA [ ] ;Pw	v-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ived:		College Receipt	No and Date:				
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	er Preference (Code/N									
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	are that all statement m gone through the sylla							Date:		
reque	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
other	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be			
Janu-	alled of rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutir									
	onsibility of fulfillment/ro se/term work (if any) ac			e/she is regular stude	ent of this Colleç	je and has complete	d the required	d attenda	ance and practical	
Court	——————————————————————————————————————									
Place	a·						l			
	<i>,</i> ,						l			
Date:										
<b></b>	ate:			College Staff Signature			Seal and Signature of			
					Conlege Clair Orginalare			Principal/HOD/Chairperson		



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Examination form No.:

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PRN: Eligibility Status: 074317 Division/Section: Roll No.: 70 nstruction Medium: Nationality: India  Student's Personal Information  Student's Name: ZALA HEMALI JAGDISH Name in Vernacular Language:झाला हेमाली जगदीश			
nstruction Medium:  Student's Personal Information  Student's Name: ZALA HEMALI JAGDISH  Mother's Name: VANITABEN  Gender: Femal			
Student's Name: ZALA HEMALI JAGDISH Mother's Name: VANITABEN Gender: Femal	<b>3</b>		
Name in Vernacular Language: द्वाना देशानी जगरीश			
value iii veriiaculai Language:ज्ञाला जनदारा			
Address: JAY MAHARASHTRA NAGAR PANTNAGAR GHATKOPAR EAST			
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400075			
Telephone no.: Mobile no: 919029861652 Email : hemalizala008@gmail.com			
OOB: Sep 07, 1999 Category: Open Physically Handicap: No			
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0551038 (Status:	<sup>o</sup> ass)		
Exam form appearance type: Fresher			
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 85501 Central Banking Th-UA [];Th-CA []			
2 85503 Auditing II Th-UA [];Th-CA []			
3 85504 Human Resource Management Th-UA[];Th-CA[]			
4 85505 Turnaround Management Th-UA[];Th-CA[]			
5 85506 International Business Th-UA[];Th-CA[]			
6 UBIFSVI.8 Project Work In Banking and Insurance Pw-UA []; Pw-CA []			
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees			
Mark Statement Fee Total:			
Payment Details: Amount Received: College Receipt No. and Date:			
DD No: MICR No: DD Date: Bank:			
Center Preference (Code/Name):			
Venue Preference (Code/Name):			
To The Outside of Equation			
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			
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 Signat	ie		
Declaration by Principal/HOD/Chairperson  This form is constilly constitutioned by the College staff and by me. The information printed in the form is consect to the best of my knowledge. I also undertain	lea tha		
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 undertaresponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and pract			
course/term work (if any) according to university rules.			
Place:			
Date:			
College Staff Signature Seal and Signature of Principal/HOD/Chairperson	Seal and Signature of Principal/HOD/Chairperson		



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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	PRN:	Eligi	bility Status:	Examination 0743		Division/Section:	Roll No	.:	Laurie		
	2017016401795374	Р	rovisional			Α	6		Marie		
Instruction Medium: Natio					Nationality:	India					
	Student's Personal Information										
Stud	tudent's Name: BHUNJE SIDDHI ABHAYKUMAR Mother's Name: ARCHANA Gender: Female										
Nam	ame in Vernacular Language:भुंजे सिद्धी अभयकुमार										
Addr	nddress: D1/5, CHITTRANJAN NAGAR RIDDHI SIDDHI CHS, RAJAWADI VIDYAVIHAR EAST										
City:	City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077										
Tele	Telephone no.: Mobile no: 919820775160 Email : siddhibhunje@gmail.com										
DOB	: Feb 19, 2000	Ca	tegory: Open		Physically	Handicap: No					
Prev	ious Latest Examinatio	n Details: Se	m IV(Regular-Rev	6)	Exam Even	t: Apr-2019	Seat	: No: 05	50981 (Status: Pass)		
Exar	n form appearance typ	e: Fresher									
Pape	er Details: Ple	ase select Pa	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessn	nent)			
SN	Paper Code			Paper Na	me				AM - AT		
1	85501	Central Bank	king				Th-U	4 [ ] ;Th-	CA[]		
2	85503	Auditing II					Th-U	۲ [ ] ;Th-	CA[]		
3	85504	Human Resource Management TI							Th-UA [ ] ;Th-CA [ ]		
4	85505	Turnaround Management Ti							CA[]		
5	85506	International Business Th-UA[];T							CA[]		
6 UBIFSVI.8 Project Work In Banking and Insurance P							Pw-U	A[];Pw	/-CA[]		
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form		Exar	mination	Fees		
Mark	Statement Fee		Total:								
<u> </u>		Amount Rece	1		College Receipt No. and Date:						
DD N			MICR No:		DD Date:		Bank	:			
	er Preference (Code/N										
	ie Preference (Code/N										
	he Controller of Exam							Place:	Vidyavihar		
decla	uest permission to pres are that all statement n gone through the sylla	nade in this ap	oplication are true,	complete and corre	ct to the best of m	ny knowledge and be	elief. I	Date:			
requ	est for any special con	cession such	as change in time	or day fixed for univ	ersity Examination	n etc. on religious o	r any				
othe	ground. I understand elled or rejected.	that in the eve	ent of any informat	on being found fals	e or incorrect, my	candidature is liable	e to be				
caric	clica of rejected.							St	udent's Signature		
Decl	aration by Principal/HC	D/Chairperso	on								
resp	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:											
Dato											
Date:				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson				



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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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	ibility Status:	Examination form No.: 074319		Division/Section:	Roll No.	.:	· Cal.		
2	2017016401795447		Eligible		III	Α	66		January.		
Instru	uction Medium:		-			Nationality:	India				
	Student's Personal Information										
Student's Name: ANSHUL ANIL THAKUR Mother's Name: SIMMY Gender: Male											
Name in Vernacular Language:अंशुल अनिल ठाकुर											
	Address: LOKMANYA NAGAR PADA NO.3 BHAIRAVANTH APT.NEAR BUS STOP										
	City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400606										
	phone no.:			pile no: 918424813317			il : ANSHULTH	IAKUR1	1786@GMAIL.COM		
	3: Jan 15, 1998		tegory: Open		<del> </del>	Handicap: No					
	ious Latest Examination		m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Seat	No: 055	51034 (Status: ATKT)		
	m form appearance type										
		se select Par	per details which y	ou want to appear ( UA		\ssessment,CA - Co	llege Assessm	nent)			
SN	Paper Code			Paper Name					AM - AT		
1		Central Bank	ting					4 [ ] ;Th-			
2		85503 Auditing II						Th-UA [];Th-CA []			
3								Th-UA [] ;Th-CA []			
4	4 85505 Turnaround Management							Th-UA [];Th-CA []			
5	85506 I	International	Business				Th-UA	n-UA [ ] ;Th-CA [ ]			
6		Project Work	k In Banking and In	surance			Pw-U	A [ ] ;Pw	/-CA [ ]		
Conv	vocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exan	mination	Fees		
Mark	Statement Fee		Total:								
Dev.m		Second Poop	d.	100	II- an Donnint	No. and Data:					
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	no: ter Preference (Code/Na		MICK NO.		DD Date.		Ddiin	<u>:</u>			
	,										
	ue Preference (Code/Na	,						Г <u></u>			
	The Controller of Examir uest permission to prese		or the enquing ever	nination. I have remitted	d the prescrib	ad foo for the came	Lharoby	Place:	Vidyavihar		
decla	are that all statement mag gone through the syllat	ade in this ap	pplication are true,	complete and correct to	the best of n	ny knowledge and b	elief. I	Date:			
	est for any special conc										
other	r ground. I understand the										
cance	cancelled or rejected. Student's Signature										
Decla	aration by Principal/HOI	D/Chairperso	on								
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	ectification of	f the information. He								
Place	a:										
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. (B. and I.)(with Credits)-Regular-Rev16-T.Y. B.Com. (B.& I.)-Sem VI [2C00346]

Examination form No.:

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	PRN:	Eligi	ibility Status:	Examination form 074320	Division/Section:		Roll No	ı.:	1800		
2017016402306972 Provisional					7		- )[ <del>3</del> -				
Instru	uction Medium:					Nationality:	India				
	Student's Personal Information										
Student's Name: CHANDAN PUNITH ANAND Mother's Name: SUKANYA									Gender: Male		
Name in Vernacular Language:chandan punith anand											
	ess: Kanchanganga 2/										
City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400603											
Teler	ohone no.:		Mob	oile no: 917045075692		Ema	il : prajwalchar	ndan24.	pc@gmail.com		
DOB	: Dec 02, 1999	Cat	tegory: Open		Physically	Handicap: No					
Previ	ious Latest Examinatio	n Details: Ser	m IV(Regular-Rev1	16)	Exam Even	t: Apr-2019	Seat	t No: 055	50982 (Status: Pass)		
Exan	n form appearance type	e: Fresher									
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessn	nent)			
SN	Paper Code			Paper Name				AM - AT			
1	85501	Central Bank	king				Th-U	A [ ] ;Th-	CA[]		
2	85503	Auditing II					Th-U	A [ ] ;Th-	-CA[]		
3	85504	Human Resource Management Th-UA [];Th-CA []									
4	85505	Turnaround !	Management	A [ ] ;Th-	-CA[]						
5	85506	International	·CA[]								
6	UBIFSVI.8	Project Work	/-CA[]								
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late F			mination	Fees		
Mark	Statement Fee		Total:								
		Amount Recei	T	<u> </u>	lege Receipt	Bank					
DD N			MICR No:		DD Date:			:			
	er Preference (Code/N	-									
	ie Preference (Code/N										
	he Controller of Exami							Place:	Vidyavihar		
decla	are that all statement m	nade in this ap	pplication are true,	complete and correct to	nation. I have remitted the prescribed fee for the same. I her implete and correct to the best of my knowledge and belief. ed for the examination for which I am appearing. I shall not						
				or day fixed for universit							
other	ground. I understand			tion being found false or							
cance	elled or rejected.							St	udent's Signature		
Decla	aration by Principal/HC	D/Chairperso	on						-		
respo		rectification of	f the information. H	y me. The information pr le/she is regular student							
Place	»:										
D-4-											
Date:				College St	aff Signature		Seal and Signature of				
				339	Concego Clair Cignature			Principal/HOD/Chairperson			



## University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2020 event.

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Seal and Signature of Principal/HOD/Chairperson



		7				1	-				
	PRN:	Eligibility Status:	Examination form No.: 074321		Division/Section:	Roll No.:	:	· 25			
:	2017016402525991	Eligible		III	Α	18		Robote			
Instru	uction Medium:	India									
	Student's Personal Information										
Stud	tudent's Name: GORI PALAK VERSHI Mother's Name: MANIBEN Gender: Female										
Nam	lame in Vernacular Language:गोरी पलक वेरशी										
Addr	ess: Room no - 2, Amina	abai Chawl No 4, Kaju Wadi,	Ghatkoper West								
City:	City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084										
Telep	ohone no.:	Mo	oile no: 917208435620		Emai	: bhanushalip	alak03@	@gmail.com			
DOB	: Aug 03, 2000	Category: Open		Physically	Handicap: No						
Previ	ious Latest Examination	Details: Sem IV(Regular-Rev	16)	Exam Even	t: Apr-2019	Seat I	No: 055	0990 (Status: Pass)			
Exan	n form appearance type:	Fresher									
Pape	er Details: Pleas	e select Paper details which	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessme	ent)				
SN	Paper Code		Paper Name					AM - AT			
1	85501 C	Central Banking				Th-UA	.[];Th-0	CA[]			
2	85503 A	Auditing II Th-UA [] ;Th-CA []									
3	85504 H	Human Resource Management Th-UA [];Th-CA []									
4	85505 T	Turnaround Management Th-UA [];Th-CA []									
5	85506 II	International Business Th-UA [];Th-CA []									
6	UBIFSVI.8 F	Project Work In Banking and In	surance			Pw-UA	UA [] ;Pw-CA []				
Conv	ocation Fee	Exam Form Late	Fee	ee Exam Form Super Late Fee			ination	Fees			
Mark	Statement Fee	Total:									
	T	•									
		nount Received:	Col	<del>,                                    </del>	No. and Date:						
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	er Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·									
	ie Preference (Code/Na	<u>'</u>									
To, T	he Controller of Examin	ation,				Į.	Place:	Vidyavihar			
decla	are that all statement ma	nt myself for the ensuing example in this application are true,	complete and correct to	the best of n	ny knowledge and be	lief. I	Date:				
		us and the list of books prescession such as change in time									
		at in the event of any informa									
cancelled or rejected.											
Dool	Student's Signature  Declaration by Principal/HOD/Chairperson										
This respo	form is carefully scrutinionsibility of fulfillment/re	zed by the College staff and be ctification of the information. It ording to university rules.									
Place	e:										
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PRN:		Eligi	bility Status:	Examination form 074322	Examination form No.:		Roll	No.:	0.		
:	2017016402526007		Eligible			Α	5	4	Source		
Instru	uction Medium:	•				Nationality:	India				
				Student's Perso	onal Informat	ion					
Stude	ent's Name: SABAT	LEEZA VIJA	·Υ			Mother's Name: B.	ANITA	(	Gender: Female		
Nam	e in Vernacular Langua	ge:सबत लीझ	ग विजय								
Addr	ess: A-11,ASHOK CHA	WL,L.B.S. N	AGAR, 90 FEET F	ROAD SAKINAKA(EAST	Γ)						
City:	SAKINAKA, Taluka: Mu	umbai, Distri	ct: Mumbai City, St	ate: Maharashtra, PIN:	400072						
Telep	ohone no.:		Mob	ile no: 918097211331		Ema	il : pratikpa	thare18610	@gmail.com		
DOB	: Feb 15, 2000	Cat	tegory: Open		Physically	Handicap: No					
	ious Latest Examination		m IV(Regular-Rev1	16)	Exam Ever	t: Apr-2019	S	Seat No: 055	51024 (Status: Pass)		
	n form appearance type										
		se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Asse	ssment)			
SN	Paper Code			Paper Name					AM - AT		
1		Central Bank	king					n-UA [ ] ;Th-			
2								Th-UA [ ] ;Th-CA [ ]			
3									Гh-UA [] ;Th-CA []		
4									h-UA[];Th-CA[]		
							-UA [ ] ;Th-CA [ ]				
6		Project Work	In Banking and In					v-UA [ ] ;Pw			
	rocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			Examination Fees			
Mark	Statement Fee		Total:								
Pavn	nent Details: A	mount Rece	ived.	Col	lege Receipt	No. and Date:					
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	er Preference (Code/Na	ame):									
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	he Controller of Examir							Place:	Vidyavihar		
			r the ensuing exan	nination. I have remitted	I the prescrib	ed fee for the same.	I hereby	1 1000.	Viayaviilai		
decla	are that all statement ma	ade in this ap	oplication are true,	complete and correct to	the best of r	ny knowledge and be	elief. I	Date:			
				ibed for the examinatior or day fixed for universi							
other	ground. I understand the			ion being found false or							
canc	elled or rejected.							St	udent's Signature		
Decla	aration by Principal/HOI	D/Chairperso	on								
respo		ectification of	the information. H	/ me. The information p e/she is regular student							
Place	e: 										
D-4-											



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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN:		Eligib	oility Status:	Examination form No.: 074323		Division/Section:	Roll No.	.:	Marish		
2	2017016402526015		Eligible				52		THOUSE		
nstruction Medium: Nationality: India							India				
		_		Student's Pers	onal Informat	ion					
Stude	Student's Name: PUNMIYA KAVISH BHARAT Mother's Name: SAROJ Gender: Male										
Name	lame in Vernacular Language:पुनमिया  कविश  भरत										
Addre	ess: Room no. 407 4th f	loor Akash c	hember Tembhina	ka							
City:	City: Thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601										
Telephone no.: Mobile no: 919967882000 Email : punmiyakavish88@gmail.com											
OOB	: Oct 29, 1999	Cate	egory: Open		Physically	Handicap: No					
⊃revi	ous Latest Examination	Details: Sen	n IV(Regular-Rev1	6)	Exam Even	it: Apr-2019	Seat	No: 055	51022 (Status: Pass)		
Exan	n form appearance type:	: Fresher									
Pape	r Details: Pleas	se select Pap	er details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessm	nent)			
SN	Paper Code			Paper Name					AM - AT		
1	85501	Central Banki	ng				Th-UA	A [ ] ;Th-	CA[]		
2	85503 A	Auditing II The							Th-UA [] ;Th-CA []		
3	85504 H	Human Resource Management Th-UA [];Th-CA []									
4	85505	Turnaround Management Th-UA [];Th-CA []									
5	5 85506 International Business Th-U.								-UA [] ;Th-CA []		
6	UBIFSVI.8 F	Project Work	In Banking and In	surance			Pw-U	w-UA [] ;Pw-CA []			
Convocation Fee Exam Form Late Fe				Fee	ee Exam Form Super Late Fee			Examination Fees			
Mark	Statement Fee		Total:								
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	er Preference (Code/Na		morrito.		DD Date.		Bank	-			
	e Preference (Code/Na										
	he Controller of Examin							Place:	Vidyavihar		
	uest permission to prese		the ensuing exan	nination. I have remitted	the prescrib	ed fee for the same.	hereby	i lace.	viuyaviilai		
decla	ire that all statement ma	de in this ap	plication are true,	complete and correct to	the best of n	ny knowledge and be	lief. I	Date:			
	gone through the syllab est for any special conce										
other	ground. I understand th										
cancelled or rejected. Student's Signature									udent's Signature		
Decla	aration by Principal/HOI	D/Chairperso	n						ŭ		
	form is carefully scrutini			me. The information p	rinted in the f	orm is correct to the	best of my kno	owledge	. I also undertake the		
respo	onsibility of fulfillment/re	ctification of	the information. H	e/she is regular studen	of this Colle	ge and has complete	d the required	l attenda	ance and practical		
cours	se/term work (if any) acc	coraing to uni	iversity rules.								
Place											
iace	<del>.</del>										



Date:

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Examination form No.: PRN: Eligibility Status: Division/Section: Roll No.: 074324 2017016403361713 Provisional Instruction Medium: Nationality: India Student's Personal Information Student's Name: **DHIWAR MARINA MANOJ** Mother's Name: MARY Gender: Female Name in Vernacular Language:धीवर मरीना मनोज Address: C/16, SHAH COLONY, NEAR JASMINE STORE, INDRA NAGAR, KANJUR EAST, MUMBAI City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400042 Telephone no.: Mobile no: 917506179177 Email: DOB: May 08, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 910236 (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 Paper Name AM - AT 85501 Th-UA [];Th-CA [] Central Banking 85503 Th-UA [ ] ;Th-CA [ ] 2 Auditing II \_\_\_ Th-UA [ ] ;Th-CA [ ] 3 85504 Human Resource Management 4 85505 Th-UA [ ] ;Th-CA [ ] Turnaround Management 5 85506 International Business Th-UA [ ] ;Th-CA [ ] UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [ ] ;Pw-CA [ ] Exam Form Late Fee Convocation Fee Exam Form Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, The Controller of Examination, Place: Vidyavihar I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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 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:

#### University of Mumbai, Mumbai

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S. K. Somaiya College of Arts, Science and Commerce (540)

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'e-Suvidha' account on



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Seal and Signature of

Principal/HOD/Chairperson

Examination form No.: PRN: Eligibility Status: Division/Section: Roll No.: 074325 Ambre 2017016403361721 Provisional Instruction Medium: Nationality: India Student's Personal Information Student's Name: AMBRE TEJASVI SUNIL Mother's Name: SNEHAL Gender: Female तेजस्वी सुनील Name in Vernacular Language:आंब्रे Address: 2/11, KALAWATI NIWAS, SAMARTH NAGAR, BHANDUP WEST, MUMBAI City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078 Telephone no.: Mobile no: 919987587048 Email: DOB: Aug 09, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Apr-2019 Seat No: 910232 (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 Paper Name AM - AT 85501 Th-UA [];Th-CA [] Central Banking 85503 Th-UA [ ] ;Th-CA [ ] 2 Auditing II \_\_\_ Th-UA [ ] ;Th-CA [ ] 3 85504 Human Resource Management 4 85505 Turnaround Management Th-UA[];Th-CA[] 5 85506 International Business Th-UA [ ] ;Th-CA [ ] UBIFSVI.8 Project Work In Banking and Insurance Pw-UA [ ] ;Pw-CA [ ] Exam Form Late Fee Convocation Fee Exam Form Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, The Controller of Examination, Place: Vidyavihar I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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 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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S. K. Somaiya College of Arts, Science and Commerce (540)

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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	ibility Status:	074326	074326		Roll No	).:	inn		
	2017016403361736 Provisional		rovisional		, <b>       </b>	Α	29		Dovyani		
Instruction Medium: Nationality: India											
	Student's Personal Information										
Stude	ent's Name: <b>KHANV</b> I	ILKAR DEV	YANI PRAKASH			Mother's Name: A	ARTI	C	Gender: Female		
	Name in Vernacular Language: खानविलकर    देवयानी    प्रकाश										
Addre	ess: 10, ASHWINI SOC	IETY, NEAR	≀ GAONDEVI TEMF	PLE, GAONDEVI ROA	D, KALWA W	EST, THANE					
City:	City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400605										
Telephone no.:         Mobile no: 917039439889         Email :											
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decla	uest permission to prese are that all statement ma	ade in this ap	pplication are true, o	complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:			
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