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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination forr 270592	n No.:	Division/Section:	Roll No).:	1	
	2013016401726504		Eligible		III	С	239		Jan -	
Instr	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: DAIYA	AMIT MAHE	SH			Mother's Name: KA	ALPANA	(Gender: Male	
Nam	e in Vernacular Langua	ge:दिया अग्रि	नेत महेश							
Addr	ess: R.NO3 SHRE RA	M NIWAS SI	HIVAJI NAGAR,CI	HECNAKA THANE(W)						
City:	MULUND, Taluka: Tha	ne, District: T	hane, State: Maha	rashtra, PIN: 400604						
Tele	phone no.:		Mob	ile no: 919930685515		Email	•			
DOB	: May 28, 1995	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatior	Details: Ser	n VI [2C00146](Re	gular-Rev16)	Exam Even	t: Mar-2019	Sea	t No: RD	P1019121 (Status: Absent)	
Exar	n form appearance type	: Repeater								
Pape	er Details: Pleas	se select Pa _l	oer details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001 I	Financial Acc	counting and Audit	ng IX - Financial Accounting			Th-U	A[]		
2	83007 I	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-U	A[]		
3	83013 I	Business Eco	onomics VI				Th-U	Th-UA[]		
4 83014 Commerce VI							Th-U	Th-UA[]		
5	83015 I	Direct and In	direct Taxation Pa	oer II			Th-C	A[]		
6 83016 Export Marketing Paper II Th-CA []										
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	mount Recei	veq.	Col	lege Receipt	No. and Date:				
DD N		mount recei	MICR No:	1001	DD Date:	ivo. una Bate.	Bank	· · · · · · · · · · · · · · · · · · ·		
	er Preference (Code/Na	ime).	IIII OTT TO.		DD Date.			··		
	ue Preference (Code/Na									
	Director, Board of Exami		valuations / The C	ontroller Of Examination	n.			Place:	Vidyovihor	
	uest permission to prese					ed fee for the same	hereby	Place.	Vidyavihar	
decla	are that all statement ma	ade in this ap	plication are true,	complete and correct to	the best of m	ny knowledge and be	lief. I	Date:		
	gone through the syllatest for any special conc									
othe	r ground. I understand th									
canc	elled or rejected.							St	udent's Signature	
Decl	aration by Principal/HOI	D/Chairperso	n						<u> </u>	
This 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 purse/term work (if any) according to university rules.									
Place	e:									
Date:				College St	aff Signature				nature of D/Chairnerson	



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	PRN:	Eligibility Status:	Examination form 109653	1 No.:	Division/Section:	Roll No).:		
:	2014016401415744	Eligible		III				1 Sept	
Instru	uction Medium:	_			Nationality:	India			
			Student's Perso	onal Information	on				
Stud	ent's Name: PANCH	AL DIVYA VASANTBHAI			Mother's Name: RE	EKHA	C	Gender: Female	
Nam	e in Vernacular Languaç	ge:पांचाल दिव्या वसंतभाई							
Addr	ess: 102,OMKAR DARS	SHAN,KISAN NAGAR-3,ROAD	NO-22,WAGLE ESTAT	E.					
City:	THANE, Taluka: Thane	, District: Thane, State: Mahara	ashtra, PIN: 400604						
	ohone no.: 25803823		ile no: 919930023764	T	Emai	l : panchalshv	weta01@)gmail.com	
	: Dec 02, 1995	Category: Open		, 	Handicap: No				
		Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 727	73912 (Status: ATKT)	
	n form appearance type:								
		se select Paper details which y		- University A	ssessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1		Financial Accounting and Audit	<u> </u>	<u>~</u>	Th-U	.,			
2		Financial Accounting and Audit	-			Th-U			
3		Business Economics VI					Th-UA[]		
4		Commerce VI				Th-U/			
5		Direct and Indirect Taxation Pa	•			Th-C/			
6 83023 Investment Analysis and Portfolio						Th-C			
	rocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Payn	nent Details: Ar	mount Received:	Coll	lege Receipt I	No. and Date:				
DD N	lo:	MICR No:		DD Date:		Bank	::		
Cent	er Preference (Code/Na	me):	•						
Venu	ie Preference (Code/Nai	me):							
To, C	Director, Board of Exami	nation and Evaluations / The C	Controller Of Examination	n,			Place:	Vidyavihar	
		ent myself for the ensuing exan					Data	•	
		nde in this application are true, bus and the list of books prescr					Date:		
reque	est for any special conce	ession such as change in time	or day fixed for universit	ty Examinatio	n etc. on religious or	any			
	ground. I understand the elled or rejected.	nat in the event of any informati	ion being found false or	incorrect, my	candidature is liable	to be			
Caric	elled of rejected.						Sti	udent's Signature	
Decla	aration by Principal/HOD)/Chairperson							
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.								
D.	_								
Place	9 :								
. .									
Date:			College Staff Signature S			ادم؟	Seal and Signature of		
			- Conogo Ott	Gonege Stan Signature			Principal/HOD/Chairperson		



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B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Elig	bility Status:	Examination f 27059		Division/Section:	Roll No	ı.:		
201	14016401417155		Eligible			В	143			
nstructi	ion Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on	,			
Student	's Name: BANG	AKSHAY SH	YAMSUNDER			Mother's Name: A	ATIV	(Gender: Male	
Name ir	n Vernacular Langu	age:बंग अक्षय	श्याम्सुन्देर							
Address	s: 209/5676 ANITA	KUTIR C 90F	T ROAD GHATKO	PAR EAST						
City: MU	JMBAI, Taluka: Kur	la, District: M	umbai Suburban, S	tate: Maharashtra, F	PIN: 400075					
Telepho	one no.: 25083386		Mob	ile no: 91976973732	26	Ema	il : akshayban	g31@gn	nail.com	
OOB: M	lay 31, 1996	Ca	tegory: Open		Physically Handicap: No					
Previou:	s Latest Examination	on Details: Se	m VI [2C00146](Re	egular-Rev16)	lar-Rev16) Exam Event: Mar-2019 Seat No: RDP1016746 (Status:					
Exam fo	orm appearance typ	e: Repeater								
Paper D	Details: Ple	ase select Pa	per details which y	ou want to appear (JA - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting				A[]		
2	83007	Financial Ac	counting and Audit	ng X - Cost Accounting			Th-U	A []		
3	83013	Business Ec	onomics VI				Th-UA[]			
4	83014	Commerce \	/I				Th-U	Th-UA[]		
5	83015	Direct and Ir	direct Taxation Pa	per II			Th-C	A[]		
6	83029	Elements of	Operational Resea	rch Paper II			Th-C	A[]		
Convoc	ation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark St	atement Fee		Total:							
					•					
	nt Details:	Amount Rece			College Receipt	No. and Date:				
DD No:			MICR No:		DD Date:		Bank	:		
	Preference (Code/N									
	Preference (Code/N	,								
				controller Of Examina				Place:	Vidyavihar	
declare	that all statement n	nade in this a _l	oplication are true,	nination. I have remit complete and correctibed for the examina	t to the best of n	ny knowledge and be	elief. I	Date:		
equest	for any special con	cession such	as change in time	or day fixed for unive	ersity Examination	n etc. on religious o	r any			
	ound. I understand ed or rejected.	that in the ev	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be			
Jarroone	ou or rojoulou.							St	udent's Signature	
Declara	tion by Principal/H0	DD/Chairpers	on							
respons	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:										
_										
Date:			College	Staff Signature				nature of D/Chairperson		



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B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination form 270594	ı No.:	Division/Section:	Roll No.).:			
:	2014016401418603		Eligible			F	689	ļ			
nstrı	uction Medium:					Nationality:	India				
				Student's Perso	nal Informati	on					
Stud	lent's Name: AVLAN	II KORAL SAI	MEER			Mother's Name: AM	ЛІТА	(Gender: Female		
lam	ne in Vernacular Langua	ige:KORAL									
ddr	ress: A 26 KANTA APAF	RTMENT PA	NTNAGAR								
City:	GHATKOPAR EAST, T	Гаluka: Muml	bai, District: Mumb	ai City, State: Maharash	ni City, State: Maharashtra, PIN: 400075						
eler	phone no.:		Moh	oile no: 919022281157		Email	l : koral.avlani	i@gmail	l.com		
OB	3: Oct 03, 1996	Cat	tegory: Open		Physically Handicap: No						
revi	vious Latest Examination	n Details: Ser	m VI [2C00146](Re	gular-Rev16)	ular-Rev16) Exam Event: Mar-2019 Seat No: RDP1021615 (Status: Absent						
xan	m form appearance type	e: Repeater									
ape	er Details: Plea	ise select Pa	per details which y	ou want to appear (UA -	- University A	Assessment,CA - Col	lege Assessn	nent)			
SN	Paper Code			Paper Name					AM - AT		
1	83001	Financial Acr	counting and Audit	ting IX - Financial Accour	nting	Th-UA	A []				
2	83007	Financial Ac	counting and Audit	ting X - Cost Accounting			Th-UA	A []			
3	83013	Business Eco	onomics VI				Th-UA	A []			
4	83014	Commerce V	/I	T			Th-U/	Th-UA[]			
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A []			
6	83023	Investment A	Analysis and Portfo	olio Management Paper I	11		Th-C/	A []			
onv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
/lark	Statement Fee		Total:								
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		Amount Recei	1		College Receipt No. and Date: DD Date: Bank:						
DD N			MICR No:		DD Date:			<u>:</u>			
	ter Preference (Code/Na										
	ue Preference (Code/Na										
				Controller Of Examination				Place:	Vidyavihar		
lecla	are that all statement ma	ade in this ap	pplication are true,	nination. I have remitted complete and correct to ribed for the examination	the best of m	ny knowledge and be	elief. I	Date:			
eque	est for any special conc	cession such	as change in time	or day fixed for university	ty Examinatio	on etc. on religious or	any				
		hat in the eve	ent of any informati	ion being found false or i	incorrect, my	candidature is liable	to be				
anc.	celled or rejected.						!	St	tudent's Signature		
)ecl	aration by Principal/HO	D/Chairperso	on								
espo	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 se/term work (if any) according to university rules.										
Place	e:										
Date:			College Sta	aff Signature				nature of			
							PHINCI	.pai/пОі	Principal/HOD/Chairperson		



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B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

Disciple 16



	PRN:	Eligibility Status:	270595	No Divis	sion/Section:	Roll No.	:	Para	
	2015016400319885	Eligible			F	676		ANKA	
nstr	uction Medium:			Natio	onality:	India			
			Student's Person	al Information					
Stud	ent's Name: KANHU	RKAR AATISH ANKUSH		Mot	ther's Name: KL	INDA	C	Gender: Male	
Nam	e in Vernacular Langua	ge:कान्हुरकर आतिश अंकुश							
Addr	ess: SIDDESHWAR CH	IAWL INDIRA NAGAR NO2 GC	LIBAR ROAD						
City:	GHATKOPAR W, Taluk	ka: Kurla, District: Mumbai Subu	ırban, State: Maharashtra	a, PIN: 400086					
Гele	phone no.:	Mob	ile no: 918108567587		Email	: ATISHKANI	HURKAI	R@GMAIL.COM	
DOB	3: Oct 12, 1995	Category: Open		Physically Handicap: No					
Prev	ious Latest Examination	Details: Sem VI [2C00146](Re	gular-Rev16)	Exam Event: Ma	ır-2019	Seat	No: RDI	P1021644 (Status: Fail)	
Exar	n form appearance type	: Repeater							
Pape	er Details: Pleas	se select Paper details which yo	ou want to appear (UA - I	University Asses	ssment,CA - Col	lege Assessm	ent)		
SN	Paper Code		Paper Name				AM - AT		
1		Financial Accounting and Auditi		ting	Th-UA	\[]			
2	83007 F	Financial Accounting and Auditi	ng X - Cost Accounting		Th-UA	\[]			
3	83013 E	Business Economics VI			Th-UA	١[]			
4	83014	Commerce VI				Th-UA	Th-UA[]		
5	83015 I	Direct and Indirect Taxation Paper	oer II			Th-CA	\[]		
6	83023 I	nvestment Analysis and Portfol	io Management Paper II			Th-CA	١[]		
Conv	vocation Fee	Exam Form Late F	ee E	xam Form Supe	er Late Fee	Exan	nination	Fees	
Mark	Statement Fee	Total:							
Pavr	ment Details: A	mount Received:	Collec	ge Receipt No. a	and Date:				
1 DC		MICR No:	DD Date:			Bank:	Bank:		
	ter Preference (Code/Na		I						
	ue Preference (Code/Na	•							
	·	nation and Evaluations / The C	ontroller Of Examination,				Place:	Vidyavihar	
		ent myself for the ensuing exam					Data	·	
		ade in this application are true, one and the list of books prescri					Date:		
equ	est for any special conc	ession such as change in time o	or day fixed for university	Examination etc	on religious or	any			
	r ground. I understand the elled or rejected.	nat in the event of any informati	on being found false or in	correct, my cand	didature is liable	to be			
Janic	elled of rejected.						Stu	udent's Signature	
Decl	aration by Principal/HOI	D/Chairperson							
		ized by the College staff and by							
		ectification of the information. He	e/she is regular student o	f this College an	d has completed	d the required	attenda	nce and practical	
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Date	,·								
Jaio	··		College Staff Signature		Seal and Signature of				
			Conlege Stan Signature			Principal/HOD/Chairperson			



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			Examination form	m No ·			i	
	PRN:	Eligibility Status:	270596		Division/Section:	Roll No.	.:	Downst -
_ :	2015016401742181	Eligible		III	D	478		
Instru	uction Medium:				Nationality:	India		
			Student's Person	onal Informati	on			
Stud	ent's Name: SAWAN	IT VAIBHAV MUKUNDA			Mother's Name: LII	_A	G	Gender: Male
Nam	e in Vernacular Langua	ge:सावंत वैभव मुकुंदा						
Addr	ess: ROOM NO 63, BLI	DG NO A2, D.G.Q.A. COLON	Y, JAGDUSHA NAGAR,	GOLIBAR RO	DAD, GHATKOPAR V	WEST		
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban,	State: Maharashtra, PIN	: 400086				
Telep	phone no.:	Mo	bile no: 918898640532		Email	l:		
DOB	: Aug 11, 1998	Category: Reserved	(SC)	Physically	Handicap: No			
Previ	ious Latest Examination	n Details: Sem VI [2C00146](R	egular-Rev16)	Exam Even	t: Apr-2020	Seat	No: RDI	P1063517 (Status: Absent)
Exan	n form appearance type	: Repeater						
Pape	er Details: Pleas	se select Paper details which	you want to appear (UA	University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code		Paper Name					AM - AT
1	83013 E	Business Economics VI		7			۹[]	
2	83016 E	Export Marketing Paper II					۹[]	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees
Mark Statement Fee Total:								
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		mount Received:	Col	llege Receipt	No. and Date:	D1		
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	ue Preference (Code/Na							
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	•	ent myself for the ensuing exa		•	ad fee for the same	herehy	Place:	Vidyavihar
decla	are that all statement ma	ade in this application are true	, complete and correct to	o the best of m	ny knowledge and be	lief. I	Date:	
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		hat in the event of any informa						
canc	elled or rejected.	·	-	·			C+.	ident's Cianatura
Dool	aration by Principal/HOI	D/Chairnaman					Sil	udent's Signature
	• .	ized by the College staff and b	y mo. The information n	vinted in the fo	arm is correct to the l	host of my kno	owlodgo	Lalea undartaka tha
		ectification of the information.						
cours	urse/term work (if any) according to university rules.							
Place	Э :							
			_					
Date								
	College Staff Signature Seal and Signature of Principal/HOD/Chairperson							



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Examination form No.:

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PRN:	Eligibility Status:	Examination form 270597	n No.:	Division/Section:	Roll No.	.:	Alta.		
2015016401884232	Eligible			E	599		(Nilah		
Instruction Medium:				Nationality:	India	•			
		Student's Perso	onal Informati	on					
Student's Name: TIWARI N	IILESH JAI PRAKASH			Mother's Name: N	ITA	Ge	nder: Male		
Name in Vernacular Language	:तिवारी निलेश जी PRAKASH	I							
Address: 21, 3RD FLOOR, BA DOMBIVALI WEST, THANE 421202	GU BHAI APT, KOPAR ROA	AD							
City: DOMBIVALI, Taluka: Kaly	yan, District: Thane, State: M	laharashtra, PIN: 42120	2						
Telephone no.: 8130766	Mot	oile no: 919920858585		Emai	il : rahul_tiwari	i8585@yal	hoo.com		
DOB: Feb 16, 1997	Category: Open		Physically	Handicap: No					
Previous Latest Examination D	Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Oct-2019	Seat	No: RDP3	3121149 (Status: Absent)		
Exam form appearance type: F	Repeater								
Paper Details: Please	select Paper details which y	ou want to appear (UA	- University A	ssessment,CA - Co	llege Assessm	nent)			
SN Paper Code		Paper Name	Paper Name			AM - AT			
1 83013 Bu	isiness Economics VI					Th-UA []			
Convocation Fee	Exam Form Late	ee Exam Form Super Late Fee			Exar	nination Fe	ees		
Mark Statement Fee	Total:								
Payment Details: Amo	ount Received:	Col	lege Receipt	No. and Date:					
DD No:	MICR No:		DD Date:		Bank				
Center Preference (Code/Nam	ne):								
Venue Preference (Code/Name	,								
To, Director, Board of Examina	ation and Evaluations / The C	Controller Of Examinatio	n,			Place:	Vidyavihar		
I request permission to present						Date:	•		
declare that all statement made have gone through the syllabus						Date.			
request for any special conces									
other ground. I understand that cancelled or rejected.	t in the event of any informat	ion being found false or	incorrect, my	candidature is liable	e to be				
						Stud	ent's Signature		
Declaration by Principal/HOD/0	Chairperson								
responsibility of fulfillment/recti	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place:									
Date:		College Sta	aff Signature			and Signat pal/HOD/0	ure of Chairperson		



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 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligibility Status:	Examination forr 109654	n No.:	Division/Section:	Roll No	.:	Frathamesh	
	2016016400202724	Eligible						Trathamesh	
Instru	uction Medium:			N	Nationality:	India			
		_	Student's Pers	onal Informatio	n				
Stud	ent's Name: DAUND	KAR PRATHAMESH CHANDI	RAKANT		Mother's Name: AL	.KA	(Gender: Male	
Nam	e in Vernacular Languaç	ge:दौंडकर प्रथमेश चंद्रकांत							
Addr	ess: OM SHIV SHAKTI	SOCITY VIKROLI PARKSITE							
City:	VIKROLI, Taluka: Kurla	, District: Mumbai Suburban, S	State: Maharashtra, PIN	: 400079					
Tele	phone no.:	Mot	oile no: 919773896079		Email	I:PRATHAM	26698@	GMAIL.COM	
DOB	: Jun 25, 1998	Category: Open		Physically H	Handicap: No				
Prev	ious Latest Examination	Details: Sem I(Regular-Rev16	i)	Exam Event: Nov-2019 Seat No: 7014670 (Status: Pass)					
Exan	n form appearance type:	: Fresher							
Pape	er Details: Pleas	se select Paper details which y	ou want to appear (UA	- University As	ssessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1		inancial Accounting and Audit	-			Th-U/	۹[]		
2	83007 F	inancial Accounting and Audit	ng X - Cost Accounting			Th-U	۹[]		
3	83013 E	Business Economics VI					۹[]		
4	83014	Commerce VI					۹[]		
5	83015	Direct and Indirect Taxation Pa	per II			Th-C/	۹[]		
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []									
Conv	ocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Pavn	nent Details: Ar	mount Received:	Co	llege Receipt N	lo and Date:				
DD N		MICR No:		DD Date:	to. and Bato.	Bank			
	er Preference (Code/Na			DD Date.		Dank			
	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·							
	•	nation and Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar	
		ent myself for the ensuing exar							
		ade in this application are true, ous and the list of books prescr					Date:		
		ession such as change in time							
othe	r ground. I understand th	nat in the event of any informat							
canc	elled or rejected.						St	udent's Signature	
Decl	aration by Principal/HOD	D/Chairperson							
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								
cour	se/term work (if any) acc	cording to university rules.							
Place	e:								
Date									
Date			College St	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 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	ibility Status:	Examination form 270598	No.:	Division/Section:	Roll No).:	Nikita.
2	2016016400215396		Eligible			С	231		-2
nstru-	iction Medium:		-			Nationality:	India		
				Student's Persor	nal Informati	on			
Stude	ent's Name: CHOTAI	LIYA NIKITA	NATVARLAL			Mother's Name: VA	RSHA		Gender: Female
Name	e in Vernacular Languaç	ge:चोटालिया	निकिता नटवरलाल						1
Addre	ess: G-2, BHIMWADI, P	ALUBAI CH	AWL, DR. R.P. RC	DAD, MULUND (W), MUN	MBAI - 4000	80.			
		a, District: Mu	ımbai Suburban, S	State: Maharashtra, PIN:	400080				
Telep	phone no.:		Mob	oile no: 919833061327		Email	l : chotaliyanil	kita26@	gmail.com
DOB:	Jun 26, 1999	Cat	tegory: Open		Physically	Handicap: No			
Previo	ous Latest Examination	ı Details: Ser	n VI [2C00146](Re	gular-Rev16)	Exam Even	nt: Mar-2019	Sea ⁴	t No: RD	P1019096 (Status: Fail)
Exam	form appearance type:	Repeater							
Paper	r Details: Pleas	se select Par	per details which y	ou want to appear (UA -	University F	Assessment,CA - Col	lege Assessr	nent)	
SN	Paper Code			Paper Name					AM - AT
1	83013 E	Business Eco	onomics VI				Th-U	A []	
Conv	ocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark Statement Fee Total:									
		mount Recei	T		· .	No. and Date:			
DD No			MICR No:		DD Date:		Bank	<u>c</u>	
	er Preference (Code/Na	•							
	e Preference (Code/Na	<u> </u>							
	•			Controller Of Examination	•			Place:	Vidyavihar
declar	re that all statement ma	ade in this ap	oplication are true,	nination. I have remitted to complete and correct to to ibed for the examination	the best of m	ny knowledge and be	elief. I	Date:	
				or day fixed for university					
other (ground. I understand th			ion béing found false or i					
cance	elled or rejected.							St	tudent's Signature
Decla	aration by Principal/HOD	D/Chairperso	on n						
respo	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:	£								
Date [.]	e:								



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination for 109655		Division/Section:	Roll No.	.:	al de la	
	2016016400219413		Eligible						8/	
Instru	uction Medium:					Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stud	ent's Name: BHALIA	A ISHA KISH	OR			Mother's Name: Kl	RAN	(Gender: Female	
Nam	e in Vernacular Langua	age:भालिया ई	शा किशोर							
Addr	ess: ROOM NO. 1, SH	AMJI KARAN	ISHI WADI, CAMA	LANE, KIROL ROAD), GHATKOPAF	RWEST				
City:	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, Pl	IN: 400086					
Tele	phone no.:		Mot	ile no: 917506464312	2	Emai	il : bhaliaisha2	2@gma	il.com	
DOB	: Jan 06, 1998	Ca	tegory: Open		Physically Handicap: No					
Prev	ous Latest Examinatio	n Details: Se	m I(Regular-Rev16	5)	Exam Even	t: Nov-2019	Seat	No: 70	14661 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	se select Pa	per details which y	ou want to appear (U	JA - University A	ssessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting			Th-UA	4[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounti	ng		Th-UA	4[]		
3	83013	Business Ec	onomics VI					4[]		
4	83014	Commerce \	/I	Т			Th-UA	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	۹[]		
6	83023	Investment A	analysis and Portfo	lio Management Pape	er II		Th-CA	۹[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Rece	ived:		College Receipt	No. and Date:				
DD N		unount rece	MICR No:		DD Date:	ito. and Bate.	Bank			
	er Preference (Code/N	ame).	imorrio.		DD Date.		Dank	•		
	e Preference (Code/Na									
	Director, Board of Exam		valuations / The C	ontroller Of Examina	tion.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	i iace.	viuyaviilai	
decla	re that all statement m	ade in this ap	oplication are true,	complete and correct	to the best of m	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond									
othe	ground. I understand t									
canc	elled or rejected.							St	udent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on						ŭ	
This resp	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	à·									
riace.										
Date:										
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN:	Eligibility Status:	Examination form 270599	n No.:	Division/Section:	Roll No.	.:	Agirar	
2016016400219587	Eligible		III	F	633		ago.	
Instruction Medium:	•			Nationality:	India			
	_	Student's Person	onal Informati	on				
Student's Name: BAIKAR	ΓEJAS UDAY			Mother's Name: UI	RMILA	G	Gender: Male	
Name in Vernacular Language	e:TEJAS UDAY BAIKAR					•		
Address: ROOM NO. 315 3/3	K. H. OPP. SOCIETY KATOD	DIPADA BHATWADI GI	HATKOPAR (W.)				
City: MUMBAI, Taluka: Thane	, District: Thane, State: Maha	rashtra, PIN: 400084						
Telephone no.:	Mob	ile no: 918976722652		Emai	l : tejasbaikar	1998@g	mail.com	
DOB: Apr 04, 1998	Category: Reserved (OBC)	Physically	Handicap: No				
Previous Latest Examination [Details: Sem VI [2C00146](Re	gular-Rev16)	6) Exam Event: Mar-2019 Seat No: RDP1021618 (Status: Fail)					
Exam form appearance type:	Repeater							
Paper Details: Please	e select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessm	nent)		
SN Paper Code		Paper Name				AM - AT		
					Th-U/	Th-UA[]		
Convocation Fee	Exam Form Late	Fee	Exam Form Super Late Fee		Exar	Examination Fees		
Mark Statement Fee Total:								
D D. I. T.	· B · · · ·		. 5	N 15 :				
•	ount Received:	Col	· ·	No. and Date:	DI			
DD No:	MICR No:		DD Date:		Bank	:		
Center Preference (Code/Nan	•							
Venue Preference (Code/Nam	•		_					
To, Director, Board of Examin				16 6 11		Place:	Vidyavihar	
I request permission to preser declare that all statement mad have gone through the syllabu	le in this application are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
request for any special conces								
other ground. I understand the	at in the event of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
cancelled or rejected.						Stu	udent's Signature	
Declaration by Principal/HOD/	Chairperson							
This form is carefully scrutiniz								
	esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical burse/term work (if any) according to university rules.							
- work (ii dily) deec								
Place:								
		_						
Date:								
	College Staff Signature Seal and Signature of Principal/HOD/Chairperson							
					Princi	µai/⊓UL	"Chalipeison	



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S. K. Somaiya College of Arts, Science and Commerce (540) Application Form for Examination of Summer Session 2021 event. B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146] ed 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 'e-Suvidha' account on Examination form No.: 270600 PRN: Eligibility Status: Division/Section: Roll No.: Thogale 229 2016016400230217 Eligible С Instruction Medium: Nationality: India

					,			
			Student's	Personal Informat	ion			
Stude	ent's Name: CHO	GALE SACHIT	A PRAMOD		Mother's Name: RESI	НМА	G	ender: Female
Nam	e in Vernacular Lang	juage:चोगले सर्ग	चेता प्रमोद					
Addr	ess: AADARSH CHA	L NO 01 ROOI	M 05 DIVA AAGASAN ROAD DIVA E					
City:	DIVA, Taluka: Thane	e, District: Than	ie, State: Maharashtra, PIN: 400612					
Telep	ohone no.:		Mobile no: 918692841	168	Email : r	ote.schoo	ol@yahoo.	.com
DOB	: May 28, 1998	Ca	tegory: Open	Physically	/ Handicap: No			
Previ	ious Latest Examinat	tion Details: Se	m VI [2C00146](Regular-Rev16)	Exam Ever	nt: Mar-2019	Sea	t No: RDP	1019093 (Status: Absent
Exan	n form appearance ty	pe: Repeater						
Pape	er Details: PI	lease select Pa	per details which you want to appear	(UA - University	Assessment,CA - Colleg	e Assessi	ment)	
SN	Paper Code		Paper N	ame				AM - AT
1	83001	Financial Ac	counting and Auditing IX - Financial A	Accounting		Th-U	A[]	
2	83007	Financial Ac	counting and Auditing X - Cost Accou	counting Th-				
3	83013	Business Ec		Th-U	A[]			
4	83014	Commerce \	/I			Th-U	A[]	
5	83015	Direct and In	direct Taxation Paper II			Th-C	A[]	
6	83016	Export Mark	eting Paper II			Th-CA[]		
Conv	ocation Fee		Exam Form Late Fee	Exam Form	Super Late Fee	Exa	mination F	ees
Mark	Statement Fee		Total:					
		1		Ia.,				
	nent Details:	Amount Rece	1	College Receipt	No. and Date:	15		
DD N			MICR No:	DD Date:		Banl	K:	
	er Preference (Code							
	e Preference (Code/							
	•		Evaluations / The Controller Of Exami	•			Place:	Vidyavihar
decla	are that all statement	made in this ap	or the ensuing examination. I have rerepplication are true, complete and correlist of books prescribed for the examin	ect to the best of r	ny knowledge and belie	f. I	Date:	
reque other	est for any special co	ncession such	as change in time or day fixed for uni ent of any information being found fal	iversity Examination	on etc. on religious or ar	ıy		

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.

Student's Signature

Place:		
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 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination form 270601	n No.:	Division/Section:	Roll No	o.:	Fred 3.5
:	2016016400288271		Eligible			Α	64		thursday.
Instru	ıction Medium:	•				Nationality:	India	-	
				Student's Person	onal Informati	on			
Stude	ent's Name: MOHITE	SAYLI RAJ	IENDRA			Mother's Name: R	EEMA	G	ender: Female
Nam	e in Vernacular Languaç	ge:MOHITE	SAYLI RAJENDRA	A		•			
Addr	ess: A 1 CHIRANTAN S	HIVSHRUS	HTI						
City:	MUMBAI, Taluka: Mum	bai, District:	Mumbai City, Stat	e: Maharashtra, PIN: 40	00024				
Telep	ohone no.: 25228006		Mob	ile no: 917718804201		Ema	il : mohitesay	li23@gma	ail.com
DOB	: Nov 27, 1998	Cat	egory: Open		Physically	Handicap: No			
Previ	ous Latest Examination	Details: Ser	n VI [2C00146](Re	egular-Rev16)	Exam Even	t: Mar-2019	Sea	t No: RDF	P1018028 (Status: Fail)
Exan	n form appearance type:	: Repeater							
Pape	r Details: Pleas	se select Pa _l	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	83007 F	inancial Acc	counting and Audit	ing X - Cost Accounting			Th-U	IA []	
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Exam					amination Fees				
Mark Statement Fee Total:									
_				I ₀ .					
_		mount Recei		Col		No. and Date:	- In		
DD N			MICR No:		DD Date:		Ban	K:	
	er Preference (Code/Na								
	e Preference (Code/Na		reducations / The C	Annalia of Francis atla	_			1	
	Pirector, Board of Exami						I be each	Place:	Vidyavihar
decla	uest permission to prese ure that all statement ma	ide in this ap	plication are true,	complete and correct to	the best of n	ny knowledge and b	elief. I	Date:	
	gone through the syllab est for any special conce								
other	ground. I understand th								
canc	elled or rejected.							Stu	ident's Signature
Decla	aration by Principal/HOI	D/Chairperso	on						
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place	2:								
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination fo 109656		Division/Section:	Roll No	:	And the second
:	2016016400288402		Eligible						N. O. T.
Instru	uction Medium:					Nationality:	India		
				Student's Per	sonal Informati	on			
Stud	ent's Name: LATHI	'A RAVI GOK	(UL BHAI			Mother's Name: K	ALPANA	(Gender: Male
Nam	e in Vernacular Langua	ige:लाथिया रव	री गोकुल भाई						
Addr	ess: 4, A WING PANTN	NAGER, GHA	TKOPAR MUMBA	l 400075					
City:	GHATKOPAR MUMBA	d, Taluka: Ku	rla, District: Mumb	ai Suburban, State: M	laharashtra, Pli	N: 400075			
Tele	ohone no.:		Mob	ile no: 917303024485	5	Emai	I : LATHIYAR.	AVI049(@GMAIL.COM
DOB	: Mar 16, 1998	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 727	73929 (Status: ATKT)
Exan	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Pa _l	oer details which y	ou want to appear (U	A - University A	ssessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Name	е				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	ounting		Th-UA	۹[]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	ng		Th-UA	A[]	
3	83013	Business Eco	onomics VI			Th-UA[]			
4	83014	Commerce V	7				Th-U	۹[]	
5 83015 Direct and Indirect Taxation Paper II							Th-CA	A[]	
6	83023	Investment A	nalysis and Portfo	lio Management Pape	er II		Th-C	۹[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	mount Recei	ved:	С	ollege Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bank	:	
Cent	er Preference (Code/Na	ame):			l		I		
	ie Preference (Code/Na								
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar
	uest permission to pres							D-4	
	are that all statement m gone through the sylla							Date:	
requ	est for any special cond	ession such	as change in time	or day fixed for univer	sity Examination	n etc. on religious o	r any		
	r ground. I understand t elled or rejected.	hat in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be		
caric	elled of rejected.							St	udent's Signature
Declaration by Principal/HOD/Chairperson									
	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical								
	onsibility of fulfillment/re se/term work (if any) ac			e/she is regular stude	nt of this Collec	je and has complete	d the required	l attenda	ance and practical
-									
Place	e:								
				_					
Date	:								
				College S	Staff Signature				nature of
							Princi	pal/HO[D/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status:				Examination form 270602	No.:	Division/Section:	Roll No	0.:	@ist
:	2016016400288425		Eligible			F	685		00
Instru	uction Medium:	•				Nationality:	India	•	
				Student's Perso	nal Informati	on			
Stud	ent's Name: HARIA	NIEL HARAK	HCHAND			Mother's Name: TA	RAMATI	C	Gender: Male
Nam	e in Vernacular Langua	ge:हरिया निए	ल हराकचंद						
Addr	ess: 21-B 11 ASHOK N	AGAR KALY	AN ROAD BHIWA	NDI					
City:	BHIWANDI, Taluka: Bl	niwandi, Distri	ict: Thane, State: N	Maharashtra, PIN: 42130)2				
Tele	phone no.:		Mob	ile no: 918237757871		Emai	: HARIA861	I@GMAIL	COM
DOB	: Aug 03, 1998	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Sen	n VI [2C00146](Re	gular-Rev16)	Exam Even	t: Mar-2019	Sea	at No: RD	P1021637 (Status: Fail)
Exan	n form appearance type	: Repeater							
Pape	er Details: Plea	se select Pap	oer details which y	ou want to appear (UA -	University A	Assessment,CA - Col	lege Assess	ment)	
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	nting		Th-U	JA []	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-U	JA []	
3	83023	Investment A	nalysis and Portfo	lio Management Paper I	I		Th-C	A[]	
Conv	onvocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees								
Mark	Statement Fee		Total:						
	.=			la					
·		mount Recei		'		No. and Date:	15		
DD N			MICR No:		DD Date:		Ban	k:	
	er Preference (Code/N								
	ue Preference (Code/Na			015				_	
				ontroller Of Examination				Place:	Vidyavihar
decla	are that all statement m	ade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and be	lief. I	Date:	
				ibed for the examination or day fixed for universit					
othe	r ground. Í understand t			on being found false or					
canc	elled or rejected.							Stu	udent's Signature
Deck	aration by Principal/HO	D/Chairnerso	n					0	adoni o dignataro
	•	•		me. The information pr	inted in the fo	orm is correct to the	nest of my kr	nowledae	Lalso undertake the
resp		ectification of	the information. H	e/she is regular student					
Place	e:								
Date	·								



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Seal and Signature of Principal/HOD/Chairperson

PRN:	Eligibility Status:	Examination form 270603	n No.:	Division/Section:	Roll No	:	a gya
2016016400288433	Eligible		III	D	461	d	promise and
Instruction Medium:	,	•		Nationality:	India	•	
		Student's Person	onal Informati	on			
Student's Name: RAIMANG	GYA MITESH RAJESH			Mother's Name: RA	JESHWARI	Gende	er: Male
Name in Vernacular Language	ःरैमंग्या मितेश राजेश						
Address: A/2 MAHESH KRUP	A DEVIDAYAL ROAD MULL	JND (WEST)					
City: MUMBAI, Taluka: Kurla, I	District: Mumbai Suburban, 🤄	State: Maharashtra, PIN	: 400080				
Telephone no.:	Mol	oile no: 919819088971		Email	: ruchikothar	i86@yahoo.co	o.in
DOB: Nov 11, 1998	Category: Open		Physically	Handicap: No			
Previous Latest Examination D	Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Mar-2019	Seat	No: RDP102	0487 (Status: Fail)
Exam form appearance type: F	Repeater						
Paper Details: Please	e select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Coll	ege Assessn	nent)	
SN Paper Code		Paper Name				AM	Л - AT
1 83013 Bu	usiness Economics VI				Th-U/	۱[]	
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination Fees	3
Mark Statement Fee	Total:						
Payment Details: Amo	ount Received:	Cal	llege Receipt	No. and Date:			
DD No:	MICR No:	001	DD Date:	140. and Date.	Bank		
Center Preference (Code/Nam			DD Date.		Dank	-	
Venue Preference (Code/Nam							
To, Director, Board of Examina	<u>'</u>	Controller Of Examination	on.			Place: Vid	lyavihar
I request permission to presen				ed fee for the same. I	hereby	riacc. Vic	ayavınan
declare that all statement mad	le in this application are true,	complete and correct to	the best of n	ny knowledge and be	lief. I	Date:	
have gone through the syllaburequest for any special conces							
other ground. I understand that							
cancelled or rejected.						Student	's Signature
Declaration by Principal/HOD/	Chairperson						ŭ
This form is carefully scrutinize responsibility of fulfillment/rect	ed by the College staff and b	y me. The information p	rinted in the fo	orm is correct to the b	est of my kno	owledge. I als attendance a	o undertake the
course/term work (if any) acco		ŭ	`	•	·		•
Place:							
Date:							



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN:	Eligibility Status:	Examination form 270604	n No.:	Division/Section:	Roll No	ı.:	Gaisnas
2016016400288897	Eligible			Α	59		Gaissa
Instruction Medium: Nationality: India							
		Student's Person	onal Informati	on			
Student's Name: JAISWAL	JYOTI VISHWAMBHARNAT	Н		Mother's Name: VI	MLA		Gender: Female
Name in Vernacular Language	:जैस्वाल ज्योती विश्वम्भरनाथ						
Address: 5/B, GROUND FLR,	SHIV TIRTH APT., SHANI NA	AGAR.					
City: BADLAPUR, Taluka: Amb	parnath, District: Thane, State	e: Maharashtra, PIN: 42	1503				
Telephone no.:	Mob	ile no: 918983380651		Emai	: jyoti.jj09@g	gmail.cor	m
DOB: Jul 09, 1996	Category: Open		Physically	Handicap: No			
Previous Latest Examination D	etails: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Mar-2019	Sea	t No: RD	P1017682 (Status: Fail)
Exam form appearance type: F	Repeater						
Paper Details: Please	select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)	
SN Paper Code		Paper Name					AM - AT
1 83013 Bu	siness Economics VI				Th-U	A []	
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees							Fees
Mark Statement Fee	Total:						
December 1 Detailer	annat Danah sadi	0-1	lana Danaint I	No. and Date:			
	ount Received:	Coi	<u> </u>	No. and Date:	David		
DD No:	MICR No:		DD Date:		Bank	<u>. </u>	
Center Preference (Code/Nam	•						
Venue Preference (Code/Nam To, Director, Board of Examina	,	controller Of Everninetic	<u> </u>			I	
I request permission to present			•	ad foo for the same	horoby	Place:	Vidyavihar
declare that all statement made						Date:	
have gone through the syllabu							
request for any special conces other ground. I understand that							
cancelled or rejected.		g					
D 1 11 1 D1 1 1/1/0D/	<u> </u>					Sti	udent's Signature
Declaration by Principal/HOD/	•	The information of		:			l alaaada.dalaa dha
This form is carefully scrutinize responsibility of fulfillment/rect course/term work (if any) acco	ification of the information. H						
Place:							
Date:							



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 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	Examination form 270605	No.:	Division/Section:	Roll	No.:	o M
2	2016016400288924		Eligible			Α	1:	24	(and
nstru	ıction Medium:	•				Nationality:	India		
				Student's Perso	nal Informati	on			
Stude	ent's Name: MEIS	HERI MANISH	CHARUL			Mother's Name: Na	AGMA	(Gender: Male
Name	e in Vernacular Langu	lage:मेईशेरी म	नीष चारूल						
Addre	ess: CHEMBUR								
City:	CHEMBUR, Taluka: k	Kurla, District:	Mumbai Suburban	, State: Maharashtra, Pl	N: 400074				
ГеІер	hone no.:		Mob	ile no: 918879811501		Emai	l :		
OOB	: May 03, 1997	Cat	tegory: Open		Physically	Handicap: No			
Previ	ous Latest Examination	on Details: Sei	m V [2C00145](Re	gular-Rev16)	Exam Even	t: Apr-2020	S	Seat No: RD	P1185192 (Status: Fail)
Exan	n form appearance typ	e: Repeater							
Pape	r Details: Ple	ase 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	83020	Computer sy	stems and Applica	tions Paper II			Th	n-CA []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	E	xamination	Fees
Mark	Statement Fee		Total:						
				1			·		
	1	Amount Rece			· .	No. and Date:			
DD N			MICR No:		DD Date:		B	ank:	
	er Preference (Code/N								
	e Preference (Code/N								
	·			ontroller Of Examination				Place:	Vidyavihar
decla	re that all statement n	nade in this ap	plication are true,	nination. I have remitted complete and correct to bed for the examination	the best of n	ny knowledge and be	elief. I	Date:	
eque	est for any special con	cession such	as change in time	or day fixed for universit	y Examinatio	on etc. on religious o	any		
other	ground. I understand elled or rejected.	that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be		
Janic	clied of rejected.							St	udent's Signature
Decla	aration by Principal/Ho	OD/Chairperso	on						
respo		rectification of	the information. H	me. The information pre/she is regular student					
Place) :								



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



PRN:	Eligibility Status:	Examination form 270606	No.:	Division/Section:	Roll No.	.:	Ipooja	
2016016400303783	Eligible			В	113		1 poola	
Instruction Medium: Nationality: India								
		Student's Person	nal Informati	on				
Student's Name: JAKHELIA	POOJA BIPIN BINABEN			Mother's Name: B	NABEN	(Gender: Female	
Name in Vernacular Language:	जाखेळिया पूजा बिपीन बिनाबेन	f				<u>'</u>		
Address: ROOM NO -3, RAMA HANUMAN NAGAR, PRATAP BHANDUP (WEST)								
City: MUMBAISUB, Taluka: Kui	rla, District: Mumbai Suburba	an, State: Maharashtra, I	PIN: 400078					
Telephone no.:	Mob	ile no: 918655282396		Ema	l : poojajakhel	ia2017@	gmail.com	
DOB: Sep 21, 1998	Category: Open		Physically	Handicap: No				
Previous Latest Examination De	etails: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Mar-2019	Seat	No: RD	P1016764 (Status: Fail)	
Exam form appearance type: R	epeater							
Paper Details: Please	select Paper details which y	ou want to appear (UA -	University A	ssessment,CA - Co	llege Assessm	nent)		
SN Paper Code		Paper Name					AM - AT	
1 83013 Bus	siness Economics VI				Th-UA	۱] ۱		
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees	
Mark Statement Fee	ark Statement Fee Total:							
Danis Data Harris	at David and	0.11	D'	Marad Data				
	ount Received:		DD Date:	No. and Date:	Danle	_		
DD No:	MICR No:		DD Date.		Bank:	•		
Center Preference (Code/Name	•							
Venue Preference (Code/Name To, Director, Board of Examinate	·	ontroller Of Evernination	`			<u> </u>		
I request permission to present			•	ad foo for the same	l horoby	Place:	Vidyavihar	
declare that all statement made	e in this application are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
have gone through the syllabus request for any special concess								
other ground. I understand that								
cancelled or rejected.	cancelled or rejected. Student's Signature							
Declaration by Principal/HOD/C	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:								
College Staff Signature College Staff Signature Seal and Signature of Principal/HOD/Chairperson								



PRN:

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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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

Eligibility Status:

'e-Suvidha' account on

Roll No.:

Division/Section:



270607 261 2016016400303984 C Eligible Instruction Medium: Nationality: India Student's Personal Information Student's Name: **GADA PALAK NILESH** Mother's Name: JAYSHREE Gender: Male Name in Vernacular Language:गाडा पालक Nilesh Address: 103, PRINCE APT, NAVROJI LANE, GHATKOPAR WEST, MUMBAI-400086. City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400086 Telephone no.: 25162297 Mobile no: 919769670869 Email: palakgada1@gmail.com DOB: Apr 09, 1998 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Apr-2020 Seat No: RDP1016690 (Status: Fail) Exam form appearance type: Repeater Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) SN Paper Code Paper Name AM - AT 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA[] 83013 Th-UA[] Business Economics VI Exam Form Late Fee Exam Form Super Late Fee **Examination Fees** Convocation Fee Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: DD Date: DD No: MICR No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / 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: Seal and Signature of College Staff Signature Principal/HOD/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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PRN:	Eligibility Status:	Examination form 270608	No.:	Division/Section:	Roll No.	.:	Pellishasuo	
2016016400304136	Eligible			E	611		Sollie.	
Instruction Medium:				India	•			
		Student's Perso	nal Informati	on				
Student's Name: VISHWAS	RAO MAYUR RAVICHANDI	RA		Mother's Name: RA	JASHREE	C	Gender: Male	
Name in Vernacular Language	:VISHWASRAO MAYUR RA	VICHANDRA						
Address: 43B /44 THANE MAD	DHUBAN CHS BRINDAVAN	SOCIETY THANE [W]						
City: CITY, Taluka: Thane, Dist	trict: Thane, State: Maharash	ntra, PIN: 400601						
Telephone no.:	Mob	ile no: 919867968439		Email	: mayurrv199	98@gma	ail.com	
DOB: Jun 30, 1998	Category: Open		Physically	Handicap: No				
Previous Latest Examination D	etails: Sem II [2C00532](Re	gular-Rev16)	Exam Even	t: Apr-2020	Seat	:No:RD	P1245365 (Status: Pass)	
Exam form appearance type: R	Repeater							
Paper Details: Please	select Paper details which y	ou want to appear (UA -	University A	ssessment,CA - Coll	ege Assessm	nent)		
SN Paper Code		Paper Name					AM - AT	
1 83001 Fin	ancial Accounting and Audit	ing IX - Financial Accou	nting		Th-UA	۹[]		
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees	
Mark Statement Fee	Total:							
		T						
	ount Received:		<u> </u>	No. and Date:				
DD No:	MICR No:		DD Date:		Bank	:		
Center Preference (Code/Name	e):							
Venue Preference (Code/Name	'							
To, Director, Board of Examina	ition and Evaluations / The C	controller Of Examination	1,			Place:	Vidyavihar	
I request permission to present declare that all statement made have gone through the syllabus	e in this application are true,	complete and correct to	the best of m	y knowledge and bel	ief. I	Date:		
request for any special concess								
other ground. I understand that	in the event of any informat	on being found false or	incorrect, my	candidature is liable	to be			
cancelled or rejected.	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 Principal/HOD/Chairperson								



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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PRN:	Eligibility Status:	Examination form 270609	ı No.:	Division/Section:	Roll No	0.:	
2016016400304167	Eligible			F	645	o.:	
Instruction Medium:				Nationality:	India	•	
		Student's Perso	nal Informati	on			
Student's Name: JAISWAL	ANJALI AJAY			Mother's Name: M.	AMTA	Gender: Female	
Name in Vernacular Language	:ANJALI AJAY JAISWAL						
Address: 5/6 SHRADHA SHAN	ITI SOC BHARAT NAGAR V	IKHROLI EAST					
City: MUMBAI, Taluka: Kurla, [District: Mumbai Suburban, S	tate: Maharashtra, PIN:	400083				
Telephone no.:	Mob	ile no: 919321491006		Emai	1:		
DOB: May 31, 1999	Category: Open		Physically	Handicap: No			
Previous Latest Examination D	etails: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Apr-2020	Sea	t No: RDP1017055 (Status: Fail)	
Exam form appearance type: F	Repeater						
Paper Details: Please	select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessi	ment)	
SN Paper Code		Paper Name				AM - AT	
1 83016 Ex	port Marketing Paper II				Th-C	A[]	
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Exam					amination Fees		
Mark Statement Fee Total:							
Payment Details: Amo	ount Received:	Call	ogo Pocoint	No. and Date:			
DD No:	MICR No:	<u> </u>	DD Date:	No. and Date.	Banl	<i>r</i> ·	
Center Preference (Code/Nam			DD Date.		Dani	ν.	
Venue Preference (Code/Name	•						
To, Director, Board of Examina	,	controller Of Examination	n.			Place: Vidyavihar	\neg
I request permission to present			•	ed fee for the same.	I hereby	riace. Viuyaviilai	
declare that all statement made	e in this application are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:	
have gone through the syllabus request for any special concess							\neg
other ground. I understand that							
cancelled or rejected.						Student's Signature	
Declaration by Principal/HOD/0	Chairperson						
This form is carefully scrutinize	ed by the College staff and by	me. The information pr	inted in the f	orm is correct to the	best of my kn	owledge. I also undertake the	
responsibility of fulfillment/recti course/term work (if any) accor		e/she is regular student	of this Collec	ge and has complete	d the require	d attendance and practical	
course/term work (if any) accor	ruing to university rules.						
Place:							
Date:							
		College Sta	aff Signature			and Signature of	
					Princ	ipal/HOD/Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Instruction Medium: Student's Personal Information		PRN:	Eligi	bility Status:	Examination form 270610	n No.:	Division/Section:	Roll No.	.:	704 (0 4)
Student's Name: DOSHI YASH SURYAKANT Mother's Name: HARSHA Gender: Male		2016016400327271		Eligible			С	256		Yash. 5. Doshi
Student's Name: DOSHI YASH SURYAKANT Name in Vernacular Language:DOSHI YASH SURYAKANT Name in Vernacular Language:DOSHI YASH SURYAKANT Name in Vernacular Language:DOSHI YASH SURYAKANT City: CITY. Taluka: Kalyan, District Thane, State: Maharashtra, PIN: 421201 Telephone no: 2438345 Mobile no: 918082290351 Email: Yashsdoshi29@gmail.com DOB: May 29, 1999 Category: Open Physically Handicap: No DPrevious Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP1019212 (Status: Fail) Exam form appearance type: Repeater 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 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA [] Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees Mark Statement Fee Total: DD Date: Bank: DD No: MICR No: DD Date: Bank: Center Preference (Code/Name): Vernue Pr	Instru	uction Medium:	- !				Nationality:	India		
Name in Vernacular Language:DOSHI YASH SURYAKANT Address: B/304, SHIV OM SHAKTI CHG, SHIV MANDIR ROAD, RAM NAGAR, DOMBIVALI - EAST City; CITY, Taluka: Kalyan, District: Thane, State: Maharashtra, PiN: 421201 Telephone no: 2438345 Mobile no: 918082290351 Email: Yashsdoshi/29@gmail.com DOB: May 29, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sea VI (2C00146)(Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP1019212 (Status: Fail) Exam form appearance type: Repeater 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 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA [] Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees Mark Statement Fee Total: College Receipt No. and Date: DD No: MICR No: DD Date: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not examined 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 examined 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 examined in this application are true, complete and correct, my candidature is liable to be carnelled or rejected. Declaration by Principal/HOD/Chalirperson					Student's Perso	onal Informati	on			
Address: B/304 , SHIV OM SHAKTI CHG , SHIV MANDIR ROAD , RAM NAGAR , DOMBIVALI - EAST City: CITY, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201 Telephone no : 2438345 DOB: May 29, 1999 Category: Open Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP1019212 (Status: Fail) Exam Event: Mar-2019 Seat No: RDP1019212 (Status: Fail) Exam Event: Mar-2019 Seat No: RDP1019212 (Status: Fail) Exam Form appearance type: Repeater 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 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA [] Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees Micr No: DD Date: Payment Details: Amount Received: College Receipt No. and Date: DD Date: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief, I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any obtained or rejected. 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 Unifilment/recification of the information. He/she is regular student of this College and has completed the required attendance and practical course/Nerm work (if any) according to university rules. Place: Coll	Stud	ent's Name: DOSHI	YASH SURY	/AKANT			Mother's Name: HA	RSHA	(Gender: Male
City: CITY, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421201 Telephone no.: 2438345	Nam	e in Vernacular Langua	ge:DOSHI Y	ASH SURYAKANT	Γ				·	
Telephone no.: 2438345	Addr	ess: B/304 , SHIV OM S	SHAKTI CHO	G, SHIV MANDIR F	ROAD , RAM NAGAR ,	DOMBIVALI -	- EAST			
DDB: May 29, 1999	City:	CITY, Taluka: Kalyan, I	District: Thar	ne, State: Maharas	htra, PIN: 421201					
Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16)	Tele	ohone no.: 2438345		Mob	ile no: 918082290351		Email	: Yashsdoshi	i29@gm	ail.com
Exam form appearance type: Repeater 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 83007 Financial Accounting and Auditing X - Cost Accounting Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees Mark Statement Fee Total: College Receipt No. and Date: DD No: MICR No: DD Date: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not exquest for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. Declaration 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. College Staff Signature Seal and Signature of	DOB	: May 29, 1999	Cat	tegory: Open		Physically	Handicap: No			
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) Paper Code	Prev	ious Latest Examinatior	Details: Sei	m VI [2C00146](Re	egular-Rev16)	Exam Even	t: Mar-2019	Seat	No: RD	P1019212 (Status: Fail)
Paper Code Paper Name AM - AT	Exan	n form appearance type	: Repeater							
Sa007 Financial Accounting and Auditing X - Cost Accounting Th-UA []	Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Coll	ege Assessm	nent)	
Convocation Fee	SN	Paper Code			Paper Name					AM - AT
Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date:	1	83007	inancial Ac	counting and Audit	ing X - Cost Accounting			Th-UA	۹[]	
Payment Details: Do No: MICR No: Do Date: Bank:	Conv	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees
DD No: MICR No: DD Date: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. 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: College Staff Signature College Staff Signature Seal and Signature of	Mark	Statement Fee		Total:						
DD No: MICR No: DD Date: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. 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: College Staff Signature College Staff Signature Seal and Signature of	Dove	nent Deteiler	maunt Daga	ive de	Call	laga Dagaint	No. and Date:			
Center Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. 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: College Staff Signature College Staff Signature Seal and Signature of			mount Rece	1			No. and Date.	Ponk		
Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. 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. College Staff Signature College Staff Signature Seal and Signature of				IVIICK NO.		DD Date.		Dalik	•	
To, Director, Board of Examination and Evaluations / The Controller Of Examination, I request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby declare that all statement made in this application are true, complete and correct to the best of my knowledge and belief. I have gone through the syllabus and the list of books prescribed for the examination for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination etc. on religious or any other ground. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or rejected. 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. College Staff Signature College Staff Signature Seal and Signature of		,								
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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 and belief. I student's Signature Declaration by Principal/HOD/Chairperson This form work (if any) according to university rules. College Staff Signature Date: College Staff Signature Date: Date: Date: Date: Date: Date: Date: Date: Date: College Staff Signature		•				•	ed fee for the same. I	herehy	Place:	vidyavinar
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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: College Staff Signature Seal and Signature of		0,		•			11 0			
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	Decl	aration by Principal/HO	D/Chairperso	on						
Date: Course/term work (if any) according to university rules. College Staff Signature Seal and Signature of										
Place: College Staff Signature Seal and Signature of										
Date: College Staff Signature Seal and Signature of	Cour	serteriii work (ii ariy) ac	Column to un	iiversity rules.	_					
Date: College Staff Signature Seal and Signature of	Place	e:								
College Staff Signature Seal and Signature of		-								
College Staff Signature Seal and Signature of	Date	•								
Principal/HOD/Chairperson							nature of			
					_			Princi	pal/HOC	D/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

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'e-Suvidha' account on

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	PRN:	Eligibility Status:	Examination form 270611	m No.:	Division/Section:	Roll N	lo.:	PalyTL.			
2	2016016400327433	Eligible	11/10/00/01/10/10/10/10		Α	02		4			
Instru	ıction Medium:	•			Nationality:	India					
			Student's Pers	onal Informat	ion						
Stude	ent's Name: NAYAN	THARA BALAGOPAL			Mother's Name: SE	EJA	(Gender: Female			
Name	e in Vernacular Langua	ge:नयनतारा बालगोपाल									
Addre	Address: B-306, ECO HEIGHTS, CHURCH ROAD, MAROL										
City: ANDHERI EAST, Taluka: Andheri, District: Mumbai Suburban, State: Maharashtra, PIN: 400059											
Telep	hone no.:	Mol	oile no: 919892612100		Email	: nayantha	ra406@gr	mail.com			
DOB:	: Jul 09, 1998	Category: Open		Physically	Handicap: No						
Previ	ous Latest Examinatior	Details: Sem VI [2C00146](R	egular-Rev16)	Exam Ever	it: Mar-2019	Se	at No: RD	P1017176 (Status: Fail)			
Exam	n form appearance type	: Repeater									
Pape	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	83007 I	Financial Accounting and Audi	ing X - Cost Accounting	9	Th-l	Th-UA []					
2	83013 I	Business Economics VI				Th-l	Th-UA[]				
Convocation Fee Exam Form Late F			Fee	Exam Form	Super Late Fee	Ex	amination	Fees			
Mark	Statement Fee	Total:									
		mount Received:	Со		No. and Date:						
DD N		MICR No:		DD Date: Bank:							
	er Preference (Code/Na	· ·									
	e Preference (Code/Na										
	•	nation and Evaluations / The (•			Place:	Vidyavihar			
decla	re that all statement ma	ent myself for the ensuing exar ade in this application are true, ous and the list of books presc	complete and correct to	o the best of n	ny knowledge and be	lief. I	Date:				
reque	est for any special conc	ession such as change in time nat in the event of any information	or day fixed for univers	ity Examination	on etc. on religious or	any					
	elled or rejected.		3	,			St	udent's Signature			
Decla	aration by Principal/HOI	D/Chairperson									
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Place:											
Date:	ate:										



Date:

University of Mumbai, Mumbai

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Application Form for Examination of Summer Session 2021 event.

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Seal and Signature of Principal/HOD/Chairperson



Examination form No.: Eligibility Status: PRN: Division/Section: Roll No.: 270612 (Chesinger) 625 2016016400327657 F Eligible Nationality: Instruction Medium: India Student's Personal Information Student's Name: MANJREKAR NIKITA YESAJI Mother's Name: RAJSHREE Gender: Female Name in Vernacular Language:मांजरेकर निकिता येसाजी Address: 3/5, RAIGAD SOCIETY, OPP. DURGAMATA SCHOOL, KOKAN NAGAR ROAD, UTKARSH NAGAR, BHANDUP WEST. City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400078 Telephone no.: Mobile no: 919004314526 Email: raj07101973@gmail.com DOB: Nov 19, 1998 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP1019985 (Status: Fail) Exam form appearance type: Repeater Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) SN Paper Code Paper Name AM - AT 83013 Business Economics VI Th-UA[] Convocation Fee Exam Form Super Late Fee Exam Form 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, Director, Board of Examination and Evaluations / The Controller Of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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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'e-Suvidha' account on



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	PRN:	Eligibility Status:	Examination form 270613	n No.:	Division/Section:	Roll N	0.:	& in			
2	2016016400327696	Eligible			E	581		Down			
nstru	ıction Medium:	_!			Nationality:	India					
			Student's Perso	onal Informati	on						
Stude	ent's Name: TANK R	UPAL MANOJ			Mother's Name: NA	YNA		Gender: Female			
Name	e in Vernacular Langua	ge:टैंक रूपल मनोज									
Addre	ddress: B/5 PARADISE BUILDING, 1ST FLOOR ,SHANTI NAGAR ,WAGLE ESTATE, THANE(W),ROAD NO-27										
City:	ity: CITY, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604										
ГеІер	hone no.:	Mol	oile no: 918286424829		Email	: VISHAKH	A.GUNJA	AL.1@GMAIL.COM			
OOB: Oct 22, 1998 Category: Open Physically Handicap: No											
Previ	ous Latest Examination	Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Apr-2020	Sea	at No: RD	P1056320 (Status: Absent)			
Exam	n form appearance type	Repeater									
Pape	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	83001 I	Financial Accounting and Audit	ting IX - Financial Accou	unting Th-L			h-UA []				
2 83007 Financial Accounting and Auditing X - Cost Accounting							JA []				
Conv	ocation Fee	Exam Form Late	Fee	e Exam Form Super Late Fee			Examination Fees				
Mark	ark Statement Fee Total:										
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		mount Received:			No. and Date:	l _p					
DD N		MICR No:		DD Date:		Ban	K:				
	er Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·									
	e Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·) Of E	_							
		nation and Evaluations / The C			and the action and action to	l l.	Place:	Vidyavihar			
decla	re that all statement ma	ent myself for the ensuing exar ade in this application are true,	complete and correct to	the best of n	ny knowledge and bel	ief. I	Date:				
		ous and the list of books presco ession such as change in time									
other	ground. I understand the	nat in the event of any informat									
cance	elled or rejected.						5+	udent's Signature			
Decla	aration by Principal/HOI)/Chairperson						adont o dignataro			
	•	•	v me. The information of	rinted in the fo	orm is correct to the b	est of my k	nowledge	Lalso undertake the			
espo	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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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 270614	ı No.:	Division/Section:	Roll No.	.:	Joan.			
:	2016016400327874	Eligible		ı	D	465		AT//			
Instru	uction Medium:	•			Nationality:	India					
		_	Student's Perso	onal Informati	on						
Stude	ent's Name: RAO AK	SHITA HRIDAYSHANKAR			Mother's Name: PU	SHPA	C	Gender: Female			
Nam	e in Vernacular Languag	e:अक्षिता राव									
Addr	Address: A WING 304 SURAJ ENCLAVE PLOT NO 17D/3 SEC-20 AIROLI NAVI MUMBAI										
City:	City: AIROLI, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400708										
Teler	phone no.:	Mol	bile no: 919987053874		Email	: akkirao.aws	sum@gr	mail.com			
DOB	: Sep 25, 1998	Category: Open		Physically	Handicap: No						
Previ	ious Latest Examination	Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Mar-2019	Seat	No: RD	P1020525 (Status: Fail)			
Exan	n form appearance type:	Repeater									
Pape	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN Paper Code			Paper Name	Paper Name				AM - AT			
1	83001 F	inancial Accounting and Audit	ting IX - Financial Accour	IX - Financial Accounting							
Convocation Fee Exam Form Late F			Fee	Exam Form	Super Late Fee	Exar	mination	Fees			
Mark	Statement Fee	Total:									
		mount Received:	' I		No. and Date:	lp I					
DD N		MICR No:		DD Date:		Bank	:				
	er Preference (Code/Nar										
	ue Preference (Code/Nar	•									
		nation and Evaluations / The C					Place:	Vidyavihar			
		nt myself for the ensuing exar de in this application are true,					Date:				
have	gone through the syllab	us and the list of books prescr	ribed for the examination	n for which I a	m appearing. I shall i	not	├ ──				
		ession such as change in time at in the event of any informat									
	elled or rejected.	at ill tile event of any miorinal	ion being tourid raise or i	IIICOITECL, IIIy	Calluluature is habic	IO De	1				
	•						Stu	udent's Signature			
	aration by Principal/HOD	•									
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place	ə: 										
Date:	ć										



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form No.: 270615	Division/Section:	Roll No.:	0.					
2	2016016400384912	Eligible		F	687	Htel.					
nstru	uction Medium:			Nationality:	India	•					
			Student's Personal Informa	ation							
Stude	ent's Name: SHAH H	IARITA VANDANA		Mother's Name: VA	ANDANA	Gender: Female					
lame	ame in Vernacular Language:शह हरित वन्दना										
ddre	ddress: D-14/103 CHITTRANJAN NAGAR RAJAWADI ROAD VIDYAVIHAR EAST										
City:	MUMBAI, Taluka: Mumb	bai, District: Mumbai City, State	e: Maharashtra, PIN: 400077								
elep	elephone no.: Mobile no: 918424871771 Email : haritashah1002@gmail.com										
ОВ	: Feb 10, 1998	Category: Open	Physica!	lly Handicap: No							
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0415761 (Status: A											
xan	n form appearance type:	Repeater									
ape	aper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN	Paper Code		Paper Name		AM - AT						
1	83001 F	inancial Accounting and Audit	ing IX - Financial Accounting		Th-UA	A[]					
Conv	ocation Fee	Exam Form Late	Fee Exam Forr	n Super Late Fee	Exam	nination Fees					
/lark	ark Statement Fee Total:										
		mount Received:		ot No. and Date:							
DD N		MICR No:	DD Date:		Bank:						
	er Preference (Code/Nar	· · · · · · · · · · · · · · · · · · ·									
	e Preference (Code/Nar	· ·									
		nation and Evaluations / The C				Place: Vidyavihar					
			nination. I have remitted the prescri complete and correct to the best of			Date:					
ave	gone through the syllabi	ous and the list of books prescri	ibed for the examination for which I	l am appearing. I shall	not						
			or day fixed for university Examinat ion being found false or incorrect, n								
	elled or rejected.	at III the event of any informati	off being found false of incorrect, in	ly Candidature is ildolo	, to be						
						Student's Signature					
	aration by Principal/HOD	-									
			y me. The information printed in the e/she is regular student of this Colle								
	,	cording to university rules.	3/SHE is regular student of this com	ege and has completed	u the required	diteriuance and practical					
Place	ace:										
ate:											



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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PRN:		Eligi	bility Status:	Examination form 270616	n No.:	Division/Section:	Roll N	o.:	ND.		
:	201601640038	35103		Eligible		III	F	681		Mark.	
Instru	uction Medium	:	•				Nationality:	India	-		
					Student's Person	onal Informat	ion				
Stud	ent's Name:	SHETH	PARTH SAN	JAY			Mother's Name: S	EEMA	G	Gender: Male	
Nam	e in Vernacula	r Langua	ige:Sheth par	th sanjay			•				
Addr	ess: BLDG NC	311/701	1 PANT NAG	AR GHATKOPAR	(EAST) MUMBAI 4000	75					
City:	GHATKOPAR	, Taluka:	Kurla, Distric	t: Mumbai Suburb	an, State: Maharashtra	, PIN: 40007	5				
Telep	ohone no.:			Mob	ile no: 919930346250		Ema	il : Parthshetl	n2311@gi	mail.com	
DOB	: Sep 22, 1998	3	Cat	egory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Apr-2019 Seat No: 0415862 (Status: ATK								5862 (Status: ATKT)			
Exan	n form appeara	ance type	e: Repeater								
Pape	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 83001 Financial Accounting and Auditing IX - Financial Acc					ing IX - Financial Accoι	unting Th-UA				UA[]	
Convocation Fee Exam Form Late F			Fee	ee Exam Form Super Late Fee		Exa	Examination Fees				
Mark Statement Fee Total:											
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	nent Details:	A	mount Recei		Col		No. and Date:				
DD N		<u> </u>	```	MICR No:		DD Date: Bank			K:		
	er Preference	`									
	e Preference	`							_		
					controller Of Examinatio		16 6 11		Place:	Vidyavihar	
decla	are that all stat	ement m	ade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of r	ny knowledge and b	elief. I	Date:		
					ibed for the examination or day fixed for universi						
other	ground. I und	erstand t			on being found false or						
canc	elled or rejecte	ed.							Stu	ıdent's Signature	
Decla	aration by Prin	cipal/HO	D/Chairperso	n							
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place	ə:										
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Seal and Signature of Principal/HOD/Chairperson



Examination form No.: Eligibility Status: PRN: Division/Section: Roll No.: 270617 2016016400385277 D 446 Eligible Instruction Medium: Nationality: India Student's Personal Information Student's Name: **PAWAR RUTUJA VISHWAS** Mother's Name: VISHAKHA Gender: Female Name in Vernacular Language:पवार ऋतुजा विश्वास Address: ROOM NO 6, CHAWL NO 1, SHIVAJI COLONY, KOLSHEWADI, KALYAN EAST City: KALYAN, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421306 Telephone no.: Mobile no: 918655351731 Email: rutujapawar.rp111@gmail.com DOB: Dec 08, 1998 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP1020401 (Status: Fail) Exam form appearance type: Repeater Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) SN Paper Code Paper Name AM - AT 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA[] Convocation Fee Exam Form Super Late Fee Exam Form 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, Director, Board of Examination and Evaluations / The Controller Of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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)

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 270618	m No.:	Division/Section:	Roll No	lo.:	Ahtmel	
2	2016016400385544		Eligible			F	674	,	Committee of the second	
nstru	uction Medium:	-	-			Nationality:	India	-		
				Student's Pers	sonal Informati	on				
Stude	ent's Name: KHETN	MAL AKSHAY	PRAKASH			Mother's Name: JY	OTI	(Gender: Male	
Name	e in Vernacular Langua	age:अक्षय प्रक	ाश खेतमाळ							
Addre	ress: 22/B/006 VANDE	MATARAM C	C.H.S, MHADA CO	LONY, CHANDIVALI.						
City:	MUMBAI, Taluka: Kur	la, District: Mı	umbai Suburban, S	tate: Maharashtra, PIN	N: 400072					
Telep	phone no.:		Mob	oile no: 918692946529		Emai	i : akshaykh	etmal242	@gmail.com	
DOB:	3: Jan 23, 1999	Cat	tegory: Reserved (SBC)	Physically	Handicap: No				
Previ	ious Latest Examinatio	on Details: Ser	m VI [2C00146](Re	gular-Rev16)	Exam Even	it: Mar-2019	Sea	at No: RD	DP1021646 (Status: Fail)	
xam form appearance type: Repeater										
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (UA	A - University A	Assessment,CA - Col	lege Assess	ment)		
SN Paper Code Paper				Paper Name	;				AM - AT	
1 83014 Commerce VI Th							Th-l	h-UA []		
Conv	vocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exa	amination	ı Fees	
Mark	Statement Fee		Total:		T					
		Amount Recei			ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Ban	ık:		
	ter Preference (Code/N	,								
	ue Preference (Code/N									
	Director, Board of Exan				•			Place:	Vidyavihar	
decla	uest permission to pres 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:		
	e gone through the syllatest for any special con-									
other	r ground. I understand									
cance	elled or rejected.							St	tudent's Signature	
Decla	aration by Principal/HC	OD/Chairperso	on							
	form is carefully scruting	=		y me. The information	printed in the f	orm is correct to the	best of my k	.nowledge	e. I also undertake the	
respo	onsibility of fulfillment/r se/term work (if any) a	rectification of	f the information. He							
Place	e:									
Date:	:									
				College S					and Signature of ipal/HOD/Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 109658		Division/Section:	Roll No) .:	~ so/-	
:	2016016400385881		Eligible					ļ	Con	
nstrı	uction Medium:			1		Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: PANCH	HAL DHAVAN	NIBEN JAGDISH			Mother's Name: JY	OSTNABEN		Gender: Female	
Nam	e in Vernacular Langua	age:पांचाळ धां	वणिबेन जगदीश							
Addr	ess: 14/428, TAGORE	NAGAR, VIK	ROLI EAST							
<u> </u>	MUMBAI, Taluka: Kurl	la, District: Μι								
	ohone no.:			oile no: 91771807767			il : panchaldhy	wani896	@gmail.com	
	: Aug 06, 1998		tegory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem II(Regular-Rev16) Exam Event: Nov-2019 S									90066 (Status: Pass)	
	kam 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 - Co	llege Assessr	nent)		
SN	Paper Code	<u> </u>		Paper Nam					AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Acc	counting		Th-U			
2	83007	Financial Acc	Th-U	A[]						
3	83013	Business Eco	onomics VI				Th-U	A[]		
4	83014	Commerce V	/I				Th-U	A[]		
5	83015	Direct and In-	ndirect Taxation Pa	per II			Th-C	A[]		
6	83023	Investment A	Inalysis and Portfo	lio Management Pap	er II		Th-C/	A[]		
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:				
DD N			MICR No:		DD Date: Ba					
	er Preference (Code/N		INITOTATIO.		DD Date.					
	ie Preference (Code/Na									
	Director, Board of Exam	,	 Evaluations / The C	Controller Of Examina	 ation.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	l lacc.	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	ground. I understand t									
canc	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	DD/Chairperso	 on							
This respo	form is carefully scrutir onsibility of fulfillment/re se/term work (if any) ac	nized by the Crectification of	College staff and by f the information. H							
Place) :									
Date:	•						ĺ			
Duic				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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		$\overline{}$	$\overline{}$				_				
	PRN:	Eligit	bility Status:	Examination form 270619	n No.:	Division/Section:	Roll N	No.:	Reshma		
2016	6016400407816		Eligible		l III	С	273	3	Tiesta		
nstruction	n Medium:		-			Nationality:	India	-			
				Student's Perso	onal Informati	on					
Student's	Name: GHANC	CHI RESHMA	JUMMA			Mother's Name: SA	AKINA	(Gender: Female		
Name in \	lame in Vernacular Language:घांची रेश्मा जुम्मा										
Address:	NEW MADNI STO	RE NEAR AN	JUMAN SHAIDA-	E- MUSTAFA MADRAS	SA, ROOM N	O. 174 LIYAKAT AL	CHAWL,	AZAD NAC	GAR,GHATKOPAR WEST		
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400086											
Telephon	e no.:		Mob	ile no: 919821085163		Ema	l : reshmap	armar1001	l@gmail.com		
DOB: Mai	r 26, 1998	Cat	tegory: Open		Physically	Handicap: No					
Previous	Latest Examination	n Details: Sen	n VI [2C00146](Re	gular-Rev16)	Exam Even	t: Mar-2019	Se	eat No: RD	P1019310 (Status: Fail)		
Exam form appearance type: Repeater											
Paper De	tails: Plea	se select Par	per details which y	ou want to appear (UA	- University A	ssessment,CA - Co	llege Asses	sment)			
SN Paper Code Paper								AM - AT			
1	83013 E	Business Eco	onomics VI				Th-	Γh-UA []			
Convocat	ion Fee		Exam Form Late F	Fee	Exam Form	Super Late Fee	Ex	camination	Fees		
Mark Stat	tement Fee		Total:								
Payment	Details: A	Amount Receiv				No. and Date:					
DD No:	(O - 1- /N)		MICR No:		DD Date:		Bai	nk:			
	reference (Code/Na										
	eference (Code/Na	,	'arabiana / The C					I			
-	•			controller Of Examination	•	- 1 fara faratha aoma	L la auralas e	Place:	Vidyavihar		
declare th	nat all statement ma	ade in this ap	pplication are true, o	nination. I have remitted complete and correct to ibed for the examination	the best of m	ny knowledge and be	elief. I	Date:			
-	,		•	or day fixed for universit		11 0					
other grou	und. Í understand th			ion being found false or							
cancellea	or rejected.							Sti	udent's Signature		
Declaration	on by Principal/HOI	D/Chairperso						•	Ŭ .		
This form	is carefully scrutin	ized by the C	college staff and by	me. The information pr	rinted in the fo	orm is correct to the	best of my l	knowledge	. I also undertake the		
responsib		ectification of	the information. He	e/she is regular student							
Place:											
Date:				College St:	aff Signature]	Sea	el and Sign	nature of		
College Staff Signature Seal and Sig Principal/HO									D/Chairperson		



Date:

PRN:

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 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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

Eligibility Status:

'e-Suvidha' account on

Roll No.:

Seal and Signature of Principal/HOD/Chairperson

Division/Section:



270620 2016016400407921 Eligible В 134 Instruction Medium: Nationality: India Student's Personal Information Student's Name: KARWAT BHAVIK DEEPAK Mother's Name: DIMPLE Gender: Male Name in Vernacular Language:करवत भाविक दिपक Address: 17/18 , LAXMI BHUVAN , OGHADBHAI LANE , M.G.ROAD , GHATKOPAR(E) MUMBAI-400077 City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400077 Mobile no: 919987847041 Telephone no.: Email: karwatbhavik@gmail.com DOB: Jun 11, 1998 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Seat No: RDP1016771 (Status: Fail) Exam Event: Mar-2019 Exam form appearance type: Repeater Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) Paper Details: Paper Name AM - AT SN Paper Code 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA[] 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 Date: DD No: MICR No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, Director, Board of Examination and Evaluations / 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)

Application Form for Examination of Summer Session 2021 event.

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	PRN:	Eligi	bility Status:	Examination form 270621	n No.:	Division/Section:	Roll No	0.:	0 60		
2	016016400407967		Eligible			D	436		Pac		
Instru	ction Medium:	<u> </u>				Nationality:	India				
				Student's Person	onal Informati	ion					
Stude	nt's Name: PATEI	. BHAGYASH	IREE RAJESH			Mother's Name: KA	ALPANA	(Gender: Female		
Name in Vernacular Language:पटेल भाग्यश्री राजेश											
Address: B12, ABHINAV KUTTIR, HANS NAGAR, KHOPAT, THANE WEST											
City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400601											
Telephone no.: Mobile no: 918424961883 Email : bhagyashreepatel191@gmail.com											
DOB: Nov 04, 1997 Category: Open Physically Handicap: No											
Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Mar-2019 Seat No: RDP1020321 (Status: Fail)											
Exam	form appearance typ	e: Repeater									
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	83001	Financial Ac	counting and Audit	ing IX - Financial Accou	unting Th-U				·UA []		
Convocation Fee Exam Form Late Fee					Exam Form	m Form Super Late Fee Exa			Fees		
Mark :	Statement Fee		Total:								
Payment Details: Amount Received: College Receipt No. and Date:											
DD No		AIIIOUIII NECE	MICR No:	Col	DD Date:	No. and Date.	Ban	<u>. </u>			
	r Preference (Code/N	lame).	INICIA NO.		DD Date.		Dan	к.			
	Preference (Code/N										
	•			controller Of Examinatio	n.			Place:	Vidvovibor		
				nination. I have remitted		ed fee for the same.	l hereby	Place.	Vidyavihar		
declar	e that all statement n	nade in this ap	oplication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:			
•	,		•	ibed for the examinatior or day fixed for universi							
other (ground. Í understand			ion being found false or							
cance	lled or rejected.							St	udent's Signature		
Decla	ration by Principal/H0	D/Chairperso	on .						- 3		
		=		me. The information p	rinted in the f	orm is correct to the	best of my kr	nowledge	. I also undertake the		
				e/she is regular student	of this Colle	ge and has complete	d the require	d attenda	ance and practical		
course/term work (if any) according to university rules.											
Place:	Diago:										
i iace.											
Date:											
Date.				College St	aff Signature		Seal	and Sign	nature of		
College Staff Signature Seal and Signature of Principal/HOD/Chairpe											



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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on

Principal/HOD/Chairperson



PRN:	Eligibility Status:	Examination form 270622	n No.:	Division/Section:	Roll No.	.:	Knudy	
2016016400430096	Eligible		III I	E	589		Loca N	
Instruction Medium:				Nationality:	India		,	
		Student's Perso	onal Informati	on				
Student's Name: THAKKA	AR KUNAL KAMLESH			Mother's Name: Ch	IETNA	C	Gender: Male	
Name in Vernacular Languag	Je:ठक्कर कुणाल कमलेश							
Address: 703/C,SHREE OM	SRISHTRI,DIN DAYAL UPAD	HAY MARG, MULUND	- WEST					
City: MULUND, Taluka: Mum	nbai, District: Mumbai City, Sta	ate: Maharashtra, PIN: 40	00080					
Telephone no.:	Mo	bile no: 919833329822		Email	l : ktthakkar70)337@gr	mail.com	
DOB: Feb 26, 1999	Category: Open		Physically	Handicap: No				
Previous Latest Examination	t: Mar-2019	Seat	No: RD	P1021154 (Status: Fail)				
Exam form appearance type:	: Repeater							
Paper Details: Pleas	se select Paper details which y	you want to appear (UA	- University A	ssessment,CA - Col	lege Assessm	nent)		
SN Paper Code		Paper Name					AM - AT	
1 83016 E	·					Th-CA[]		
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees	
Mark Statement Fee	Total:							
5."								
.,	mount Received:		lege Receipt I	No. and Date:				
DD No:	MICR No:		DD Date:		Bank:	<u>:</u>		
Center Preference (Code/Nar								
Venue Preference (Code/Nar	<u> </u>							
	ination and Evaluations / The (Place:	Vidyavihar	
	ent myself for the ensuing exar ade in this application are true,					Date:		
have gone through the syllab	ous and the list of books presc	ribed for the examination	n for which I a	m appearing. I shall	not	<u> </u>		
	ession such as change in time hat in the event of any informa							
cancelled or rejected.	at III tile event of any imorna	ion being lound raise of	IIICon ect, my	Calluluature is liable	io pe	1		
·						Stı	udent's Signature	
Declaration by Principal/HOD	-							
	ized by the College staff and b							
responsibility of fulfillment/red course/term work (if any) acc	ectification of the information. F cording to university rules.	le/Sfie is regular student	: 0) triis con c y	je anu nas complete	J the required	allenua	эпсе апи ргасиса:	
Place:								
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]



	PRN:	Eligi	bility Status:	Examination form 270623	1 No.:	Division/Section:	Roll No).:	Aboth	
2	2016016400430115		Eligible			Α	52		1	
Instru	ction Medium:		•			Nationality:	India			
				Student's Person	onal Informati	on				
Stude	ent's Name: SHETH	I MANALI TA	PAN			Mother's Name: SM	IITA	Ge	ender: Female	
Name	e in Vernacular Langua	age:SHETH N	IANALI TAPAN					·		
				OYA MARG,TILAK ROA		PAR (EAST),RAJAW	ADI,MUMBAI	I,MAHARA	SHTRA-400077	
City: I	MUMBAI, Taluka: Kurl	a, District: Μι	ımbai Suburban, S	tate: Maharashtra, PIN	400077					
Telep	hone no.: 21024360		Mob	ile no: 919167176082			: manalishet	h.1610@g	mail.com	
DOB:	Oct 16, 1998	Cat	egory: Open	Physically	Handicap: No					
Previ	ous Latest Examinatio	n Details: Sei	m VI [2C00146](Re	gular-Rev16)	Exam Even	t: Mar-2019	Seat	t No: RDP	1018539 (Status: Fail)	
Exam	Exam form appearance type: Repeater									
Pape		se select Pa	per details which yo	ou want to appear (UA	- University A	Assessment,CA - Col	ege Assessn	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83013	Business Ec	1		Т		Th-U	A []		
Conv	ocation Fee		Exam Form Late I	-ee	Exam Form	Super Late Fee	Exar	mination F	ees	
Mark Statement Fee Total:										
Pavm	nent Details:	Amount Rece	ived:	Col	leae Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank			
Cente	er Preference (Code/N	ame):	<u> </u>							
	e Preference (Code/Na									
To, D	irector, Board of Exam	nination and E	valuations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
decla	re that all statement m	ade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and be	lief. I	Date:		
				bed for the examination or day fixed for universi						
other	ground. I understand t			on being found false or						
cance	elled or rejected.							Stud	lent's Signature	
Decla	ration by Principal/HO	D/Chairperso	on .						·	
respo		ectification of	the information. He	r me. The information p e/she is regular student						
Place	ı:									
Date:				College St	aff Signature			and Signatipal/HOD/0	ture of Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



		Examination form	n No ·			T			
PRN:	Eligibility Status:	270624		Division/Section:	Roll No	·.:	Lamble		
2016016400430564	Eligible			D	339				
Instruction Medium:				Nationality:	India				
		Student's Perso	onal Informati	on					
Student's Name: KAMBLE	PRATHMESH MANOHAR			Mother's Name: SU	JPRIYA	G	Gender: Male		
Name in Vernacular Language	::कांबळे प्रथमेश मनोहर								
Address: ALFRED D'MELLO H	HOUSE, ROOM NO. 2, KIRO	L VILLAGE, VIDYAVIHA	AR WEST, M	UMBAI					
City: MUMBAI, Taluka: Kurla, [District: Mumbai Suburban, S	tate: Maharashtra, PIN:	: 400086						
Telephone no.:	Mob	ile no: 919987624606		Email	l:				
DOB: Aug 18, 1997	Category: Reserved (SC)	Physically	Handicap: No					
Previous Latest Examination D	Details: Sem VI [2C00146](Re	gular-Rev16)	Exam Even	t: Mar-2019	Seat	t No: RDI	P1019668 (Status: Fail)		
Exam form appearance type: Repeater									
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 83001 Fin	nancial Accounting and Audit	ing IX - Financial Accou	ınting		Th-U	A []			
2 83007 Fin	nancial Accounting and Audit	ing X - Cost Accounting			Th-U	A []			
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark Statement Fee	Total:								
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· ·	ount Received:		lege Receipt	No. and Date:	lpi				
DD No:	MICR No:		DD Date:		Bank				
Center Preference (Code/Name Venue Preference (Code/Name	· · · · · · · · · · · · · · · · · · ·								
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To, Director, Board of Examina			•	ad foo for the same	horoby	Place:	Vidyavihar		
I request permission to present declare that all statement made						Date:			
have gone through the syllabus									
request for any special concess other ground. I understand that									
cancelled or rejected.	, , , , , , , , , , , , , , , , , , , ,	J	,						
D l	011					Stu	ident's Signature		
Declaration by Principal/HOD/0	•	The later well and	2.1. d2. d 6				Laborated and a decision		
This form is carefully scrutinize responsibility of fulfillment/recti									
course/term work (if any) accor				,			F		
		<u> </u>							
Place:									
		_							
Date:									
		College Sta	aff Signature			and Sign inal/HOD	ature of //Chairperson		



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			Examination for 270625	m No.:	Division/Section:	Roll No).:	Okhochare		
:	2016016400430742		Eligible		IIII	D	361		01	
nstrı	uction Medium:	•				Nationality:	India			
				Student's Pers	sonal Informati	on				
Stud	ent's Name: KHOCH	IARE ONKA	R BHALCHANDRA	1		Mother's Name: Bl	HARTHI	(Gender: Male	
lam	e in Vernacular Langua	ge:खोचरे ओं	भार भालचंद्र							
۸ddr	ess: ROOM NO. 9, SM	TA NIWAS,	GURAV COMPUN	D, UTKARSHA NAGA	R, BHANDUP	WEST				
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN	N: 400078					
elep	ohone no.:		Mob	ile no: 919664385369		Emai	l : pradnya.kh	ochare3	@gmail.com	
ОВ	: Aug 26, 1998	Cat	tegory: Reserved (OBC)	Physically	Handicap: No				
revi	ous Latest Examination	n Details: Sei	m VI [2C00146](Re	gular-Rev16)	Exam Even	t: Mar-2019	Sea	t No: RD	P1019853 (Status: Absent)	
xan	n form appearance type	: Repeater								
ape	r Details: Plea	se 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	}				AM - AT	
1	83001	Financial Ac	counting and Audit	ing IX - Financial Acco	unting		Th-U	A []		
2	83007	Financial Aco	counting and Audit	ing X - Cost Accountin	g X - Cost Accounting			A []		
3	83013	Business Ec	onomics VI				Th-U	A []		
4 83014 Commerce VI							Th-U	Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA [A []		
6 83016 Export Marketing Paper II Th-CA []										
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
/lark	Statement Fee		Total:							
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		mount Rece	1		Illege Receipt	No. and Date:	David			
N DC		\	MICR No:		DD Date:		Bank	ι.		
	er Preference (Code/Na									
	e Preference (Code/Na		Trakrations / The C	entreller Of Eventineti				Τ		
	Director, Board of Exam					ad foo for the same	l harabı	Place:	Vidyavihar	
lecla	uest permission to presure that all statement m	ade in this ap	oplication are true,	complete and correct t	o the best of n	ny knowledge and be	elief. I	Date:		
	gone through the syllal est for any special cond									
ther	ground. I understand t									
anc	elled or rejected.							St	udent's Signature	
Declaration by Principal/HOD/Chairperson										
This	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									
	se/term work (if any) ac			o, one is regular studel	it of this cone(go ana nas complete	a ale required	a autoriud	anoo ana practical	
Place	e:									
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ate										
			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)

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligil	bility Status:	Examination form 109659	ı No.:	Division/Section:	Roll No	D.:	Should	
:	2016016400505826		Eligible		II				al red	
Instru	uction Medium:					Nationality:	India			
				Student's Perso	nal Informati	on				
Stud	ent's Name: SHAH I	HARSH JAYE	ESH			Mother's Name: Cl	HAYA	C	Gender: Male	
Nam	e in Vernacular Langua	age:शाह हर्ष	जयेश							
Addr	ess: B-11 , 104 , 1ST F	LOOR , VEE	NA SADAN SOCIE	ETY , VEENA NAGAR ,	MULUND WE	EST , L B S MARG ,	NEAR BANK	OF BAF	RODA , MUMBAI	
City:	MUMBAI, Taluka: Mun	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN: 40	0800					
Tele	phone no.: 9619985448	8	Mob	ile no: 919619985448		Emai	I : SHAHJAYI	ESH004	@GMAIL.COM	
DOB	: Dec 18, 1997	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Ser	n II(Regular-Rev1	6)	Exam Even	it: Nov-2019	Sea	t No: 719	90013 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Рарє	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 83001 Financial Accounting and Auditing IX - Financial Accounting						Th-U	A[]			
2 83007 Financial Accounting and Auditing X - Cost Accounting						Th-U	A[]			
3	83013	Business Eco	onomics VI				Th-U	A[]		
4	83014	Commerce V	Ί				Th-U	A[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []									
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
		A D		0.11	D	No. and Date				
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	er Preference (Code/N									
	ue Preference (Code/Na		· · · · · · · · · · · · · · · · · · ·	Servening the	_			1		
				Controller Of Examination		- 1 fa a familia a como	ووامسوان	Place:	Vidyavihar	
decla	are that all statement m	nade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of m	ny knowledge and be	elief. I	Date:		
				ibed for the examination or day fixed for universit				\vdash		
other	r ground. I understand t			ion being found false or						
	elled or rejected.		•	-				Sti	udent's Signature	
Deck	aration by Principal/HO)D/Chairperso	nn						duonito olgilataro	
This respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	e:						 			
Date	Oate: 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 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]



PRN:	Eligibility Status:	Examination form 270626	No.: Division/Sec	tion: Ro	II No.:	Quidelian	
2016016401501732	Eligible		F		692	XXX.	
Instruction Medium:	•		Nationality:	India		•	
	_	Student's Perso	nal Information				
Student's Name: KHEDEK	AR POONAM ASHOK		Mother's Na	ame: VANDANA	1	Gender: Female	
Name in Vernacular Languag	e:खेडेकर पूनम अशोक						
Address: ROOM NO. 16, CHA	AWL NO. 382, PAUL PEREIR	A CHAWL, HALL VILLA	GE, BHARAT NAGAR				
City: KURLA WEST, Taluka: I	Kurla, District: Mumbai Subur	oan, State: Maharashtra,	PIN: 400070				
Telephone no.:	Mot	oile no: 919819769818		Email : POON	IAMKHEDE	KAR26@GMAIL.COM	
DOB: Jul 30, 1996	Category: Open		Physically Handicap: N	0			
Previous Latest Examination I	Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Event: Mar-2019		Seat No: R	DP1021645 (Status: Fail)	
Exam form appearance type:	Repeater						
Paper Details: Please	e select Paper details which y	ou want to appear (UA -	University Assessment,C	CA - College Ass	sessment)		
SN Paper Code		AM - AT					
1 83007 Fi		Γh-UA []					
Convocation Fee	ee	Examination Fees					
Mark Statement Fee	Total:						
Doymont Dotoiles	nount Received:	Call	age Possint No. and Date				
Payment Details: Am DD No:	MICR No:		ege Receipt No. and Date DD Date:		Ponk:		
Center Preference (Code/Nan			DD Date.		Bank:		
Venue Preference (Code/Nan	·						
To, Director, Board of Examin		Controller Of Evamination			I _{DI}	\(\frac{1}{2} \cdot \cdot \cdot \frac{1}{2} \cdot \cd	
I request permission to preser				same I hereby	Place	: Vidyavihar	
declare that all statement mad	de in this application are true,	complete and correct to	the best of my knowledge	and belief. I	Date:		
have gone through the syllaburequest for any special concest							
other ground. I understand that							
cancelled or rejected.	•		-			Student's Signature	
Declaration by Principal/HOD	/Chairnerson					Judonia Olynature	
This form is carefully scrutiniz	•	v me. The information or	nted in the form is correct	to the best of m	v knowledc	ae I also undertake the	
responsibility of fulfillment/rec							
course/term work (if any) acco	ording to university rules.						
Place:							
_							
Date:		College Sta	ff Signatura		Soal and Ci-	anaturo of	
		College Sta	ıı olynatul e		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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligik	bility Status:	Examination forn 270627		Division/Section:	Roll No	0.:	Tenish
	2016016401826404		Eligible			С	227		Jene
Instru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: CHAVI	DA JENISH KA	ALPESHBHAI			Mother's Name: Ma	ANISHABEN	ı	Gender: Male
Name	e in Vernacular Langua	age:JENISH							
Addre	ess: 170/4755 NAYDU	COLONY, PA	ANTNAGAR						
City:	GHATKOPAR, Taluka	: Mumbai, Dis	trict: Mumbai City	, State: Maharashtra, Pl	IN: 400075				
Telep	ohone no.:		Mob	pile no: 917666387744		Emai	I : JENISHCI	HAVDA22	212@GMAIL.COM
DOB	: Dec 22, 1998	Cate	egory: Open		Physically	Handicap: No			
Previ	ious Latest Examinatio	n Details: Sen	n VI [2C00146](Re	egular-Rev16)	Exam Even	t: Apr-2020	Sea	at No: RD	P1016504 (Status: Absent)
Exan	n form appearance typ	e: Repeater				<u> </u>			
Pape	er Details: Plea	ase select Pap	oer details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assess	ment)	
SN Paper Code Paper Name								AM - AT	
1 83013 Business Economics VI T						Th-L	Th-UA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	Examination Fees	
Mark	Statement Fee		Total:						
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	ie Preference (Code/N							_	
	·			Controller Of Examinatio	•			Place:	Vidyavihar
decla	are that all statement m	nade in this ap	plication 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:	
reque	est for any special con	cession such a	as change in time	or day fixed for universi	ity Examination	on etc. on religious o	any		
	ground. I understand elled or rejected.	that in the eve	nt of any informati	ion being found false or	incorrect, my	candidature is liable	e to be		
cario	siled of rejected.							Sti	udent's Signature
Decla	aration by Principal/HC	D/Chairperso	'n						
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place									
				_					
Date: College Staff Signature Seal and Signature Principal/HOD/Cha									



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 10966		Division/Section:	Roll No	5 .:	SAHANI SANDHYA	
:	2016016401890005		Eligible						SALIANT SALIDITIA	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: SAHAF	HNI SANDHY	A ISHWAR			Mother's Name: SA	AROJ		Gender: Female	
Nam	e in Vernacular Langua	age:साहनी संध	्या ईश्वर							
Addr	ess: JINDAL COLONY	NO 2 SANG	AM BUILDING RO	OM NO D49 VASINI	D					
	MUMBAI, Taluka: Mur	mbai, District:								
	phone no.: 696282			oile no: 91072761832			I : SAHANISA	ANDHYA	438@GMAIL.COM	
	: Jun 17, 1998		tegory: Open			Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	ıt No: 727	73910 (Status: Pass)	
Exam form appearance type: Fresher										
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN Paper Code Paper Name								AM - AT		
1	83001			ting IX - Financial Acc			Th-U			
2	83007			ting X - Cost Account	ting		Th-U			
3	83013	Business Eco						Th-UA[]		
4 83014 Commerce VI								Th-UA[]		
5	83015		ndirect Taxation Pa	-			Th-C			
6		Purchasing a	and Store keeping I	-			Th-C		_	
	vocation Fee		Exam Form Late	<u>Fee</u>	Exam Form	Super Late Fee	Exa	amination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ived:	(College Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	k:		
Cent	er Preference (Code/N	lame):					•			
Venu	ue Preference (Code/N	lame):								
To, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres							Date:		
	are that all statement mage gone through the sylla							Date.		
	est for any special cond									
otner canc	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found faise	or incorrect, my	candidature is liable	e to be			
								St	udent's Signature	
	aration by Principal/HC	-								
respo	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	rectification of	f the information. H							
Place) :					!				
				-		!				
Date	:			0.11	0: "0:	ļ	01	1.0		
				College	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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN:	Eligibility Status:	270628	INO	Division/Section:	Roll No).:	l ska
2016016401974197	Eligible			F	655		Your
Instruction Medium:				Nationality:	India		
	_	Student's Persor	nal Information	on			
Student's Name: SHIBE K	RUTIKA BALKRISHNA			Mother's Name: KA	ALPANA	G	ender: Female
Name in Vernacular Languag	e:शिबे कृतिका बाळकृष्ण						
Address: OPP. SARGAM APA	ART. NITYANAND BAUG ROA	AD, MANGAL CHS, RAN	л TEKDI, CH	EMBUR COLONY			
City: MUMBAI, Taluka: Mumb	oai, District: Mumbai City, State	e: Maharashtra, PIN: 400	0074				
Telephone no.:	Mob	ile no: 917506095301		Email	: SHIBEKRU	JTIKA@G	GMAIL.COM
DOB: Jul 27, 1998	Category: Open		Physically	Handicap: No			
Previous Latest Examination	Details: Sem VI [2C00146](Re	gular-Rev16)	Exam Event	:: Mar-2019	Sea	t No: RDF	P1021672 (Status: Fail)
Exam form appearance type:	Repeater						
Paper Details: Pleas	e 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 83013 B	usiness Economics VI		Th-L			-UA []	
Convocation Fee	Exam Form Late	Fee [ee Exam Form Super Late Fee			Examination Fees	
Mark Statement Fee	Total:						
		1					
	nount Received:	· -		No. and Date:	1		
DD No:	MICR No:		DD Date:		Bank	<u>:</u>	
Center Preference (Code/Nar	•						
Venue Preference (Code/Nar							T
· ·	nation and Evaluations / The C		-			Place:	Vidyavihar
	nt myself for the ensuing exam de in this application are true,					Date:	
have gone through the syllab	us and the list of books prescri	bed for the examination	for which I as	m appearing. I shall	not		
	ssion such as change in time of any informati						
cancelled or rejected.	at in the event of any informati	on being lound laise of it	ilcorrect, my	candidature is nable	i lo be		
·						Stu	ident's Signature
Declaration by Principal/HOD	•						
	zed by the College staff and by stification of the information. He ording to university rules.						
Place:							
Date:							



PRN:

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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Seal and Signature of Principal/HOD/Chairperson

	2017016400125592		Eligible		I					
nstr	uction Medium:	•				Nationality:	India			
				Student's Person	nal Informati	on				
Stud	ent's Name: SAHU I	DEEPAK RA.	JENDRAPRASAD			Mother's Name	e: MINATEE		Ge	ender: Male
Nam	e in Vernacular Langua	ıge:साह् दीपक	राजेंद्रप्रसाद			•			•	
Addr	ess: ROOM NO-21, ZA	ITUNBAI CH	IAWL-25/Z,L.B.S. I	MARG, NEAR HUNUMA	N MANDIR,	NAUPADA,KUF	RLA (WEST)	,MUMB,	AI-4000)70.
City:	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN:	400070					
Tele	phone no.:		Mob	ile no: 918779829043		E	mail : AVEN	IGER13	46@GI	MAIL.COM
OOB	3: Apr 12, 1999	Cat	tegory: Reserved (OBC)	Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat N	lo: 7273	3962 (Status: ATKT)
Exar	n form appearance type	: Fresher								
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA -	University A	ssessment,CA -	- College As	sessmei	nt)	
SN	Paper Code			Paper Name						AM - AT
1 83001 Financial Accounting and Auditing IX - Financial Accounting The							Th-UA [[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting				Th-UA [[]	
3 83013 Business Economics VI Th							Th-UA [[]		
							Th-UA [n-UA []		
5 83015 Direct and Indirect Taxation Paper II Th-							Th-CA [[]		
6	83023	Investment A	Analysis and Portfo	lio Management Paper II				Th-CA [[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee		Examir	nation F	ees
Mark	Statement Fee		Total:							
			•							
_		mount Rece		<u> </u>		No. and Date:				
1 DC			MICR No:		DD Date:			Bank:		
	ter Preference (Code/Na									
	ue Preference (Code/Na									1
				controller Of Examination					lace:	Vidyavihar
decla	are that all statement m	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examination	the best of m	ny knowledge an	nd belief. I		ate:	
equ othe	est for any special cond r ground. I understand t	ession such	as change in time	or day fixed for university on being found false or i	y Examinatio	n etc. on religiou	us or any			
cancelled or rejected. Student's Signature								dent's Signature		
)ecl	aration by Principal/HO	D/Chairperso	on							
resp		ectification of	the information. H	/ me. The information pri e/she is regular student						
Plac	e:									



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination f 10966		Division/Section:	Roll No	::		
	2017016400665181		Eligible						On-	
nstr	uction Medium:	<u>-</u>				Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: ACHA	REKAR ESHA	AN SANTOSH			Mother's Name: S	HUBHANGI	(Gender: Male	
Nam	e in Vernacular Langu	age:आचरेकरः	इशान संतोष							
٩ddr	ess: B-9 BHAGAWATI	CHS MITHA	GAR ROAD MULL	ND EAST						
City:	MUMBAI, Taluka: Kur	la, District: Mu	umbai Suburban, S	tate: Maharashtra, F	PIN: 400081					
Γele _l	ohone no.:		Mob	ile no: 91868991939	95	Ema	il : ESHANACI	HAREK	AR@GMAIL.COM	
OOB	: Oct 26, 1999	Ca	tegory: Reserved (OBC)	Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019							Seat	t No: 726	63468 (Status: ATKT)	
Exam form appearance type: 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 Name								AM - AT		
1 83001 Financial Accounting and Auditing IX - Financial Accounting						Th-U	A[]			
2 83007 Financial Accounting and Auditing X - Cost Accounting						Th-U	A[]			
3 83013 Business Economics VI						Th-U	A[]			
4	83014	Commerce \	/I				Th-U	Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-0							Th-C/	A[]		
6	83029	Elements of	Operational Resea	rch Paper II			Th-C/	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
	.=			1.						
		Amount Rece			College Receipt	No. and Date:	- In .			
0D N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
	e Preference (Code/N									
	Director, Board 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 correc	t to the best of n	ny knowledge and b	elief. I	Date:		
equ	est for any special con	cession such	as change in time	or day fixed for unive	ersity Examination	n etc. on religious o	r any			
	ground. I understand	that in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be			
Janic	elled or rejected.							St	udent's Signature	
Decl	aration by Principal/HO	DD/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 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	Staff Signature				nature of D/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 2021 event.

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		$\overline{-}$							
PRN:		Eligil	bility Status:	Examination form 270629	No.:	Division/Section:	Roll I	No.:	M ham
201701640083	39897	ſ	Eligible			Α	26	6	Chadham.
Instruction Medium	1:					Nationality:	India		
				Student's Perso	nal Informati	on			
Student's Name:	CHOUDH	IARY MANI	ISHA KUPARAM			Mother's Name: P	YARIDEVI	C	Gender: Female
Name in Vernacula	ar Language	 e:चौधरी मनी	 ोषा कुपाराम						
Address: e-151, cid	dco colony,	sector-3, a	iroli, navi mumbai	e-151, cidco colony, sec	tor-3, airoli,	navi mumbai			
City: navi mumbai,	Taluka: Th	ane, Distric	t: Thane, State: M	aharashtra, PIN: 400078	3				
Telephone no.:			Mob	nile no: 917045758652		Emai	I : choudha	ryanisha73	3@gmail.com
DOB: Apr 08, 1999	,	Cat	tegory: Open		Physically	Handicap: No			
Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Apr-2020							Sc	eat No: RD	P1019273 (Status: Fail)
Exam form appeara	ance type: I	Repeater							
Paper Details:	Please	e select Par	per details which y	ou want to appear (UA -	- University A	ssessment,CA - Co	lege Asses	ssment)	
SN Paper Co	ode			Paper Name					AM - AT
1 83007	/ Fir	nancial Acc	counting and Audit	ing X - Cost Accounting			Th	-UA []	
Convocation Fee			Exam Form Late I	Fee	Exam Form	Super Late Fee	E:	Examination Fees	
Mark Statement Fee Total:									
Dermant Datailar		t Boosi	ا	Coll	Daggint	Ne and Data:			
Payment Details:	Am	nount Receiv	1		<u> </u>	No. and Date:			
DD No:	(Cada/Nor		MICR No:		DD Date:		Da	ank:	
Center Preference	`								
Venue Preference	•			`antreller Of Everningtion					
				Controller Of Examination		foo for the come	Lharabu	Place:	Vidyavihar
declare that all stat	tement mad	de in this ap	oplication are true,	nination. I have remitted complete and correct to	the best of m	ny knowledge and be	elief. I	Date:	
	•		•	ibed for the examination or day fixed for university					
other ground. Í und	derstand tha			ion being found false or i					
cancelled or rejecte	ed.							Stu	udent's Signature
Declaration by Prin	ncinal/HOD/	/Chairnersc	<u></u>						udonto oignataro
-	=	=		y me. The information pri	inted in the fo	orm is correct to the	hest of my	knowledae	Lalso undertake the
responsibility of full	lfillment/rect	tification of	the information. He	e/she is regular student					
course/term work (if any) acco	ording to un	iversity rules.						
Place:									
_									
Date: College Staff Signature Seal and Signature of							acture of		
				College Stall Signature			Seal and Signature of Principal/HOD/Chairperson		



PRN:

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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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'e-Suvidha' account on

Roll No.:

Principal/HOD/Chairperson

Division/Section:



Eligibility Status: 270630 676 2017016400840131 Eligible Nationality: Instruction Medium: India Student's Personal Information Student's Name: MEHTA KUNAL BASANTILAL Mother's Name: VANITA Gender: Male Name in Vernacular Language:मेहता कुणाल BASANTILAL Address: ROOM NO.2, RATNABAI SADAN PIPELINE, SAKINAKA MUMBAI City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400072 Telephone no.: Mobile no: 918108440406 Email: mehta.abhishek95@yahoo.com DOB: Apr 20, 1999 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem VI [2C00146](Regular-Rev16) Exam Event: Apr-2020 Seat No: RDP1020851 (Status: Fail) Exam form appearance type: Repeater Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) SN Paper Code Paper Name AM - AT 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA[] Convocation Fee Exam Form Super Late Fee Exam Form 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, Director, Board of Examination and Evaluations / The Controller Of Examination, Place: Vidyavihar request permission to present myself for the ensuing examination. I have remitted the prescribed fee for the same. I hereby Date: 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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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination for 10966		Division/Section:	Roll No	.:		
	2017016400840301		Eligible						Isotal	
Instr	uction Medium:	•				Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: MOTA	VISHAL CHE	TAN			Mother's Name: Pl	REETI	(Gender: Male	
Nam	e in Vernacular Langua	age:VISHAL						•		
Addr	ess: 501/SAI MAMTA I	BUILDING SH	HIVAJI NAGAR W	AGLE ESTATE						
City:	THANE, Taluka: Than	e, District: Th	ane, State: Mahara	shtra, PIN: 400604						
Tele	ohone no.:		Mob	ile no: 91983307717	6	Emai	l : Motavishal(000@gn	nail.com	
DOB	: Dec 04, 1998	Cat	tegory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem IV(Regular-Rev16) Exam Event: Nov-2019 Sem IV(Regular-Rev16)								No: 734	43311 (Status: ATKT)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (l	JA - University A	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Nan	пе				AM - AT	
1	83001	Financial Acc	counting and Audit	g IX - Financial Accounting				A[]		
2	83007	Financial Acc	counting and Audit	ng X - Cost Account	ing		Th-U	A[]		
3 83013 Business Economics VI						Th-U	A[]			
4 83014 Commerce VI						Th-U	Th-UA[]			
5 83015 Direct and Indirect Taxation Paper II Th-CA							A[]			
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []										
Convocation Fee Exam Form Late Fee					Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee		Total:							
					•		'			
Payr	nent Details:	Amount Recei	1	(College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/N	ame):								
	ie Preference (Code/N									
	Director, Board of Exam							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 m	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	rsity Examination	n etc. on religious o	r any			
canc	elled or 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 esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	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 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]



	PRN:	Eligibility Status:	Examination form 109664	No.: Divi	sion/Section:	Roll No.	:	Mehul	
	2017016400840371	Eligible						lehus	
nstr	uction Medium:	•		Nati	ionality:	India			
			Student's Perso	nal Information					
Stud	ent's Name: SATRA	MEHUL KISHOREBHAI		Мо	other's Name: BH	IARTI	G	Gender: Male	
Nam	e in Vernacular Langua	ge:Gujarati							
Addr	ess: Lakhapur No No								
City:	Lakhapur, Taluka: Bhuj	, District: Kachchh, State: Guja	rat, PIN: 370425						
	phone no.:	Mob	ile no: 919773025683	no: 919773025683 Email : mehulsatra27@gmail.com					
DOB	: Dec 27, 1999	Category: Open		Physically Han	ndicap: No				
⊃rev	ious Latest Examination	Details: Sem IV(Regular-Rev1	6)	Exam Event: No	ov-2019	Seat	No: 734	3356 (Status: Pass)	
	n form appearance type	: Fresher							
	er Details: Pleas	se select Paper details which y	ou want to appear (UA	 University Asses 	ssment,CA - Col	lege Assessm	nent)		
SN	Paper Code		Paper Name					AM - AT	
1		Financial Accounting and Audit		nting		Th-UA			
2		Financial Accounting and Audit	ing X - Cost Accounting			Th-UA			
3	83013 E	Business Economics VI				Th-UA	۱[]		
4		Commerce VI				Th-UA[]			
5		Direct and Indirect Taxation Pa	per II			Th-CA	۱[]		
6		nvestment Analysis and Portfo	<u> </u>	I		Th-CA			
	vocation Fee	Exam Form Late	Fee	Exam Form Supe	er Late Fee	Exan	nination	Fees	
Mark	Statement Fee	Total:							
Payr	nent Details:	mount Received:	Coll	ege Receipt No. a	and Date:				
N DC	No:	MICR No:		DD Date:		Bank:			
Cent	er Preference (Code/Na	nme):	•			<u> </u>			
√enı	ue Preference (Code/Na	me):							
Го, [Director, Board of Exami	nation and Evaluations / The C	ontroller Of Examination	n,			Place:	Vidyavihar	
req	uest permission to prese	ent myself for the ensuing exan ade in this application are true,	nination. I have remitted	the prescribed fe	e for the same. I	hereby	Date:		
nave	gone through the syllab	ous and the list of books prescr	bed for the examination	for which I am ap	ppearing. I shall	not			
		ession such as change in time nat in the event of any informati							
	elled or rejected.	iat iii tile event of any informati	on being lound raise of	incorrect, my cam	didature is liable	to be			
							Stu	ident's Signature	
	aration by Principal/HOI	•							
		ized by the College staff and by ectification of the information. H							
		cording to university rules.	c/sile is regular stadefit	or triis conege an	id rias completed	a tric required	atteriua	nee and practical	
Plac	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)

 $\label{policy equation for Examination of Summer Session 2021 event.} \\$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination form 109665	1 No.:	Division/Section:	Roll No.).: I	Do Mood:	
	2017016400840525		Eligible		· II	6	783		Carpent.	
ารtrเ	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
tude	ent's Name: SAKPAI	L SHUBHAN	IGI PANDURANG			Mother's Name: AN	NITA	(Gender: Female	
	e in Vernacular Langua		<u> </u>							
				GOLIBAR ROAD AMR		GHATKOPAR W				
		a, District: Mu		State: Maharashtra, PIN:	400086					
	phone no.:		1.192	pile no: 917506098955						
	: Dec 07, 1999		tegory: Open		- 	/ Handicap: No				
	ious Latest Examination		m II(Regular-Rev16	3)	Exam Even	nt: Nov-2019	Seat	i No: 719	90245 (Status: ATKT)	
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
		se select Par	per details which y		- University F	Assessment, CA - Co	ilege Assessir	nent)	^ A A A T	
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1				ting IX - Financial Accounting			Th-U/			
2		Business Eco		ting X - Cost Accounting		Th-UA				
4		Commerce V					Th-UA[] Th-UA[]			
5				nor II				Th-CA[]		
5 83015 Direct and Indirect Taxation Paper II 6 83023 Investment Analysis and Portfolio Management Paper II						Th-CA				
6 83023 Investment Analysis and Portfolio Convocation Fee Exam Form Late Fe						Super Late Fee	<u> </u>	mination	Fee	
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lain	Otatement 1 00		Total.							
ayn	nent Details: A	Amount Recei	ived:	Coll	ege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	c:		
ent	er Preference (Code/Na	ame):								
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				nination. I have remitted complete and correct to				Date:		
ave	gone through the syllab	bus and the li	list of books prescri	ibed for the examination	n for which I a	am appearing. I shall	not	⊢—		
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	elled or rejected.		, , , , , , , , , , , , , , , , , , ,	011 bog . 0 t	, ,		, 10 20		· · · · · · · · · · · · · · · · · · ·	
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	aration by Principal/HOI	-		The information of	' in the f	' ··· '	to at at my kn	ladar	toto and develop the	
				y me. The information pr le/she is regular student						
	se/term work (if any) acc			•	•	,				
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Place:										
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Date:				Callaga Cheff Cinnatura		Soal and Signature of				
				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:



	PRN:	Eligi	bility Status:	Examination fo 109666		Division/Section:	Roll No.	.:	ida		
	2017016400841022		Eligible								
Instru	uction Medium:					Nationality:	India				
				Student's Per	sonal Informati	on					
Stud	ent's Name: KARIA	UNNATI RAI	KESH			Mother's Name: Cl	HAYA	(Gender: Female		
Nam	e in Vernacular Langua	age:कार्य उन्न	ती राकेश								
Addr	ess: B -6 ASHAPURA	APARTMENT	GROUND FLOO	R NEW MANEKLAL	GHATKOPAR V	VEST NEAR ARY S	SAMAJ HALL				
City:	MUMBAI, Taluka: Kurl	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, Pl	N: 400086						
Tele	ohone no.:		Mot	ile no: 919819107008	3	Emai	l : kariaunnati	1605@ე	gmail.com		
DOB	: May 16, 1999	Ca	tegory: Open		Physically	Handicap: No					
Prev	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 727	73918 (Status: ATKT)		
Exan	am 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 Nam	Paper Name				AM - AT		
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting				4[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accountii	ng		Th-U/	4[]			
3	83013	Business Ec					Th-UA				
4 83014 Commerce VI							Th-U/	A[]			
							Th-C/				
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []											
Convocation Fee Exam Form Late Fee				Fee	Exam Form	Super Late Fee	Exar	nination	Fees		
Mark	Statement Fee		Total:								
Pavn	nent Details:	Amount Rece	ived [.]	C	ollege Receipt	No. and Date:					
DD N			MICR No:		DD Date:		Bank	<u> </u>			
	er Preference (Code/N	ame):									
	ue Preference (Code/Na										
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar		
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	are that all statement m gone through the sylla							Date:			
	est for any special cond										
	ground. I understand t	that in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	to be				
canc	elled or rejected.							St	udent's Signature		
Decl	aration by Principal/HO	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 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.										
DI -	-										
Place	3 :										
D - ·											
Date:				College Staff Signature		Seal a	and Sigr	nature of			
			Conlege Clair Cignature		Principal/HOD/Chairperson						



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:



PRN: Eligi		Eligi	bility Status:	Examination for 109667		Division/Section:	Roll No).:	.).	
	2017016400841424		Eligible						Box	
Instru	uction Medium:					Nationality:	India	•		
				Student's Per	sonal Informati	on				
Stud	ent's Name: GADH/	AVI ANAND N	<i>I</i> URU			Mother's Name: L	ACCHHIBAI	G	Gender: Male	
Nam	e in Vernacular Langua	age:गाढवी आन	नंद मुरू							
Addr	ess: PLOT NO.50/T/A/	13 ROAD NO	D.6,SHIVAJI NAGA	AR GOVANDI						
City:	GOVANDI, Taluka: Ku	ırla, District: M	/lumbai Suburban,	State: Maharashtra, P	PIN: 400043					
Tele	ohone no.:		Mob	ile no: 917710832578	no: 917710832578					
DOB	: Mar 02, 1998	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 726	3495 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear (U	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name	Э				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acco	ounting		Th-U	A []		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountir	ng		Th-U	A []		
3	83013	Business Eco	onomics VI				Th-U	A []		
4	83014	Commerce V	/I				Th-U	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	A []		
6 83023 Investment Analysis and Portfolio N				lio Management Pape	er II		Th-C/	A []		
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Davr	nent Details:	Amount Recei	ived:	College Receipt No. and Date:						
DD N		- THOURIT TRECCI	MICR No:	DD Date: Bar						
	er Preference (Code/N	ame).	WIIOTT NO.		DD Date.		Dank			
	ue Preference (Code/Na									
	Director, Board of Exam		Evaluations / The C	controller Of Examinat	ion,			Place:	Vidyavihar	
	uest permission to pres									
	are that all statement m gone through the sylla							Date:		
	est for any special cond									
	ground. I understand t	that in the eve	ent of any informati	on being found false of	or incorrect, my	candidature is liable	e to be			
canc	elled or rejected.							Stu	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on .					•		
resp	form is carefully scrutir onsibility of fulfillment/r	ectification of	the information. H	me. The information e/she is regular stude	printed in the for	orm is correct to the ge and has complete	best of my kneed the required	owledge. d attenda	. I also undertake the nce and practical	
cour	se/term work (if any) ac	cording to un	iversity rules.							
Place	ə: -									
				-						
Date:				Outless Over Constant		Cool and Circuit as of				
				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination for 109668	m No.:	Division/Section:	Roll No	.:	0	
	2017016400841842		Eligible		IIII				Delp	
nstrı	uction Medium:	-				Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: ZOTA k	ALP BHARA	AT KUMAR			Mother's Name: SI	HANTA BEN	(Gender: Male	
lam	e in Vernacular Langua	ge:કલ્પ ભરત	ાકુમાર ઝોટા							
Addr	ess: ROOM NO 8 , BUI	LDING NO 1	21/B GOVARDHA	NDHAM , VALABHLAN	NE GARODIA	NAGAR, GHATKOF	PAR EAST			
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN	I: 400077					
ele	phone no.:		Mob	ile no: 919619759799		Emai	I: VBZDESIG	NS@GI	MAIL.COM	
ОВ	: May 08, 2000	Cat	tegory: Open		Physically	Handicap: No				
rev	ous Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33668 (Status: ATKT)	
xan	n form appearance type	: Fresher								
ape	r Details: Plea	se select Pa	per details which y	ou want to appear (UA	A - University A	Assessment,CA - Co	lege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting				۹[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting	g		Th-U	۹[]		
3	83013	Business Ec	onomics VI					۹[]		
4	83014	Commerce V	′ I				Th-U	٩[]		
5 83015 Direct and Indirect Taxation Paper II								۹[]		
6 83016 Export Marketing Paper II							Th-CA	۹[]		
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
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	er Preference (Code/Na	-								
	e Preference (Code/Na		valuations / The C	entreller Of Eveninetic				Ι		
	Director, Board of Exam					. d f f	l banab	Place:	Vidyavihar	
lecla	uest permission to pres are that all statement managers at the soulle	ade in this ap	plication are true,	complete and correct t	o the best of n	ny knowledge and be	elief. I	Date:		
	gone through the syllal est for any special cond									
the	ground. I understand t									
anc	elled or rejected.							St	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on					•	Ţ ,	
This esp	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	e:									
Date	:			College Staff Signature			Seal and Signature of			
				College Staff Signature			Principal/HOD/Chairperson			



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:



PRN:		Eligi	bility Status:	Examination form 109669	n No.:	Division/Section:	Roll No	.:	800	
:	2017016400842257		Eligible							
Instru	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: KALAS	KAR SHUBH	IAM DATTATRAY			Mother's Name: S.	ANGITA	(Gender: Male	
Nam	e in Vernacular Langua	age:कलसकर	शुभम दत्तात्रय							
Addr	ess: Pagare Chawl, Su	ınderbaug, As	salfa Village, Ghatk	copar West						
City:	mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400084					
Telep	ohone no.:			ile no: 919619668340	no: 919619668340 Email : shubham16kalaskar@gmail.com					
DOB	: Sep 16, 1999	Cat	tegory: Reserved (OBC)	Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Sei	m II(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 719	90192 (Status: ATKT)	
Exam form appearance type: Fresher										
<u> </u>	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	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	inting		Th-U	٩[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting		Th-U	4[]			
3	83013	Business Ec	onomics VI			Th-UA	۹[]			
4	83014	Commerce V					Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	٩[]		
6 83023 Investment Analysis and Portfolio				lio Management Paper			Th-C/	۹[]		
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/N	ame):								
Venu	ie Preference (Code/Na	ame):								
To, C	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted				Date:	-	
				complete and correct to ibed for the examinatior				Date.		
				or day fixed for universit						
	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			
040								St	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on							
This	form is carefully scruting	nized by the C	College staff and by	me. The information pr	rinted in the f	orm is correct to the	best of my kno	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 purse/term work (if any) according to university rules.									
	- (,)	- 3 / 4	. ,							
Place:										
				_						
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 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]



	PRN:	Eligi	bility Status:	Examination form No.: 109670		Division/Section:	Roll No	.:	./. +	
:	2017016400843381		Eligible						Monak	
Instru	uction Medium:					Nationality:	India	'		
				Student's Person	nal Informati	on				
Stude	ent's Name: CHAND	DRA NIRAL B	HANJI			Mother's Name: G	EETA	(Gender: Female	
	e in Vernacular Langua									
				,L-38 SECTOR-6,Vashi,I	Navi Mumba	ai				
City:	vashi, Taluka: Thane, [District: Than								
	phone no.:		Mob	ile no: 917045771919						
	: May 04, 1999		tegory: Open	Physically Handicap: No						
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 726	63471 (Status: ATKT)	
	n 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 Assessn	nent)		
SN	Paper Code			Paper Name				AM - AT		
1				ing IX - Financial Accoun	ting		Th-U	۹[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-U			
3	83013	Business Eco	onomics VI		Т					
4		Commerce V						Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II						Th-C	۹[]			
6 83023 Investment Analysis and Portfolio Management Paper II Th-C.							۹[]			
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DD N			MICR No:	<u> </u>	DD Date:		Bank	:		
	er Preference (Code/Na									
	e Preference (Code/Na							I		
				ontroller Of Examination,			I la conta	Place:	Vidyavihar	
decla	ire that all statement ma	ade in this ap	oplication are true,	nination. I have remitted t complete and correct to t	he best of n	ny knowledge and be	elief. I	Date:		
				ibed for the examination to or day fixed for university						
other	ground. I understand the			on being found false or ir						
canc	elled or rejected.							Sti	udent's Signature	
Decl	aration by Principal/HO	D/Chairners						0.0	ddent's Olghatare	
	-	=		me. The information prir	nted in the f	orm is correct to the	hest of my kny	owledae	Lalso undertake the	
respo	onsibility of fulfillment/re	ectification of	the information. H	e/she is regular student o						
cours	se/term work (if any) ac	cording to un	niversity rules.							
Place	×									
Date:				Callaga Staff Signatura		01 -	0'			
				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 109671	1 No.:	Division/Section:	Roll No	.:	0		
:	2017016400843396	Eligible						Ford		
Instru	uction Medium:				Nationality:	India				
			Student's Perso	onal Informati	on					
Stud	ent's Name: RONGH	IE MAYURI SUNILRAO			Mother's Name: SI	JNITA	G	ender: Female		
Nam	e in Vernacular Langua	ge:रोंघे मयुरी सुनील								
Addr	ess: ROOM NO. 10 RA	JENDRA YADAV CHAWL, L.B	S MARG CHIRAGNAG	AR GHATKO	PAR- WEST					
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	State: Maharashtra, PIN:	400086						
Telep	ohone no.:		pile no: 919819067093		Emai	ii : MAYURIRO	DNGHE1	8@GMAIL.COM		
DOB	: Oct 22, 1999	Category: Reserved (OBC)	Physically	Handicap: No					
Previ	ious Latest Examinatior	n Details: Sem I(Regular-Rev16	5)	Exam Event: Nov-2019 Seat No: 7014652 (Status: ATKT						
Exan	n form appearance type	: Fresher								
Pape	er Details: Plea	se select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessn	nent)			
SN	Paper Code		Paper Name					AM - AT		
1	83001	Financial Accounting and Audit	ing IX - Financial Accou	nting	Th-U	٩[]				
2	83007	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	٩[]			
3	83013	Business Economics VI				Th-U	۹[]			
4 83014 Commerce VI						Th-U	۹[]			
5 83015 Direct and Indirect Taxation Paper II Th-						Th-C/	۹[]			
6	83029	Elements of Operational Resea	rch Paper II			Th-C/	۹[]			
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination f	-ees		
Mark	Statement Fee	Total:								
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_		mount Received:	<u> </u>		No. and Date:	- In .				
DD N		MICR No:		DD Date:		Bank	:			
	er Preference (Code/Na	•								
	e Preference (Code/Na	<u>, </u>								
		ination and Evaluations / The C			16 6 11		Place:	Vidyavihar		
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true, bus and the list of books prescr	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:			
other	ground. Í understand tl	ession such as change in time hat in the event of any informat								
cancelled or rejected. Student's Signature								dent's Signature		
Decla	Declaration by Principal/HOD/Chairperson									
respo	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H cording to university rules.								
Place	e:									
Date										



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:



	PRN:	Eligi	bility Status:	Examination form 109672	m No.:	Division/Section:	Roll No	.:	No.	
;	2017016400843632		Eligible						Barage	
Instru	ıction Medium:	•				Nationality:	India	•		
				Student's Pers	onal Informati	on				
Stud	ent's Name: PANDE	EY PRAKASH	UPENDRA			Mother's Name: Po	MANOC	C	Gender: Male	
Nam	e in Vernacular Langua	age:पांडे प्रका	श उपेंद्र							
Addr	ess: 142/NAVJEEVAN	CHS, DARG	A ROAD KHINDIP	ADA						
City:	MULUND, Taluka: Mu	mbai, District	. Mumbai City, Sta	te: Maharashtra, PIN: 4	100082					
Telep	phone no.:		Mob	ile no: 918097211331	no: 918097211331 Email : pratikpathare18610@gmail.com					
DOB	: May 02, 1999	Cat	tegory: Open		Physically	Handicap: No				
Previ	ous Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 727	73914 (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	!				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accor	unting		Th-U	A []		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	g		Th-U	A[]		
3	83013	Business Ec	onomics VI			Th-U	A []			
4	83014	Commerce V	/1				Th-U	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A []		
6 83016 Export Marketing Paper II							Th-C	A []		
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Davn	nent Details:	Amount Rece	ived:	Co	Illege Receipt	No and Date:				
DD N		-inount ricco	MICR No:	100	College Receipt No. and Date: DD Date: B					
	er Preference (Code/N	lame).	WIIOTT NO.		DD Date.		Bank			
	e Preference (Code/N									
	<u> </u>			Controller Of Examination	on.			Place:	Vidyavihar	
				nination. I have remitte		ed fee for the same.	I hereby	i lace.	viuyaviilai	
decla	re that all statement m	nade in this ap	oplication are true,	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						
other	ground. I understand			ion being found false of						
canc	elled or rejected.							Stu	udent's Signature	
Decla	aration by Principal/HC	D/Chairperso	on					0	adoni o oignataro	
	-	-		/ me. The information p	orinted in the f	orm is correct to the	best of my kn	owledae	. I also undertake the	
respo	onsibility of fulfillment/r	ectification of	the information. H	e/she is regular studen	nt of this Collec	ge and has complete	d the required	d attenda	nce and practical	
cour	se/term work (if any) a	ccording to ur	liversity rules.							
Dlace	·									
Place	.									
Data.										
Date:				College Staff Signature		Seal and Signature of				
				Conege dian dignature			Principal/HOD/Chairperson			



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

Disciple 16



	PRN:	Eligibility Status:	109673	Division/	/Section:	Roll No.:	Asopla		
:	2017016400843872	Eligible		I .			100		
Instru	uction Medium:			National	ity:	India			
			Student's Person	nal Information					
Stud	ent's Name: GUPTA	A AAKASH KUMAR PRADEEPK	UMAR	Mother*	's Name: SF	HAKUNTALA DEV	/I Gender: Male		
Nam	e in Vernacular Langua	age:गुप्ता आकाश कुमार प्रदीपकुमार	र						
Addr	ess: NEAR SAI MANDI	IR 2/14, SAI SHRADHA CHAWL	, HANUMAN GALLI RO	OAD, KANJUR MARG	à EAST				
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, St	tate: Maharashtra, PIN:	400042					
Tele	phone no.:	Mobi	ile no: 919867205693		Email	l : guptaaakassh9	867@gmail.com		
DOB	: Apr 26, 1999	Category: Open	_	Physically Handica	p: No				
		n Details: Sem IV(Regular-Rev16	6)	Exam Event: Nov-20)19	Seat No:	7343358 (Status: Pass)		
	n form appearance type								
		ase select Paper details which yo		University Assessme	ent,CA - Coll	lege Assessment			
SN	Paper Code		Paper Name			AM - AT			
1		Financial Accounting and Auditir	-	nting	Th-UA[]				
2		Financial Accounting and Auditir	ng X - Cost Accounting		Th-UA[]				
3		Business Economics VI				Th-UA[]			
4		Commerce VI					Th-UA[]		
5		Direct and Indirect Taxation Pap				Th-CA[]			
6	83023	Investment Analysis and Portfoli	io Management Paper II			Th-CA[]			
	ocation Fee	Exam Form Late F	⁻ ee	Exam Form Super La	te Fee	Examina	tion Fees		
Mark	Statement Fee	Total:							
Pavn	nent Details:	Amount Received:	Colle	ege Receipt No. and I	 Date:				
DD N		MICR No:	<u> </u>	DD Date:		Bank:			
Cent	er Preference (Code/Na	ame):				I			
	ue Preference (Code/Na								
To, [Director, Board of Exam	nination and Evaluations / The Co	ontroller Of Examination	ı,		Plac	ce: Vidyavihar		
		ent myself for the ensuing exam							
		ade in this application are true, or bus and the list of books prescrib					e:		
requ	est for any special conc	cession such as change in time o	or day fixed for university	Examination etc. on	religious or	any			
	r ground. I understand t elled or rejected.	that in the event of any information	on being found false or i	ncorrect, my candida	ture is liable	to be			
Caric	elieu of rejecteu.						Student's Signature		
Declaration by Principal/HOD/Chairperson									
		nized by the College staff and by ectification of the information. He							
cour	se/term work (if any) ac	ccording to university rules.	Ü	· ·	·		·		
Place	e.								
			_						
Date									
			College Staff Signature		Seal and Signature of				
						Principal/l	HOD/Chairperson		



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Examination form No.:

Disciple 16



	PRN:	Eligi	bility Status:	109674	II INO	Division/Section:	Roll No).:	Nishigandha
	2017016400844202		Eligible		III				Misnigaries
Instr	uction Medium:					Nationality:	India		
				Student's Perso	onal Informat	on			
Stud	ent's Name: BORHA	DE NISHIGA	NDHA VIJAY			Mother's Name: SI	HAILA		Gender: Female
Nam	e in Vernacular Langua	ge:बोऱ्हाडे नि	शिगंधा विजय						
Addr	ess: Near Saibaba Mar	ndir, R N D-1	1, New Dayasagar	M Sangh, Bhatwadi, Gl	hatkopar W				
City:	Mumbai, Taluka: Kurla	, District: Mur	mbai Suburban, St	ate: Maharashtra, PIN:	400084				
Tele	phone no.:		Mob	ile no: 918291473425		Emai	il : nishigandh	aborhad	e143@gmail.com
DOB	: Dec 22, 1999	Cat	egory: Open		Physically	Handicap: No			
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Ever	t: Nov-2019	Sea	t No: 729	90664 (Status: ATKT)
	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessr	nent)	
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting	Th-U			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-U	A[]	
3	83013	Business Eco	onomics VI				Th-U		
4	83014	Commerce V	′1				Th-U	A[]	
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]	
6	83016	Export Marke	eting Paper II				Th-C	A []	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	mount Recei	ived:	Call	lege Receipt	No. and Date:			
DD N		anount recei	MICR No:		DD Date:	ivo. una Dato.	Bank	·	
	er Preference (Code/Na	ame).	imorrito.		DD Date.		Barin	-	
	ue Preference (Code/Na								
	·	-	valuations / The C	Controller Of Examinatio	n,			Place:	Vidyavihar
				nination. I have remitted		ed fee for the same.	I hereby	1 1000	viayaviilai
				complete and correct to				Date:	
				ibed for the examinatior or day fixed for universi					
othe	r ground. I understand t			ion being found false or					
canc	elled or rejected.							Str	udent's Signature
Decl	aration by Principal/HO	D/Chairperso	on						<u> </u>
This	form is carefully scrutir	ized by the C	College staff and by	me. The information p	rinted in the f	orm is correct to the	best of my kn	owledge	. I also undertake the
resp	onsibility of fulfillment/re	ectification of	the information. H	e/she is regular student					
cour	se/term work (if any) ac	cording to un	iiversity rules.						
Dies	٠.								
Place	ᡛ.								
. .									
Date:				College Staff Signature		Seal and Signature of			
				College Stall Signature)/Chairperson



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Examination form No.:



	PRN:	Eligi	bility Status:	109675	II INO	Division/Section:	Roll No).:			
	2017016400844891		Eligible						Reix.		
Instr	uction Medium:	<u>-</u>				Nationality:	India				
				Student's Perso	onal Informat	on					
Stud	ent's Name: PANC	HAL RAJ VAS	SANT			Mother's Name: S	HILPA	(Gender: Male		
Nam	e in Vernacular Langua	age:પંચાલ રા	ช vasant								
Addr	ess: 10,PITRUCHAYA	BLDG, KISA	N NAGAR-1, THAI	NE-400604							
City:	THANE, Taluka: Than	e, District: Th	ane, State: Mahara	ashtra, PIN: 400604							
Tele	phone no.:		Mob	ile no: 919821345808		Ema	il : panchalraj	.1999@g	gmail.com		
DOB	: Oct 11, 1999	Ca	tegory: Open		Physically	Handicap: No					
Prev	ious Latest Examinatio	n Details: Se	m IV(Regular-Rev1	16)	Exam Ever	t: Apr-2019	Sea	t No: 02	35958 (Status: Fail)		
Exar	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	ollege Assessr	ment)			
SN	Paper Code			Paper Name				AM - AT			
1	83001	Financial Ac	counting and Audit	ing IX - Financial Accou	ınting		Th-U	A[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting			Th-U	A[]			
3	83013	Business Ec	onomics VI				Th-U	A[]			
4	83014	Commerce \	/ I				Th-U	Th-UA[]			
5	83015 Direct and Indirect Taxation Paper II							A[]			
6	83023	Investment A	Analysis and Portfo	lio Management Paper	II		Th-C	A[]			
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	nation Fees		
Mark	Statement Fee		Total:								
Bov.	mont Dotoile:	Amount Doo	ivod:	Call	logo Possint	No. and Data:					
DD 1		Amount Rece	MICR No:	<u> </u>	DD Date:	No. and Date:	Bank	,·			
	er Preference (Code/N	lomo):	IVIICK NO.		DD Date.		Dalli	۷.			
	ue Preference (Code/N										
	•	-	Evaluations / The C	Controller Of Examinatio	n			I _n .			
	•			nination. I have remitted	•	ad foo for the come	Lhoroby	Place:	Vidyavihar		
				complete and correct to				Date:			
				ibed for the examination							
				or day fixed for universition being found false or							
	elled or rejected.		, ,	3	,			٠,	udonto Cianatura		
Dool	aration by Dringing/UC	ND/Chairmana						31	udent's Signature		
	aration by Principal/HC	-		, ma The information n	rinted in the f	arm ia aarraat ta tha	boot of my lem		. I alaa wadartaka tha		
				/ me. The information po e/she is regular student							
	se/term work (if any) a			S	·	,			•		
Plac	e:										
Date	C			0 " 0	- ((O' - ·						
				College Sta	aff Signature				nature of D/Chairperson		
								Principal/HOD/Chairperson			



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 form N 270631	No.:	Division/Section:	Roll No	o.:	leve D.		
2	2017016400845631	Eligible			D	458		timatates		
Instru	uction Medium:				Nationality:	India				
		_	Student's Person	nal Informati	on					
Stude	ent's Name: PATEL K	UNAL NANJI			Mother's Name: JA	SU	G	Gender: Male		
Name	e in Vernacular Language	e:પટેલ કુણાલ નાનજી								
		KISAN NAGAR 2, WAGALE E								
City:	THANE, Taluka: Thane, I	District: Thane, State: Mahara	ashtra, PIN: 400604							
Telep	phone no.:	Mot	oile no: 918450931832		Emai	l : kp5075731	@gmail.	.com		
DOB:	: May 29, 1998	Category: Open		Physically	Handicap: No					
Previ	ous Latest Examination [Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Apr-2020	Sea	t No: RDI	P1017881 (Status: Fail)		
Exam form appearance type: Repeater										
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	83007 Fi	inancial Accounting and Audit	ing X - Cost Accounting			Th-U	AM - AT UA []			
Convocation Fee Exam Form Late F			Fee E	Exam Form Super Late Fee Examination Fees			Fees			
Mark	Statement Fee	Total:								
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		nount Received:		•	No. and Date:	<u> </u>				
DD N		MICR No:	<u> </u> D	DD Date:		Bank	<u>c</u>			
	er Preference (Code/Nam	•								
	e Preference (Code/Nam	<u>'</u>								
		nation and Evaluations / The C					Place:	Vidyavihar		
decla	re that all statement mad	nt myself for the ensuing exar de in this application are true, us and the list of books prescr	complete and correct to the	he best of m	ny knowledge and be	elief. I	Date:			
reque other	est for any special concest ground. I understand that	ssion such as change in time at in the event of any informat	or day fixed for university	Examinatio	on etc. on religious or	any				
	elled or rejected.						Stu	udent's Signature		
Decla	aration by Principal/HOD/	/Chairperson								
respo		red by the College staff and be stification of the information. Ho ording to university rules.								
Place) :									
Data:	ata:									



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:



PRN: Eligib			bility Status:	Examination form 270632	n No.:	Division/Section:	Roll No	.:	Olikarh		
	2017016400846015		Eligible		III	F	648		J 4000		
Instr	uction Medium:					Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: JHAVE	RI NIKESH K	ETAN			Mother's Name: Jl	JLIE	Ge	ender: Male		
Nam	e in Vernacular Langua	age:ઝવેરી નિકે	શ કેતન								
Addr	ess: 271/2 KamalDeep	OPP.SION	HOSPITAL GATE	NO.7 SION WEST							
City:	MUMBAI, Taluka: Mur	nbai, District:	Mumbai City, State	e: Maharashtra, PIN: 40	00022						
Tele	phone no.: 24076120		Mob	ile no: 919699666592		Ema	il : nikesh.k.jha	averi@gm	ail.com		
DOB	: Mar 08, 1999	Cat	egory: Open		Physically	Handicap: No					
Prev	ious Latest Examinatio	n Details: Ser	m VI [2C00146](Re	gular-Rev16)	Exam Even	t: Apr-2020	Seat	No: RDP	1020824 (Status: Absent)		
Exar	n form appearance type	e: Repeater									
Pape	aper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN	Paper Code			Paper Name					AM - AT		
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting		Th-U	۹[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	I		Th-U	٩[]			
							Th-U	۹[]			
4 83014 Commerce VI Th							Th-U	UA[]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	۹[]			
6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th-C	٩[]			
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination F	ees		
Mark	Statement Fee		Total:								
Payr	ment Details:	Amount Recei	ived:	Col	lege Receipt	No. and Date:					
DD N	No:		MICR No:	·	DD Date:		Bank	Bank:			
Cent	er Preference (Code/N	ame):			•		•				
Venu	ue Preference (Code/N	ame):									
-	•			ontroller Of Examinatio	•			Place:	Vidyavihar		
decla	are that all statement m	iade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and b	elief. I	Date:			
				ibed for the examination or day fixed for universi							
othe	r ground. Í understand í			on being found false or							
cano	elled or rejected.							Stud	dent's Signature		
Decl	aration by Principal/HC	D/Chairperso	on					•	Ţ.		
This 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.										
Plac	e:										
Date	<u> </u>										
	•			College Sta	aff Signature			and Signa ipal/HOD/	ture of Chairperson		



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



	PRN:	Eligi	bility Status:	Examination forr 109676	n No.:	Division/Section:	Roll No	o.:	Oidhi		
	2017016400847193		Eligible						Que		
Instr	uction Medium:	•				Nationality:	India				
				Student's Pers	onal Informati	on					
Stud	ent's Name: DAMA	VIDHI HITES	H			Mother's Name: [DEEPA	(Gender: Female		
Nam	e in Vernacular Langua	ige:DEEPA									
Addr	ess: Narayan Nathu Bh	avsar Chawl	no.1,Room no. 1 I	kajuwadi ghatkopar wes	t,mumbai-40	0086					
City:	mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400086						
Tele	phone no.:		Mot	oile no: 919702868690		Ema	ail : vidhidama	99@gma	ail.com		
DOB	: Aug 06, 1999	Cat	tegory: Open		Physically	Handicap: No					
Prev	ious Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	ıt No: 726	63456 (Status: Pass)		
Exar	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 - C	ollege Assessi	ment)			
SN	Paper Code			Paper Name					AM - AT		
1	83001	Financial Aco	counting and Audit	ing IX - Financial Accoι	ınting		Th-U	A[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-U	A[]			
3 83013 Business Economics VI							Th-U	A[]			
4	83014	Commerce V	/ I				Th-U	A[]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]			
6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th-C	A[]			
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination] nation Fees		
Mark	Statement Fee		Total:								
Pavr	nent Details:	mount Rece	ived:	Col	lege Receipt	No. and Date:					
DD N			MICR No:	I	DD Date:		Banl	k:			
Cent	er Preference (Code/N	ame):	L								
	ue Preference (Code/Na										
To, [Director, Board of Exam	ination and E	valuations / The C	Controller Of Examination	n,			Place:	Vidyavihar		
				nination. I have remitted				Date:			
				complete and correct to ibed for the examination				Date.			
requ	est for any special cond	ession such	as change in time	or day fixed for universi	ty Examination	n etc. on religious	or any				
	r ground. I understand t elled or rejected.	hat in the eve	ent of any informat	ion being found false or	incorrect, my	candidature is liab	le to be				
cario	chica of rejected.							St	udent's Signature		
Decl	aration by Principal/HO	D/Chairperso	on								
				y me. The information p e/she is regular studen							
cour	urse/term work (if any) according to university rules.										
Place											
				_							
Date	:										
			College St	aff Signature				nature of			
							Princ	ipal/HO[D/Chairperson		



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PRN: Eligibility Status:			Examination form 109677	n No.:	Division/Section:	Roll No	.:				
	2017016400847243		Eligible						and the second		
Instru	uction Medium:		-			Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: GIRI H	ETAL PUNE	≣T			Mother's Name: VI	ВНА	(Gender: Female		
Nam	e in Vernacular Langua	ge:हेतल पुनी	त गिरी								
	ess: 146/282, NETAJI (· , ,							
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN:	: 400082						
	ohone no.:			ile no: 917738483546		Emai	I : RONAKGIF	RI66@Y	AHOO.COM		
	: Oct 31, 1999		tegory: Open		, , , , ,	Handicap: No	1_				
	ious Latest Examination		m IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Seat	No: 02	35752 (Status: ATKT)		
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1				ng IX - Financial Accou							
3		Business Ec		ng X - Cost Accounting			Th-U/				
4		Commerce \					Th-U/				
5			direct Taxation Pa	ner II			Th-C/				
6			stems and Applica						.CA []		
_	ocation Fee	computer cy	Exam Form Late I	•	Exam Form	Super Late Fee	'				
Mark Statement Fee Total:							1-1-1-1				
		mount Rece				No. and Date:	1				
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	er Preference (Code/Na										
	ie Preference (Code/Na		Traditions (The O		_			_			
				ontroller Of Examinatio		ad foo for the come	l barabı	Place:	Vidyavihar		
decla	are that all statement m	ade in this ap	oplication are true,	nination. I have remitted complete and correct to	the best of m	ny knowledge and be	elief. I	Date:			
				bed for the examinatior or day fixed for universite							
othe	ground. I understand t			on being found false or							
canc	elled or rejected.							St	udent's Signature		
Decl	aration by Principal/HO	D/Chairperso	on								
	sponsibility 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	e:										
				-							
Date	:								Place: Vidyavihar Date: Student's Signature		
				College Sta	aff Signature				AM - AT ;Th-CA []		
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Elig	ibility Status:	Examination form 109678	n No.:	Division/Section:	Roll No	ı.:	Flatonia		
:	2017016400848946		Eligible								
Instru	ıction Medium:	•				Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: KATAF	RIA AMI ASH	OK			Mother's Name: PA	ALLAVI	(Gender: Female		
Nam	e in Vernacular Langua	age:ગુજરાતી									
Addr	ess: b36 2/10 somesh	war society m	ng complex sector1	4 vashi navi mumbai							
City:	vashi, Taluka: Thane,	District: Thar	ne, State: Maharas	ntra, PIN: 400703							
Telep	phone no.:		Mot	ile no: 919833326884		Emai	l : katariaami(@gmail.	com		
DOB	Oct 25, 1999	Ca	tegory: Open		Physically	Handicap: No					
Previ	ous Latest Examinatio	n Details: Se	m I(Regular-Rev16	5)	Exam Even	t: Nov-2019	Sea	t No: 70	14648 (Status: ATKT)		
Exan	n form appearance type	e: 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	83001	Financial Ac	counting and Audit	ing IX - Financial Accou	nting		Th-U	A[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting			Th-U	A []			
3	83013	Business Ed	conomics VI				Th-U	A[]			
4	83014	Commerce \	/ I				Th-U				
5	83015	Direct and Ir	ndirect Taxation Pa	per II			Th-C	Th-CA[] Th-CA[]			
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []											
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	xamination Fees			
Mark	Statement Fee		Total:								
Pavn	nent Details:	Amount Rece	eived:	Coll	lege Receint	No. and Date:					
DD N		THOUSE TROOP	MICR No:		DD Date:	Tto. and Bato.	Bank				
	er Preference (Code/N	lame).	1		22 24.0.			··			
	e Preference (Code/N										
	<u> </u>		Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar		
				nination. I have remitted				l_	•		
				complete and correct to ibed for the examination				Date:			
reque	est for any special cond	cession such	as change in time	or day fixed for universi	ty Examinatio	n etc. on religious or	any				
	ground. I understand : elled or rejected.	that in the ev	ent of any informat	ion being found false or	incorrect, my	candidature is liable	to be				
Caric	elled of rejected.							St	udent's Signature		
Decla	aration by Principal/HC	D/Chairpers	on								
	ponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical irse/term work (if any) according to university rules.										
			Thronous raide.								
Place) :										
				_							
Date											
			College Sta	aff Signature				AM - AT On Fees e: Vidyavihar :: Student's Signature Ige. I also undertake the endance and practical			
					Principal/HOD/Chairperson				Unairperson		



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Examination form No.:

Disciple 16



	PRN:	Eligi	bility Status:	270633	II NO	Division/Section	on: Ro	II No.:	Sand.			
	2017016400849234		Eligible		III	Α		34	See Leville			
Instr	uction Medium:	•				Nationality:	India					
				Student's Perso	onal Informat	on						
Stud	ent's Name: GAWA	DE OMKAR S	SUBHASH			Mother's Nam	ie: MANGAL		Gender: Male			
Nam	e in Vernacular Langua	age:गावडे ओम	ाकार सुभाष									
Addr	ess: KADAM CHAWL.	SAI HILL.T.P	.ROAD BHANDUF	WEST								
City:	BHANDUP WEST, Tal	uka: Kurla, D	istrict: Mumbai Sul	ourban, State: Maharas	htra, PIN: 40	0078						
Tele	ohone no.:		Mob	ile no: 919969213153			Email : omkar	gawade11°	111@gmail.com			
DOB	: Jul 01, 2000	Cat	egory: Open		Physically	Handicap: No						
Prev	ious Latest Examinatio	n Details: Ser	n VI [2C00146](Re	egular-Rev16)	Exam Ever	t: Apr-2020		Seat No: F	RDP1019375 (Status: Fail)			
	n form appearance type	e: Repeater										
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA	- College Ass	sessment)				
SN	Paper Code			Paper Name								
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting	Γh-UA []						
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	İ			Γh-UA []				
3	83013	Business Eco	onomics VI				-	Γh-UA []				
4	83014	Commerce V	′ I				-	Γh-UA []				
5	83015	Direct and In	direct Taxation Pa	per II			-	Γh-CA []				
6	83020	Computer sy	stems and Applica	tions Paper II			-	Γh-UA [] ;T];Th-CA[]			
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee	1	Examination	mination Fees			
Mark	Statement Fee		Total:									
Pavr	nent Details:	Amount Recei	ived:	Col	leae Receipt	No. and Date:						
DD N			MICR No:		DD Date: Bank:							
Cent	er Preference (Code/N	ame):	l									
	ie Preference (Code/Na											
To, [Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinatio	n,			Place	e: Vidyavihar			
				nination. I have remitted					-			
				complete and correct to bed for the examination				Date:				
				or day fixed for universi								
		that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is	liable to be					
canc	elled or rejected.								Student's Signature			
Decl	aration by Principal/HC	D/Chairperso	on					•				
				me. The information poelshe is regular student					ge. I also undertake the dance and practical			
	se/term work (if any) ac			•	-,	-			·			
Place	e:											
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Date:												
Duit	•			College Sta	aff Signature			Seal and Si				
					=			Principal/H0	OD/Chairperson			



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

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN:		Eligi	bility Status:	Examination form No.: 270634		Division/Section:	Roll	No.:	N. J. Filmer	-
:	2017016400849404		Eligible			F	70	2	Vm . 9 3	
Instru	uction Medium:	-				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: PITHAD	DIA NEEL JA	TIN			Mother's Name: V	ANDANA	C	Gender: Male	
Nam	e in Vernacular Langua	ge:पिठाडिया	नील जतीन							
Addr	ess: ROOM NO 16 SHI	V SADAN CI	HS RAJAWADI RO	OAD GHATKOPAR EAS	ST					
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, PIN:	400077					
Tele	phone no.:		Mob	ile no: 918689811040		Ema	il : neel.pith	adia007@g	gmail.com	
DOB	: Dec 17, 1998	Cat	egory: Open		Physically	Handicap: No				
	ious Latest Examinatior		n VI [2C00146](Re	egular-Rev16)	Exam Even	t: Apr-2020	Se	eat No: RD	P1020874 (Status: Ab	sent)
	n form appearance type	: Repeater								
Pape	er Details: Plea	se 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	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	nting			-UA []		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-	-UA[]		
						-UA []				
							Th-	-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-C							-CA[]			
6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th-	-CA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	E	kamination	Fees	
Mark	Statement Fee		Total:							
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		mount Recei			<u> </u>	No. and Date:	15			
DD N			MICR No:		DD Date:		Ва	nk:		
	er Preference (Code/Na									
	ue Preference (Code/Na									
				controller Of Examination		16 6 4		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 examinatior	n for which I a	m appearing. I shall	not			
				or day fixed for universit on being found false or						
	elled or rejected.	nat in the eve	one of any informati	on being loana laise of	moon cot, my	candidatare is liable	0 10 50			
								Sti	udent's Signature	
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Place	e:									
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 109679	n No.:	Division/Section:	Roll No.	.:	Worldborg		
	2017016400849427	Eligible						Mark		
Instru	uction Medium:	•	•		Nationality:	India	-			
			Student's Perso	onal Informati	on					
Stud	ent's Name: TRIVED	I MANTHAN HITESH			Mother's Name: AS	SHA	C	Gender: Male		
Nam	e in Vernacular Languaç	je:मंथन								
Addr	ess: A/302,SILVER HAF	RMONY CHS NEW MANEK	LAL ESTATE GHATKOP	AR WEST						
City:	GHATKOPAR, Taluka:	Kurla, District: Mumbai Subi	rban, State: Maharashtra	, PIN: 400086	5					
Tele	phone no.:	N	obile no: 919821867243		Emai	I:TRIVEDI26	MANTH	AN@GMAIL.COM		
DOB	: Apr 26, 1999	Category: Open		Physically	Handicap: No					
Prev	ious Latest Examination	Details: Sem III(Regular-Re	v16)	Exam Ever	t: Nov-2019	Seat	No: 728	3641 (Status: Pass)		
Exan	kam 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 Name								AM - AT		
1	83001 F	Financial Accounting and Au	diting IX - Financial Accou	nting		Th-UA	A[]			
2	83007 F	Financial Accounting and Au	diting X - Cost Accounting			Th-UA	۹[]			
3 83013 Business Economics VI							۹[]			
4	83014	Commerce VI				Th-UA	۹[]			
5	5 83015 Direct and Indirect Taxation Paper II Th-CA []									
6	83023 I	nvestment Analysis and Por	folio Management Paper	II		Th-CA	۹[]			
Conv	ocation Fee	Exam Form La	e Fee	Exam Form	Super Late Fee	Exan	nination	Fees		
Mark	Statement Fee	Total:								
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				DD Date.		Dalik	•			
	er Preference (Code/Na ue Preference (Code/Na	•								
	•	nation and Evaluations / The	Controller Of Everningtion	n			I _D ,	\all 11		
		ent myself for the ensuing ex			ad foo for the same	Lhoroby	Place:	Vidyavihar		
		ide in this application are tru					Date:			
have	gone through the syllab	ous and the list of books pres	cribed for the examination	n for which I a	m appearing. I shall	not				
		ession such as change in tin nat in the event of any inform					l			
	elled or rejected.		anon boing round raise or			, 10 20	0.			
							Stu	udent's Signature		
	aration by Principal/HOI	=								
		zed by the College staff and ctification of the information								
		cording to university rules.	Tio, one to regular stadem	. Si uno Oone	go ana nao complete	a ano roquireu	. attoriud	inos ana praededi		
Place	e:									
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

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Examination form No.:



	PRN:	Eligi	bility Status:	Examination for 109680		Division/Section:	Roll No	D.:	Mosnaudaus
	2017016400849605		Eligible				<u> </u>		1
Instr	uction Medium:					Nationality:	India		
				Student's Per	sonal Informati	on			
Stud	ent's Name: SONAV	NANE KRUTI	IKA SANDEEP			Mother's Name: St	JSHAMA		Gender: Female
Nam	e in Vernacular Langua	age:सोनावणे व	वृतिका संदीप						
Addr	ess: KRUSHNA KOYN	A CHAWL NO) 1 ROOM NO 40	MAHARASHTRA NA	GAR MANKHU	JRD EAST			
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, PIN	N: 400088				
Tele	phone no.:			oile no: 919930105586			il : krutika8652	2@gmail	.com
	3: Oct 29, 1999		tegory: Reserved (Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 727	73939 (Status: ATKT)
Exan	n form appearance type								
Pape	er Details: Plea	se select Par	per details which y	ou want to appear (U/	A - University A	Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Name					AM - AT
1				ing IX - Financial Acco			Th-U/		
2				ing X - Cost Accountin	ng		Th-U/		
							Th-U/		
4		Commerce V					Th-U	A[]	
5			direct Taxation Pa				Th-C/		
6	83023	Investment A	nalysis and Portfo	lio Management Pape	er II		Th-C/	A[]	
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Exam							mination	Fees	
Mark	Statement Fee		Total:						
Pavr	ment Details:	Amount Recei	ived:	Cr	ollege Receipt I	No. and Date:			
DD N			MICR No:		DD Date:		Bank	<u></u>	
Cent	ter Preference (Code/Na	ame):	Į.						
	ue Preference (Code/Na		-	,		,			
To, [Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examinati	ion,			Place:	Vidyavihar
	uest permission to pres							<u>.</u>	•
	are that all statement me gone through the sylla							Date:	
requ	est for any special cond	cession such	as change in time	or day fixed for univers	sity Examinatio	on etc. on religious or	r any		
	r ground. I understand t	that in the eve	ent of any informat	on being found false o	or incorrect, my	candidature is liable	e to be		
Canc	elled or rejected.							Stı	udent's Signature
Decl	aration by Principal/HO	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 esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place	e:						 		
Date	:			College S	Staff Signature			and Sign	nature of 0/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]



	PRN:	Eligi	ibility Status:	Examination form 109681	Division/Section:		Roll No.).:	C. Al costs		
2	2017016400850292		Eligible						- Lean		
Instru	uction Medium:					Nationality:	India				
				Student's Persor	nal Informati	ion					
		MEET NANDL	LAL			Mother's Name: HI	EMLATA	(Gender: Male		
	e in Vernacular Langua										
	ess: ROOM NO. 201-20										
	<u>~</u>	har, District: [harashtra, PIN: 401501							
	phone no.:			pile no: 917798471065		- I	il : raizada821	50@gm	ail.com		
	: Nov 30, 1999		tegory: Open			/ Handicap: No					
	ous Latest Examination		m II(Regular-Rev16	3)	Exam Even	nt: Nov-2019	Seat	t No: 719	90179 (Status: ATKT)		
	Aper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
		ase select Par	per details which y		University F	Assessment,CA - Co	llege Assessm	nent)			
SN	Paper Code	H		Paper Name				AM - AT			
1 83001 Financial Accounting and Audit					nting		Th-U/				
2				ting X - Cost Accounting			Th-U/				
3 83013 Business Economics VI							Th-U/				
4 83014 Commerce VI 5 83015 Direct and Indirect Taxation Paper II								Th-UA [] Th-CA []			
5											
6		Investment A		olio Management Paper II			Th-C		_		
Convocation Fee Exam Form Late Fe				Fee It	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee		Total:								
Paym	nent Details:	Amount Recei	eived:	Colle	eae Receipt	No. and Date:					
DD N			MICR No:		DD Date:		Bank				
	er Preference (Code/Na										
	e Preference (Code/Na	•					•				
	•		Evaluations / The C	Controller Of Examination),			Place:	Vidyavihar		
				nination. I have remitted t					,		
				complete and correct to tribed for the examination				Date:			
reque	est for any special conc	cession such	as change in time	or day fixed for university	y Examinatio	on etc. on religious o	r any				
		that in the eve	ent of any informati	ion being found false or in	ncorrect, my	candidature is liable	e to be				
Carice	elled or rejected.						!	St	tudent's Signature		
Decla	aration by Principal/HO	D/Chairperso	on								
respo	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 purse/term work (if any) according to university rules.										
				1							
Place):						1				
				-			1				
Date:							1				
				College Staf	ff 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination form 109682	n No.:	Division/Section:	Roll No	o.:	P-P-Doshi	
:	2017016400850632		Eligible		III				P-4-003	
nstrı	ıction Medium:	•				Nationality:	India		•	
				Student's Perso	onal Informati	on				
Stud	ent's Name: DOSHI	PRASHIL PA	ARAS NAYANA			Mother's Name: Na	AYANA		Gender: Male	
Nam	e in Vernacular Langua	ige:दोशी प्रशी	ल पारस नयना							
Addr	ess: A/36 NILESH BH	UVAN GOGF	RASSWADI GATE	DOMBIVLI (EAST) 421	201					
City:	DOMBIVLI, Taluka: Ka	lyan, District	: Thane, State: Mal	harashtra, PIN: 421201						
Telep	phone no.:		Mob	ile no: 919892968840	no: 919892968840 Email : prashildoshi86@gmail.com					
OOB	: Jan 02, 1997	Cat	tegory: Open		Physically	Handicap: No				
Previ	ous Latest Examination	n Details: Sei	m IV(Regular-Rev1	(6)	Exam Even	t: Apr-2019	Sea	t No: 02	35720 (Status: ATKT)	
	xam 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	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting		Th-U	A[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-U	A[]		
3	83013	Business Ec	onomics VI				Th-U	A[]		
4	83014	Commerce V	/I			A[]				
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]		
6	83023	Investment A	Analysis and Portfo	lio Management Paper	II		Th-C	A[]		
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:	Col	lege Receipt	No. and Date:				
DD N		unount ricco	MICR No:		DD Date:	140. drid Date.	Bani	k.		
	er Preference (Code/N	ame).	Innortite.		DD Date.					
	e Preference (Code/Na									
	<u> </u>	<u> </u>		ontroller Of Examinatio	n.			Place:	Vidyavihar	
				nination. I have remitted		ed fee for the same.	I hereby	riace.	viuyaviilai	
decla	re that all statement m	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	ground. I understand t			on being found false or						
canc	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	D/Chairners	on					<u> </u>	duonico olgnataro	
		-		me. The information p	rinted in the fo	orm is correct to the	best of my kr	nowledge	e I also undertake the	
respo	onsibility of fulfillment/re	ectification of	f the information. H	e/she is regular student	of this Collec	ge and has complete	d the require	d attend	ance and practical	
cour	se/term work (if any) ac	cording to ur	iversity rules.							
-										
Place).									
Date				College St	aff Signature		Spol	and Sign	nature of	
				College Sta	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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	ibility Status:	Examination for 109683		Division/Section:	Roll No	0.:	ching	
:	2017016400850694		Eligible						noug	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: PARM	MAR CHIRAG	SANJAY			Mother's Name: VA	ANITA	(Gender: Male	
Nam	e in Vernacular Langua	age:પરમાર ચિ	ોરાગ સંજય ———							
	ess: ROOM NO.23 4 F				NAGAR NO.3 V	VAGLE ESTATE TH	ANE WEST			
	THANE, Taluka: Than	າe, District: Th								
	phone no.:		Mob	oile no: 91992052642	25	Emai	il : chiragspar	rmar99@)gmail.com	
	: Dec 18, 1999		tegory: Open			Handicap: No				
								at No: 728	83462 (Status: ATKT)	
	n form appearance typ									
	Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN	Paper Code	<u> </u>		Paper Nam					AM - AT	
1	83001			ting IX - Financial Acc			Th-U	.,		
2	83007			ting X - Cost Account	ting		Th-U			
3 83013 Business Economics VI								JA []		
4 83014 Commerce VI Th-UA []										
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	83023	Investment P		olio Management Pap			Th-C			
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	ı Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ived:	(College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Banl	k:		
Cent	er Preference (Code/N	Vame):	т							
Venu	ue Preference (Code/N	lame):								
To, C	Director, Board of Exan	mination and F	Evaluations / The C	controller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres									
	are that all statement me agone through the sylla							Date:		
reque	est for any special con-	ncession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
other	r ground. I understand elled or rejected.	that in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be			
Jane	alleu or rejecteu.							St	tudent's Signature	
Decla	aration by Principal/HC	OD/Chairperso	on							
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 sponsibility 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	э:						1			
				_			1			
Date	:						1			
				College	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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligibility Status:	Examination forr 109684	n No.:	Division/Section:	Roll No	.:			
	2017016400850713	Eligible						ACCORDING TO A STATE OF THE STA		
nstrı	uction Medium:	•			Nationality:	India				
			Student's Pers	onal Informati	on					
Stud	ent's Name: BHAN L	JSHALI AJAY NARESH			Mother's Name: JA	YASHREE		Gender: Male		
Nam	e in Vernacular Langua	ge:અજય નરેશ ભાનુશાલી								
٩ddr	ess: 1/47 LIMANI BHU	VAN SAINATH NAGAR LBS N	1ARG							
City:	MUMBAI, Taluka: Mun	nbai, District: Mumbai City, Stat	e: Maharashtra, PIN: 40	00086						
ГеІеј	ohone no.:	Mob	ile no: 918767119955		Emai	l : bhanushali	dhiren@	gmail.com		
OOB	: Feb 20, 1999	Category: Open		Physically	Handicap: No					
Prev	ious Latest Examination	Seat	: No: 701	4630 (Status: ATKT)						
Exam 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 Name					AM - AT		
1	83001	Financial Accounting and Audit	ing IX - Financial Accoι	ınting		Th-U	۹[]			
2	83007	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	۹[]			
3 83013 Business Economics VI										
4	83014	Th-U	٩[]							
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []									
Conv	rocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee	Total:								
Payn	nent Details:	Amount Received:	Col	lege Receipt I	No. and Date:					
DD N		MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/N	ame):				I				
/enu	ie Preference (Code/Na	ame):								
Го, С	irector, Board of Exam	ination and Evaluations / The C	ontroller Of Examination	n,			Place:	Vidyavihar		
		ent myself for the ensuing exar ade in this application are true,					Date:			
nave	gone through the sylla	bus and the list of books prescr	ibed for the examination	n for which I a	m appearing. I shall	not				
		cession such as change in time that in the event of any informat								
	elled or rejected.	and in the event of any mierman	on boing round raise of	moon oot, my	odridiadia o lo liable	, 10 20				
							Stu	udent's Signature		
	aration by Principal/HO	-								
		nized by the College staff and by ectification of the information. H								
	urse/term work (if any) according to university rules.									
Place	e:									
			_							
Date	:					_				
			College St	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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			Examination form 109685		Division/Section:	Roll No	u.:	Mastry		
:	2017016400850721	Eligible						Francisco Supranagan		
nstru	ıction Medium:				Nationality:	India				
			Student's Perso	onal Information	on					
Stud	ent's Name: PATEL	MAITRY CHUNILAL			Mother's Name: JY	OTI		Gender: Female		
Nam	e in Vernacular Langua	ge:पटेल मैत्री चुनीलाल								
٩ddr	ess: B/502, Atlantis Ap	oartment Kasrwadavli G.B Road	d Thane (W)							
City:	Thane, Taluka: Thane,	District: Thane, State: Maharas	shtra, PIN: 400615							
ГеІер	phone no.:	Mob	ile no: 919833231823		Emai	l : maitrypatel	13@gma	ail.com		
	: Aug 13, 1999	Category: Open		Physically Exam Event	Handicap: No					
	ous Latest Examination	t No: 727	73959 (Status: ATKT)							
	xam 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		Financial Accounting and Audit				Th-U/				
2		Financial Accounting and Audit	ing X - Cost Accounting			Th-U/				
3 83013 Business Economics VI										
4 83014 Commerce VI Th-UA []										
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6		Investment Analysis and Portfo		1		Th-C/		_		
	ocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee	Total:								
Payn	nent Details:	mount Received:	Col	lege Receipt I	No. and Date:					
N DC	lo:	MICR No:	•	DD Date:		Bank	:			
Cent	er Preference (Code/Na	ame):				•				
/enu	e Preference (Code/Na	ame):								
Го, С	irector, Board of Exam	ination and Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar		
		ent myself for the ensuing exan ade in this application are true,					Date:	-		
		bus and the list of books prescr								
		ession such as change in time hat in the event of any informat								
	elled or rejected.	nat in the event of any informat	on being lound laise of	incorrect, my	Carididature is liable	e to be				
	•						Sti	udent's Signature		
	aration by Principal/HO									
This	form is carefully scrutir	ized by the College staff and by	r me. The information p	rinted in the fo	orm is correct to the	best of my kno	owledge 1 attenda	. 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) :									
			_							
Date				" • •			,			
			College St	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 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN: Eligibility Status:		bility Status:	Examination form No.: 109686		Division/Section: Roll No		.:	+ allund	
	2017016400851063		Eligible						1	
Instr	uction Medium:	!				Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stud	ent's Name: RATHO	D PRAMILA	DEVJI			Mother's Name: Al	NUSAYA	(Gender: Female	
Nam	e in Vernacular Langua	ige:राठोड प्रमि	ला देवजी							
Addr	ess: B.NO-01, ROOM	NO-502 R.B.1	COLONY V.J.B	MARG, NEW CHIKU	WADI					
City:	MUMBAI, Taluka: Kurl	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, P	N: 400043					
Tele	phone no.:		Mob	ile no: 91771087032	9	Emai	l : pramila521	999@gr	nail.com	
DOB	: Feb 05, 1999	Cat	egory: Reserved (ST)	Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 727	73921 (Status: ATKT)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ise select Pa _l	oer details which y	ou want to appear (L	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN Paper Code Paper Name									AM - AT	
1 83001 Financial Accounting and Auditing IX - Financial Accounting								۹[]		
2 83007 Financial Accounting and Auditing X - Cost Accounting								۹[]		
3 83013 Business Economics VI Th-UA []										
4	83014	Commerce V	7				Th-U	۹[]		
5	83015	Direct and In	direct Taxation Pa	oer II			Th-C/	۹[]		
6	6 83023 Investment Analysis and Portfolio Management Paper II Th-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	ved:		ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
	ue Preference (Code/Na									
	Director, Board of Exam	•	valuations / The C	ontroller Of Examina	tion.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	l lucc.	Vidyaviilai	
decla	are that all statement m	ade in this ap	plication are true,	complete and correct	to the best of n	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond									
othe	r ground. I understand t									
canc	elled or rejected.							Stı	udent's Signature	
Decl	aration by Principal/HO	D/Chairperso	n							
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	e:									
Date	ate: College Staff Signature Seal and Signature of 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 2021 event.

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	PRN:	Eligi	bility Status:	Examination form 109687		Division/Sectio	n: R	oll No.:	Jax Storte M
:	2017016400851202		Eligible						J. Aritis
Instru	ıction Medium:					Nationality:	India		
				Student's Person	nal Informati	on			
Stude	ent's Name: KARGA	THARA NID	HI HARSHAD			Mother's Nam	e: REKHABE	N	Gender: Female
Nam	e in Vernacular Langua	ige:કરગથરા (નેધિ હર્ષદ						
Addr	ess: 1/1 ganga wadi I.l	o.s road ghat	koper (west)						
City:	MUMBAI, Taluka: Mun	nbai, District:	Mumbai City, State	e: Maharashtra, PIN: 400	086				
Telep	hone no.:		Mob	ile no: 917045828956		E	Email : ambil	a@gmail.co	m
DOB	: Jul 13, 2000	Cat	egory: Open		Physically	Handicap: No			
Previ	ous Latest Examinatio	n Details: Ser	n II(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat No: 71	90197 (Status: Pass)
Exan	n form appearance type	e: Fresher							
Pape	r Details: Plea	ise select Pa _l	oer details which y	ou want to appear (UA -	University A	ssessment,CA	- College As	sessment)	
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accour	nting			Th-UA[]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting				Th-UA[]	
							Th-UA[]		
4	83014	Commerce V	7					Th-UA[]	
5	83015	Direct and In	direct Taxation Pa	per II				Th-CA[]	
6	6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []								
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee		Examinatio	n Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	mount Recei	ved:	Colle	ege Receipt	No. and Date:			
DD N			MICR No:	<u> </u>	DD Date:			Bank:	
Cent	er Preference (Code/N	ame):							
	e Preference (Code/Na								
	,		valuations / The C	controller Of Examination	١,			Place:	Vidyavihar
l requ decla	uest permission to pres	ent myself for ade in this ap	r the ensuing exan	nination. I have remitted complete and correct to ibed for the examination	the prescribe	ny knowledge ai	nd belief. I		Viayaviilai
reque	est for any special cond	ession such	as change in time	or day fixed for university on being found false or i	/ Examination	n etc. on religio	us or any		
	elled or rejected.		•	<u> </u>	•			S	tudent's Signature
Decla	aration by Principal/HO	D/Chairperso	n						
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the 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	9 :								
Date				College Sta	ff Signature			Seal and Sig	nature of



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN:	Eligibility Status:	Examination form 270635	า No.:	Division/Section:	Roll No	0.:	1 . 20+1		
2017016400851353	Eligible		ı	Α	108		Lwati		
Instruction Medium:	•			Nationality:	India				
		Student's Perso	onal Informati	on					
Student's Name: TRIVED	OI SWATI HARENDRA			Mother's Name: PF	RITI		Gender: Female		
Name in Vernacular Langua	 ge:त्रिवेदी स्वाती हरेंद्र								
Address: A/406 JAI LAXMI k	KRUPA KALYAN ROAD , DOM	BIVLI EAST							
City: MUMBAI, Taluka: Kalya	an, District: Thane, State: Maha	arashtra, PIN: 421201							
Telephone no.:	Mol	oile no: 917045091710		Email	l : swati.h.triv	/edi@gm	ail.com		
DOB: Oct 20, 1999	Category: Open		Physically	Handicap: No					
Previous Latest Examination	n Details: Sem VI [2C00146](Re	egular-Rev16)	Exam Even	t: Apr-2020	Sea	at No: RD	P1020432 (Status: Fail)		
Exam form appearance type	am form appearance type: Repeater								
Paper Details: Pleas	se select Paper details which y	ou want to appear (UA	- University A	ssessment,CA - Col	lege Assess	ment)			
SN Paper Code		Paper Name					AM - AT		
1 83007 I	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	JA []			
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	Examination Fees			
Mark Statement Fee Total:									
December 1	··· at Deserved.	Call	In the December	No. and Date.					
	mount Received:		<u> </u>	No. and Date:	Dar	 			
DD No:	MICR No:		DD Date:		Ban	K:			
Center Preference (Code/Na	,								
Venue Preference (Code/Na	ame): ination and Evaluations / The C					T			
				ad foo for the same i	l harahy	Place:	Vidyavihar		
declare that all statement ma	ent myself for the ensuing exar ade in this application are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:			
0 ,	bus and the list of books prescression such as change in time					—			
	hat in the event of any informat								
cancelled or rejected.						l Str	udent's Signature		
Declaration by Principal/HOI	D/Chairnerson						udent's dignature		
	ized by the College staff and b	v me. The information or	rinted in the fo	orm is correct to the	hest of my kr	nowledge	Lalso undertake the		
responsibility of fulfillment/re	ectification of the information. H								
course/term work (if any) ac	urse/term work (if any) according to university rules.								
B! .									
Place:									
- .		_							
Date:		College St:	off Signature		Seal	and Sign	nature of		
		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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:	Examination form N 109688	O.: Division/Section:	Roll No.:				
2017016401211055 Eligible				020			
Instruction Medium:	•	Nationality:	India				
	Student's Persona	I Information	,				
Student's Name: SOLANKI DIVYA VIJAY		Mother's Name: F	POONAM	Gender: Female			
Name in Vernacular Language:સોલંકી દિવ્ય વિજય							
Address: 50/1545,B WING SHREE GANESH PRASAD	CHSLTD NEHRU NAGAR, KI	JRLA (EAST)					
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburba	<u> </u>	00024					
1	Mobile no: 918652500693	no: 918652500693 Email : divya11solanki@gmail.com					
DOB: May 11, 1999 Category: Open		Physically Handicap: No					
Previous Latest Examination Details: Sem IV(Regular-	ev16) E	xam Event: Nov-2019	Seat	No: 7343328 (Status: Pass)			
Exam form appearance type: Fresher							
Paper Details: Please select Paper details whi		niversity Assessment,CA - C	ollege Assessm	ent)			
SN Paper Code	Paper Name			AM - AT			
	iditing IX - Financial Accounting	ng	Th-UA	.,			
2 83007 Financial Accounting and A	Th-UA						
3 83013 Business Economics VI			Th-UA				
4 83014 Commerce VI	.[]						
5 83015 Direct and Indirect Taxation	· ·		Th-CA				
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []							
Convocation Fee Exam Form L	te Fee Ex	cam Form Super Late Fee	Exam	nination Fees			
Mark Statement Fee Total:							
Payment Details: Amount Received:	Colleg	e Receipt No. and Date:					
DD No: MICR No:	DC) Date:	Bank:				
Center Preference (Code/Name):	1		'				
Venue Preference (Code/Name):							
To, Director, Board of Examination and Evaluations / T	e Controller Of Examination,			Place: Vidyavihar			
I request permission to present myself for the ensuing of				Deter			
declare that all statement made in this application are t have gone through the syllabus and the list of books pr			Jones I	Date:			
request for any special concession such as change in t							
other ground. I understand that in the event of any infor cancelled or rejected.	nation being found false or inc	correct, my candidature is liab	le to be				
cancelled of rejected.				Student's Signature			
Declaration by Principal/HOD/Chairperson							
This form is carefully scrutinized by the College staff ar responsibility of fulfillment/rectification of the informatio course/term work (if any) according to university rules.							
Place:							
1 idoc.							
Date:							
Date:							



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	ibility Status:	Examination fo 109689	9	Division/Section:	Roll No) .:	Parel	
2	2017016401411491	l	Eligible				l	_!		
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: BHANL	JSHALI URM	II MATHURADAS			Mother's Name: SA	AVITRI		Gender: Female	
	e in Vernacular Langua									
	ess: SULEMAN DAWC									
<u> </u>	MUMBAI, Taluka: Kurl	a, District: Μι								
	phone no.:			oile no: 919619796146			I : URMIBHAN	NUSHAL	LI9@GMAIL.COM	
	: Apr 08, 2000		tegory: Open			Handicap: No				
,									90156 (Status: Pass)	
	aper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
		ase select Par	per details which y			ssessment,CA - Col	Ilege Assessn	nent)		
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6		Investment A		lio Management Pape			Th-C/		_	
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Payn	nent Details:	Amount Recei	ived:	С	College Receipt I	No. and Date:				
DD N	10:	-	MICR No:		DD Date:		Bank	<u></u>		
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Venu	ue Preference (Code/Na	ame):								
	Director, Board of Exam	•	Evaluations / The C	controller Of Examina	tion,			Place:	Vidyavihar	
	uest permission to pres							<u>_</u>	,	
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other	r ground. I understand t elled or rejected.	that in the eve	ent of any informate	on being found false	or incorrect, my	candidature is liable	e to be			
Carro	alled of rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
respo	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 purse/term work (if any) according to university rules.									
										
Place	э :									
Date:	·						ĺ			
Date:				College 9	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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 109690		Division/Section:	Roll No) .:	12.	
:	2017016401411684		Eligible						(A)	
nstrı	uction Medium:					Nationality:	India		,	
				Student's Per	rsonal Informati	on				
Stude	ent's Name: MAV K	KAJALBEN VA	SANTLAL			Mother's Name: R	AMILABEN		Gender: Female	
Nam	e in Vernacular Langua	age:माव काजर	लबेंन वसंतलाल ———							
Addr	ess: 407,BLDG NO1, E	B- WING SET	HIYA NAGAR ,90	FEET ROAD MOHILI	VILLAGE					
<u> </u>	MUMBAI, Taluka: Kur	la, District: Μι								
	phone no.:		Mob	oile no: 918108859020)	Emai	I : BHANUSH	IALIKAJA	AL4@GMAIL.COM	
	3: Jun 20, 2000		tegory: Open		Physically	Handicap: No				
									43333 (Status: Fail)	
	cam 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 Name					AM - AT	
1	83001	+		ting IX - Financial Acco			Th-U	.,		
2	83007			ting X - Cost Accounting	ng		Th-U			
								Th-UA[]		
4 83014 Commerce VI Th-UA										
5	83015		ndirect Taxation Pa				Th-C			
6	83023	Investment A		lio Management Pape			Th-C			
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details:	Amount Recei	ived:	C	ollege Receipt I	No and Date:				
DD N			MICR No:		DD Date:		Bank	k:		
	ter Preference (Code/N		<u> </u>							
	ue Preference (Code/N									
	Director, Board of Exan			controller Of Examinat	tion,			Place:	Vidyavihar	
l requ	uest permission to pres	sent myself for	or the ensuing exan	mination. I have remitte	ed the prescribe			<u>_</u>	Viayaviiai	
	are that all statement m							Date:		
	e gone through the sylla est for any special con-									
other	r ground. I understand									
canc	elled or rejected.							St	udent's Signature	
Deck	aration by Principal/HC	OD/Chairperso	on							
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 purse/term work (if any) according to university rules.									
Place	э:									
Date:	vi:									
Suic.				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 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligi	bility Status:	Examination form	n No.:	Division/Section:	Roll No) .:	211
;	2017016401411734		Eligible		III				Touchel
Instru	uction Medium:					Nationality:	India		•
				Student's Perso	onal Informati	on			
Stud	ent's Name: PATEL	DARSHIL M	UKESH			Mother's Name: KA	ALPANA	(Gender: Male
Nam	e in Vernacular Langua	ıge:पटेल दर्शीत	त्र मुकेश						
Addr	ess: G4, SHANTINIKE	TAN NEAR S	AI LILA HALL CHI	TRANJAN NAGAR, RA	JAWADI GH	ATKOPAR EAST			
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	State: Maharashtra, PIN	: 400077				
Tele	ohone no.:		Mob	ile no: 918652134007	no: 918652134007 Email : darshilpateldp19@gmail.com				
	: Nov 19, 1999		egory: Open		Physically	Handicap: No			
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 72	83466 (Status: Pass)
	n form appearance type								
_		ise select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessı	ment)	
SN	Paper Code			Paper Name					AM - AT
1				ing IX - Financial Accou			Th-U		
2				ing X - Cost Accounting	l		Th-U		
3		Business Eco					Th-U		
4 83014 Commerce VI Th-UA []									
5			direct Taxation Pa	per II			Th-C		
6	-	Export Marke	1				Th-C		
	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees
Mark	Statement Fee		Total:						
Payn	nent Details:	mount Recei	ived:	Col	lege Receipt	No. and Date:			
DD N	lo:		MICR No:		DD Date:		Banl	C :	
Cent	er Preference (Code/Na	ame):					•		
Venu	ie Preference (Code/Na	ame):							
				Controller Of Examinatio				Place:	Vidyavihar
				nination. I have remitted complete and correct to				Date:	
have	gone through the sylla	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 universi ion being found false or					
	elled or rejected.		,						da.ada Cianada.aa
Daal	anation by Dringing!/HO	D/Chairmara	\ <u> </u>					51	udent's Signature
	aration by Principal/HO	-		/ me. The information p	rintad in the f	arm is correct to the	hoot of my kn	oulodae	Lalaa undartaka tha
				e/she is regular student					
cour	se/term work (if any) ac	cording to un	iversity rules.	-					
Dles	\								
Place	5 .								
Dete		<u></u>							
Date				College Staff Signature		Seal and Signature of			
				College Stall Signature			Principal/HOD/Chairperson		



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 109692		Division/Section:	Roll No	.:	Shaktal	
	2017016401412045		Eligible							
nstrı	uction Medium:	-				Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stud	ent's Name: THAK	(AR DRASHT	I VIJAY			Mother's Name: H	EMA	(Gender: Female	
Nam	e in Vernacular Langua	age:drashti								
٩ddr	ess: A204 aasman soo	ciety bhujbal v	adi rambaug lane	no 2						
City:	kalyan, Taluka: Kalyar	n, District: Tha	ane, State: Mahara	shtra, PIN: 421301						
Tele	phone no.:		Mob	ile no: 91876736669	3	Ema	il : drashti19@	gmail.c	om	
DOB	: Nov 19, 1999	Ca	tegory: Open	Handicap: No						
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019								No: 72	73916 (Status: Pass)	
Exan	am form appearance type: Fresher									
Pape	per Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)									
SN	Paper Code			Paper Nam	Paper Name				AM - AT	
1	83001	Financial Ac	counting and Audit	ing IX - Financial Acc	counting		Th-UA	۹[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounti	ng		Th-UA	۹[]		
3 83013 Business Economics VI							Th-UA	۹[]		
4 83014 Commerce VI Th-UA []								۹[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	۹[]		
6	83023 Investment Analysis and Portfolio Management Paper II Th-CA []									
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
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	er Preference (Code/N									
	e Preference (Code/N	,	l l / Th		••					
	Director, Board of Exam					16 6 11		Place:	Vidyavihar	
decla	uest permission to pres are that all statement m gone through the sylla	nade in this ap	oplication are true,	complete and correct	to the best of m	ny knowledge and be	elief. I	Date:		
equ	est for any special cond	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			
Jano	oned of rejected.							St	udent's Signature	
Deck	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 ourse/term work (if any) according to university rules.									
Place										
Date	:			2 "	O1- ((O)			0.		
				College	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 2021 event.

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Examination form No.:

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PRN: Eligibility Status:				Examination form 109693	No.:	Division/Section:	Roll No	ว.:		
2	2017016401412053		Eligible			1				
nstrı	uction Medium:	-				Nationality:	India			
				Student's Persor	nal Informati	ion				
Stude	ent's Name: CHUDA	ASAMA AAK/	ASH MUKESHBHA	Al .		Mother's Name: TA	ANUJA	C	Gender: Male	
Name	e in Vernacular Langua	age:चुडासमा 3	गकाश मुकेशभाई							
				GLOBAL TALENT HIGH E, WAGLE I.E., THANE	I SCHOOL,	THANE, WAGLE I.E	, THANE 32	, GURU	DATT NIWAS, SHIVAI	
City:	MUMBAI, Taluka: Thar	ne, District: T	hane, State: Maha	rashtra, PIN: 400604						
Teler	phone no.:		Mob	oile no: 917303999023		Emai	il : AAKASHC	HUDAS/	AMA8@GMAIL.COM	
DOB	: Apr 07, 2000	Cat	tegory: Open		Physically	y Handicap: No				
Previ	ous Latest Examination	n Details: Ser	n II(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Sea	t No: 719	90167 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	ase select Par	per details which y	ou want to appear (UA -	· University /	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Accoun	nting		Th-U	A[]		
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounting			Th-U	A[]		
3	83013	Business Eco	onomics VI				Th-U	h-UA []		
4	83014	Commerce V	4				Th-U	A[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	Ā[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U	JA [] ;Th-0	CA[]	
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decla	re that all statement m	nade in this ap	oplication are true,	nination. I have remitted t complete and correct to t ibed for the examination	the best of m	my knowledge and be	elief. l	Date:		
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	ground. I understand t elled or rejected.	that in the eve	ent of any informati	ion being found false or ir	ncorrect, my	/ candidature is liable	e to be			
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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.									
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Place Date:				College Staf	ff Signature			and Sign	nature of D/Chairperson	



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Examination form No.:

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PRN: Eligibility Status:			ibility Status:	109694	TNO	Division/Section:	Roll No) .:	ned by must
_:	2017016401426583	l	Eligible		(III				p -0 200
nstrı	uction Medium:	-				Nationality:	India		
				Student's Perso	onal Informati	ion			
Stud	ent's Name: BHANU	JSHALI ZEEL	L HARISH			Mother's Name: DI	PTI		Gender: Female
Nam	ne in Vernacular Langua	ıge:ઝીલ ભાનુ	Jશાલી 						
Addr	ress: 1 RAMCHANDRA	SMURTI JAI	IHIND COLONY						
City:	DOMBIVLI, Taluka: Kal	lyan, District	:: Thane, State: Ma	harashtra, PIN: 421201					
	phone no.:			oile no: 919167464131			il : zeelhb@gr	mail.com	n
	3: Apr 14, 1999		itegory: Open		Physically Handicap: No				
	rious Latest Examination		m I(Regular-Rev16	<i>i</i>)	Exam Even	nt: Nov-2019	Sea	t No: 70	114663 (Status: ATKT)
	m form appearance type								
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2				ting X - Cost Accounting	<u>i</u>		Th-U		
3		Business Eco					Th-U		
4		Commerce V				Th-U			
5			ndirect Taxation Pa	•			Th-C		
6		Investment A		olio Management Paper I			Th-C		
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees
Mark	Statement Fee		Total:						
Payn	ment Details: A	Amount Recei	 ived:	Coll	lege Receipt	No. and Date:			
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Cent	ter Preference (Code/Na	ame):	.1			-			
Venu	ue Preference (Code/Na	ame):							
To, C	Director, Board of Exam	ination and E	Evaluations / The C	Controller Of Examination	'n,			Place:	Vidyavihar
				mination. I have remitted				Date:	-
have	gone through the syllat	bus and the l	list of books prescri	complete and correct to ribed for the examination	n for which I a	am appearing. I shall	not	Date.	
reque	est for any special conc	cession such	as change in time	or day fixed for universit	ity Examinatio	on etc. on religious or	r any		
	r ground. I understand the celled or rejected.	hat in the eve	ent of any informati	ion being found false or	incorrect, my	candidature is liable	to be		
JC							_	St	tudent's Signature
	aration by Principal/HOI	-		_	_		_	_	
				y me. The information pr					
	onsibility of fulfillment/re se/term work (if any) ac			le/she is regular student	: of this Colleç	Je and has complete	d the required	d attenua	ance and practical
	,,,								
Place	e:						l		
				_			l		
Date:	g:								
				College Staff Signature		Seal and Signature of			
							Princ	.ipal/HO	D/Chairperson



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_	PRN:	Eligi	ibility Status:	Examination fo 109695	5	Division/Section:	Roll No).:	Thalak	
	2017016401951605	l	Eligible				l	!	13	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: PANCH	HAL ZHALAK	MUKESH			Mother's Name: Cl	HETNA		Gender: Female	
Nam	e in Vernacular Langua	age:गुजराती								
Addr	ess: A/1903 GEMINI H	IIRANANDAN	II MEADOWS PO							
City:	THANE , Taluka: Than	ne, District: Th								
	phone no.:		Mot	oile no: 917021912084	4	Emai	il : PZHALAK@	@GMAIL	COM	
	: May 01, 2000		tegory: Open			Handicap: No				
	ious Latest Examinatio		m IV(Regular-Rev	(6)	Exam Even	nt: Nov-2019	Seat	t No: 734	43354 (Status: ATKT)	
	n form appearance type									
		ase select Par	per details which y	ou want to appear (U.		ssessment,CA - Co	Ilege Assessn	nent)		
SN	Paper Code	<u> </u>		Paper Name					AM - AT	
1	83001			ting IX - Financial Acco			Th-U/			
2	83007			ting X - Cost Accounting	ng		Th-U/			
3	83013	Business Eco					Th-U/			
4	83014	Commerce V						A[]		
5	83015		ndirect Taxation Pa	•			Th-C/			
6	83023	Investment A	, , , , , , , , , , , , , , , , , , , 	lio Management Pape		<u> </u>	Th-C/		_	
	vocation Fee		Exam Form Late	<u>Fee</u>	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ived:	С	College Receipt I	No. and Date:		-		
DD N	10:		MICR No:	•	DD Date:		Bank	C:		
Cent	er Preference (Code/N	lame):					•			
Venu	ue Preference (Code/Na	lame):								
To, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar	
decla	uest permission to pres 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:		
	egone through the sylla est for any special cond							\vdash		
other	r ground. I understand t									
canc	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	DD/Chairperso	on							
This 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	3 :									
Date	:			0 11 00 11 00		Carl	- 1 Ci			
				College Staff Signature		Seal and Principa		-	nature of D/Chairperson	



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	PRN:	Eligib	oility Status:	Examination 1096		Division/Section:	Roll No.	::	1	
2	2017016402070917		Eligible							
Instru	ction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stude	ent's Name: PATWA	SHWETA DI	ILIP			Mother's Name: St	JMITA	(Gender: Female	
Name	e in Vernacular Langua	ge:१वेता दिली	प पटवा							
Addre	ess: ram nagar lal killa s	shahdev seth	chawl							
City:	mumbai, Taluka: Mumb	ai, District: M	lumbai City, State	: Maharashtra, PIN:	400086					
Telep	hone no.:		Mot	ile no: 9188286306	35	Emai	l : shanayadso	ouza287	@gmail.com	
DOB:	May 04, 1999	Cate	egory: Open		Physically	Handicap: No				
Previ	ous Latest Examination	Details: Sen	n IV(Regular-Rev	16)	Exam Event: Apr-2019 Seat No: 0236306 (Status: Pass)					
Exam	form appearance type	: Fresher								
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN	Paper Code			Paper Name					AM - AT	
1	83001 F	inancial Acc	ounting and Audit	ng IX - Financial Accounting				۹[]		
2	83007 F	inancial Acc	ounting and Audit	ing X - Cost Accour	ng X - Cost Accounting					
3	83013 E	Business Eco	nomics VI				Th-UA	۹[]		
4	83014	Commerce VI	<u> </u>					Th-UA[]		
5	83015 I	Direct and Inc	direct Taxation Pa	per II			Th-CA	۹[]		
6	83023 I	nvestment Aı	nalysis and Portfo	lio Management Pa	per II		Th-CA	۹[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
	.5."			-	0 "	N. 15 ·				
		mount Receiv			College Receipt	No. and Date:	lpi			
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/Na									
_	e Preference (Code/Na			andreller Of Francis				1		
	irector, Board of Exami						11 1.	Place:	Vidyavihar	
decla	lest permission to prese re that all statement ma gone through the syllat	ade in this ap	plication are true,	complete and corre	ct to the best of n	ny knowledge and be	elief. I	Date:		
reque	est for any special conc	ession such a	as change in time	or day fixed for univ	ersity Examination	on etc. on religious of	r any			
	ground. I understand the	nat in the eve	nt of any informat	ion being found fals	e or incorrect, my	candidature is liable	e to be			
Carice	elled or rejected.							St	udent's Signature	
Decla	ration by Principal/HOI	D/Chairperso	n							
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	:									
Date:				College	e 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

Disciple 16



PRN: Eligibility Status:			109697	.I INO	Division/Section:	Roll No.	.:	@Patel.		
	2017016402758634	Eligible		l III						
Instr	uction Medium:	-			Nationality:	India				
			Student's Perso	onal Informatic	on					
Stud	ent's Name: PATEL	. TANISHAKA ANIL			Mother's Name: R	ITA	G	ender: Female		
Nam	e in Vernacular Langua	age:पटेल तनिष्का अनिल								
Addr	ess: JAY LAXMI COMF	PLEX A WING FLAT NO 405 GA	ONDEVI ROAD GHAT	TKOPAR WES	ST					
City:	MUMBAI, Taluka: Kurla	la, District: Mumbai Suburban, S	tate: Maharashtra, PIN:	400086						
Tele	phone no.:		ile no: 917039416593		Ema	il : tanishkapat	tel04@gn	nail.com		
DOB	3: Jan 01, 1900	Category: Reserved (S	ST)	Physically	Handicap: No					
		n Details: Sem II(Regular-Rev16	3)	Exam Event	: Apr-2019	Seat	: No: 0164	4590 (Status: Pass)		
	n form appearance type									
	er Details: Plea	ase select Paper details which yo	ou want to appear (UA	- University A	ssessment,CA - Co	llege Assessm	nent)			
SN	Paper Code		Paper Name				AM - AT			
1		Financial Accounting and Auditi			Th-UA					
2		Financial Accounting and Auditi	ng X - Cost Accounting		Th-UA					
3	83013	Business Economics VI								
4	83014	Commerce VI					Th-UA[]			
5	83015	Direct and Indirect Taxation Page	per II			Th-CA	۹[]			
6	83016	Export Marketing Paper II				Th-CA	۹[]			
Conv	vocation Fee	Exam Form Late F	Fee	Exam Form S	Super Late Fee	Exan	mination F	ees		
Mark	Statement Fee	Total:								
Pavr	ment Details:	Amount Received:	Coll	lege Receipt N	No and Date:					
DD N		MICR No:		DD Date:	10. drid Date.	Bank				
	ter Preference (Code/Na			DD Bato.			•			
	ue Preference (Code/Na									
	`	nination and Evaluations / The C	ontroller Of Examinatio				Place:	Vidyavihar		
		sent myself for the ensuing exam			d fee for the same.	I hereby	li lace.	viuyaviilai		
decla	are that all statement m	nade in this application are true, o	complete and correct to	the best of m	y knowledge and be	elief. I	Date:			
		abus and the list of books prescri								
othe	r ground. Í understand t	that in the event of any information								
canc	elled or rejected.						Stu	dent's Signature		
Decl	aration by Principal/HO	D/Chairperson								
		nized by the College staff and by	me. The information pr	rinted in the fo	orm is correct to the	hest of my kno	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	ccording to university rules.								
DI										
Place	ð:									
_										
Date	:		College Staff Signature Seal		and Sign	aturo of				
			College Staff Signature			Seal and Signature of Principal/HOD/Chairperson				



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

 $\label{policy equation for Examination of Summer Session 2021 event.} \\$

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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PRN: Eligibility Status:			bility Status:	Examination fo 109698		Division/Section:	Roll No	o.:	(I) overes	
;	2017016402758642		Eligible						Bound	
nstru	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stud	ent's Name: SHARM	MA JAGRUTI	I KAMAL			Mother's Name: IN	IDRA	(Gender: Female	
Nam	e in Vernacular Langua	age:जागृती								
٩ddr	ess: 12 RUKHMANI NI	IWAS KESHA	VJI NAGAR BHAT	TIPADA ROAD BHAI	NDUP WEST					
City:	MUMBAI, Taluka: Mur	nbai, District:	Mumbai City, State	e: Maharashtra, PIN:	400078					
	ohone no.:		Mob	ile no: 917045700795	5	Ema	il : JAGRUTIS	SHARMA	14@GMAIL.COM	
DOB: Aug 26, 1999 Category: Open Physically Handicap: No										
	ious Latest Examinatio		m II(Regular-Rev1	3)	Exam Even	t: Nov-2019	Sea	t No: 719	90260 (Status: ATKT)	
	n form appearance type									
		ase select Pa	per details which y	ou want to appear (U		Assessment,CA - Co	llege Assess	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001			ing IX - Financial Acco			Th-U			
2	83007		-	ing X - Cost Accounting	ng		Th-U			
3	83013	Business Eco					Th-U			
4	83014	Commerce V					Th-U			
5	83015		direct Taxation Pa	per II			Th-C			
6	83016	Export Marke	eting Paper II		1		Th-C		_	
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Vlark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ived:	С	College Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Ban	K:		
Cent	er Preference (Code/N	lame):	1				l .			
√enu	ie Preference (Code/N	ame):								
Γο, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres							Data	•	
	are that all statement magent gone through the sylla							Date:		
eque	est for any special cond	cession such	as change in time	or day fixed for univer	rsity Examination	n etc. on religious o	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 liabl	e to be			
Julio	siled 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 stude	ent of this Collec	ge and has complete	ed the require	d attenda	ance and practical	
							<u> </u>			
Place	э :									
				_						
Date	• •									
				College Staff Signature		Seal and Signature of				
								Principal/HOD/Chairperson		



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Examination form No.:

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	PRN:	Eligibility Status:	Examination form No.: 109699	Division/Section:	Roll No	o.:				
	2017016402758673	Eligible						Harma		
nstr	uction Medium:				Nationality:	India				
			Student's Perso	onal Informati	on					
Stud	ent's Name: SHARN	MA HARSHVARDHAN JAGMOH	IAN		Mother's Name: AN	//RITA	C	Gender: Male		
Nam	e in Vernacular Langua	ge:शर्मा हर्षवर्धन जगमोहन								
Addr	ess: LAXMI NIWAS RC	OOM NO 192 NEAR MAHANAG	AR CO OP BANK KANI	NAMWAR NA	AGAR 2 VIKHROLI E	AST				
City:	MUMBAI, Taluka: Kurl	a, District: Mumbai Suburban, S	tate: Maharashtra, PIN:	400083						
Tele	ohone no.:	Mob	ile no: 919224393500		Email	l : harshvardl	nansharm	na3110@gmail.com		
ООВ	: Oct 31, 1999	Category: Open		Physically	Handicap: No					
Prev	ious Latest Examination	n Details: Sem IV(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	t No: 023	6323 (Status: Fail)		
Exar	n form appearance type									
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	83001	Financial Accounting and Auditi	ng IX - Financial Accou	nting		Th-U	A[]			
2	83007	Financial Accounting and Auditi	ng X - Cost Accounting			Th-U	A[]			
3	83013	Business Economics VI				Th-U	A[]			
4	83014	Commerce VI				Th-U	Th-UA[]			
5	83015	Direct and Indirect Taxation Page	per II			Th-C	A[]			
6	83023	Investment Analysis and Portfol	io Management Paper	II		Th-C	A[]			
Conv	ocation Fee	Exam Form Late I	-ee	Exam Form	Super Late Fee		mination	Fees		
Mark	Statement Fee	Total:			•					
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		mount Received:		<u> </u>	No. and Date:	lp	1			
OD N		MICR No:		DD Date:		Banl	K:			
	er Preference (Code/N									
	ie Preference (Code/Na	<u> </u>								
		ination and Evaluations / The C					Place:	Vidyavihar		
decla	are that all statement m	ent myself for the ensuing exam ade in this application are true, bus and the list of books prescri	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:			
equ	est for any special cond	ession such as change in time	or day fixed for universit	ty Examination	n etc. on religious or	any				
	rground. I understand t elled or rejected.	hat in the event of any informati	on being found false or	incorrect, my	candidature is liable	to be				
Janic	elled of rejected.						Stu	udent's Signature		
Decl	aration by Principal/HO	D/Chairperson								
esp	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	э:									
Date	:		College Sta	aff Signature			and Sign	ature of		



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PRN: Eligibility Status:			Examination for 10970		Division/Section:	Roll No	.:	. A		
:	2018016400678236		Eligible						- Learney	
Instru	uction Medium:	•				Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: PATEL	EJAJALI AY	AZALI			Mother's Name: SI	HABANA	(Gender: Male	
Nam	e in Vernacular Langua	age:पटेल इजा	जली अयजाली							
Addr	ess: LALLUBHAI COM	POUND BLD	G NO.69A ROOM	NO.105 VISHALGA	D,CO.OP.HAU.S	6O				
City:	MUMBAI, Taluka: Kurl	a, District: Mi	umbai Suburban, S	tate: Maharashtra, F	PIN: 400043					
Telep	ohone no.:		Mob	Emai	I : AJAAZ1304	4@GMA	IL.COM			
DOB	: Apr 13, 2001	Ca	tegory: Open	Handicap: No						
Previ	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33467 (Status: Pass)	
Exan	n form appearance type	e: 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	83001	Financial Ac	counting and Audit	ing IX - Financial Acc	ng IX - Financial Accounting					
2	83007	Financial Ac	counting and Audit	ing X - Cost Account	ng X - Cost Accounting					
3	83013	Business Ec	onomics VI				Th-U	۹[]		
4	83014	Commerce \	/I				Th-U	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	۹[]		
6	83016	Export Marke	eting Paper II				Th-C/	۹[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Rece	ived:		College Receipt	No. and Date:				
DD N	lo:		MICR No:	L	DD Date:		Bank	:		
Cent	er Preference (Code/N	ame):	•		.					
Venu	ie Preference (Code/Na	ame):								
To, C	Director, Board of Exam	ination and E	Evaluations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres							Doto		
	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 Examination	n etc. on religious o	any			
	ground. I understand telled or rejected.	that in the ev	ent of any informat	on being found false	or incorrect, my	candidature is liable	to be			
caric	elled of rejected.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutir									
	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.									
Jour										
Place	ə :									
				_						
Date	:									
				College Staff Signature				nature of		
				1	Soliogo Stali Signataro			Principal/HOD/Chairperson		



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PRN: Eligibility Status:				Examination fo 109701		Division/Section:	Roll No	.:	Sazid	
	2018016400906403		Eligible						Do Bui	
Instru	uction Medium:					Nationality:	India			
				Student's Per	sonal Informati	on				
Stud	ent's Name: SHAIK	H SAZID SHA	MIM			Mother's Name: Sa	ABIRA	(Gender: Male	
Nam	e in Vernacular Langua	ge:शेख सझि	द शमीम							
Addr	ess: AZAD NAGAR GL	LSHAN-E-B	AGDAD MASJID F	OOM NO. 24 GHAT	KOPAR WEST	•				
City:	MUMBAI, Taluka: Kurl	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, Pl	N: 400086					
Tele	ohone no.:		Mot	ile no: 919892322739)	Emai	ii : SHAHIDSH	IAIKH21	197@YAHOO.COM	
DOB	: Feb 12, 2000	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83576 (Status: ATKT)	
Exan	n 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	83001	Financial Acc	counting and Audit	ng IX - Financial Accounting				۹[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountir	ng		Th-U	٩[]		
3		Business Ec					Th-U			
4		Commerce V	<u> </u>				Th-UA []			
5			direct Taxation Pa	per II			Th-CA			
6	83016	Export Marke	eting Paper II				Th-CA	۹[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	mount Rece	ived:	C	ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank			
	er Preference (Code/Na	ame):								
	ie Preference (Code/Na									
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar	
	uest permission to pres								,	
	are that all statement m gone through the sylla							Date:		
	est for any special cond									
	ground. I understand t	hat in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be			
canc	elled or rejected.							St	udent's Signature	
Deck	aration by Principal/HO	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										
Dale				College S	Staff Signature				nature of D/Chairperson	



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'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination form 109702	n No.:	Division/Section:	Roll No	.:	Whend	
	2018016400906411		Eligible							
Instr	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: SHAIK	H MOHD UM	AID MOHD AZIM			Mother's Name: K	AISER JAHAN	1 (Gender: Male	
Nam	e in Vernacular Langua	ige:शेख मोहट	उमेद मोहद अझीम							
				D NEAR SALFIYA MAS	SJID DVSF	ROAD NO 2				
_	MUMBAI, Taluka: Thai	ne, District: T								
	ohone no.:		1	ile no: 919619044991	1	I	I : UMAIDSHA	AIKH290	5@GMAIL.COM	
	: May 29, 2001		tegory: Open	C)	, , , ,	Handicap: No		. N 700	20507 (01-1 - ATI/T)	
	ious Latest Examination n form appearance type		m III(Regular-Rev I	6)	Exam Even	t: Nov-2019	Seat	(NO: 728	33567 (Status: ATKT)	
			ner details which v	ou want to appear (UA	- University A	Assessment CA - Co	llene Assessn	nent)		
SN	Paper Code	100 001001 1 4	por dotallo Willon's	Paper Name	Omvorony /		1090710000011		AM - AT	
1	· · · · · · · · · · · · · · · · · · ·	Financial Ac	counting and Audit	ing IX - Financial Accou	ıntina		Th-U/	A []		
2				ing X - Cost Accounting			Th-U/			
3		Business Ec		<u> </u>	<u>'</u>			Th-UA []		
4	83014	Commerce \	/I				Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	A[]		
6	83016	Export Mark	eting Paper II				Th-C/	A[]		
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 [.]	Col	lege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):	I.							
Venu	ie Preference (Code/Na	ame):								
To, [Director, Board of Exam	ination and E	Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
have	gone through the sylla	bus and the	ist of books prescr	ibed for the examinatior	n for which I a	m appearing. I shall	not			
				or day fixed for universi on being found false or						
	elled or rejected.	inat in the ev	one of any informat	on being lound laise of	mcorrect, my	candidatare is liable	o to be			
D1		D (Ol l						St	udent's Signature	
	aration by Principal/HO	-		, ma. The information n	rinted in the f	io oorroot to the	boot of my len		I also undortales the	
	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									
	se/term work (if any) ac			-			•		·	
Die										
Place	5 .									
Doto										
Date	•			College Staff Signature		Seal	and Siar	nature of		
				College Stall Oightature			Principal/HOD/Chairperson			



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status:			Examination form 109703		Division/Section:	Roll No	.:	Ash Roy		
:	2018016400906593	Eligible						GAS.		
nstru	uction Medium:				Nationality:	India				
			Student's Perso	nal Informati	ion					
Stude	ent's Name: ROY AS	SHUTOSH SHANKAR			Mother's Name: NI	EHA	Ge	ender: Male		
lam	e in Vernacular Languaç	ge:रॉय आशुतोष शंकर								
Addr	ess: ROOM NO 3 SHIN	GREWADI LBS MARG BAIL B	BAZAR							
		a, District: Mumbai Suburban, S		400070						
	ohone no.:		oile no: 918652697477		<u> </u>	ii : ASHUTOS	HSROY19	99@GMAIL.COM		
	: Sep 28, 1999	Category: Open		Physically Handicap: No						
		Details: Sem III(Regular-Rev1	16)	Exam Even	nt: Nov-2019	Seat	i No: 7283	518 (Status: ATKT)		
Exam form appearance type: Fresher Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
<u> </u>		se select Paper details which y		- University A	Assessment,CA - Co	llege Assessn	nent)			
SN	Paper Code	1 4 2 14 15	Paper Name					AM - AT		
1		Financial Accounting and Audit		nting		Th-U/				
2		Financial Accounting and Audit	ting X - Cost Accounting			Th-U/				
3		Business Economics VI						Th-UA []		
4		Commerce VI	11			Th-U/				
5		Direct and Indirect Taxation Pa	per II			Th-C/				
6		Export Marketing Paper II	F	F F	0	Th-C/				
	ocation Fee	Exam Form Late	ree	Exam Form	Super Late Fee	Exar	mination F	ees		
/lark	Statement Fee	Total:								
ayn	nent Details: Ar	mount Received:	Coll	ege Receipt	No. and Date:					
DD N	lo:	MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/Na	ime):				•				
/enu	e Preference (Code/Na	me):								
o, D	irector, Board of Exami	nation and Evaluations / The C	Controller Of Examination	٦,			Place:	Vidyavihar		
		ent myself for the ensuing exar ade in this application are true,					Date:			
ave	gone through the syllab	ous and the list of books prescr	ibed for the examination	for which I a	am appearing. I shall	not	<u> </u>			
•	, ,	ession such as change in time nat in the event of any informat	,	,	•	,				
	ncelled or rejected.									
)ook	aration by Principal/HOI						Siud	lent's Signature		
This espo	form is carefully scrutini onsibility of fulfillment/re	ized by the College staff and bectification of the information. Hecording to university rules.								
Place) :									
)ate										

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 109704		Division/Section:	Roll No.	.:	.Bo
1	2018016400933632	<u> </u>	Eligible				<u> </u>		·Fo
nstrı	uction Medium:					Nationality:	India		
				Student's Per	sonal Informati	ion			
Stude	ent's Name: DUBEY	PRACHI PI	HOOLCHAND			Mother's Name: AS	SHA DUBEY		Gender: Female
lam	e in Vernacular Langua	age:प्राची दुबे	फूलचंद						
ddr	ess: FLAT NO. A501 Al	MBER MAH/	AVIR RESIDENCY	CAMA LANE KIROL	ROAD GHAT	KOPAR WEST			
City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400086									
elep	8@GMAIL.COM								
OB	: Oct 02, 2000	Ca	tegory: Open		Physically	/ Handicap: No			
'revi	ious Latest Examinatior	n Details: Se	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	: No: 728	83233 (Status: ATKT)
xan	n form appearance type	e: Fresher							
'ape	er Details: Plea	ise select Pa	per details which y	rou want to appear (U	A - University A	Assessment,CA - Co	Ilege Assessm	nent)	
SN	Paper Code			Paper Name	Paper Name				AM - AT
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting				A[]	
2	83007	Financial Ac	counting and Audit	ing X - Cost Accountin	ng		Th-UA	4[]	
3	83013	Business Ec	onomics VI				Th-UA	۹[]	
4	83014	Commerce V	/ I				Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	۹[]	
6	83023	Investment F	Analysis and Portfo	lio Management Pape	er II		Th-CA	4[]	
conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
/lark	Statement Fee		Total:						
) avn	nent Details:	Amount Rece	sixod:		ollege Receipt	No and Date:			
DD N		MIIOUIII INCCC	MICR No:		DD Date:	NO. driu Date.	Bank:		
	er Preference (Code/Na	ame).	IVIIOIT IVO.		DD Date.		Daim.	-	
	ue Preference (Code/Na								
	Director, Board of Exam	,	 Evaluations / The C	Controller Of Examinat	ion			Place:	Videovihor
	uest permission to pres					ed fee for the same	l herehy	Piace.	Vidyavihar
Iecla	are that all statement ma	nade in this ap	pplication are true,	complete and correct	to the best of m	ny knowledge and be	elief. I	Date:	
	gone through the syllal est for any special conc							<u> </u>	
ther	r ground. I understand t								
	elled or rejected.							Stı	udent's Signature
)ecl	aration by Principal/HO	D/Chairpers	on						<u> </u>
	form is carefully scrutin			v me. The information	printed in the fo	orm is correct to the	best of my kne	owledge	e. I also undertake the
espo	onsibility of fulfillment/re	ectification of	f the information. H						
ours	se/term work (if any) ac	cording to ur	niversity rules.						
11000									
Place	£					ļ	l		
							ĺ		
)ate:	•			College S	Staff Signature	ļ	Seal :	and Sign	nature of
				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 2021 event.

Examination form No.:

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PRN:	Eligibility Status:	Examination form 109705	າ No.:	Division/Section:	Roll No.	u:	5 egal		
2018016400933647	Eligible			I			70		
nstruction Medium:				Nationality:	India				
		Student's Persor	onal Information	on					
Student's Name: CHUDAS	SAMA SEJAL KAMLESHBHAI			Mother's Name: NA	AYNABEN	G	Gender: Female		
lame in Vernacular Language	•								
Address: ROOM NO. 3,1ST FI	LOOR, LUCKY BLDG., KISA	N NAGAR NO.1, WAGL	E ESTATE,	THANE WEST					
City: THANE WEST, Taluka: T	Thane, District: Thane, State:		304						
elephone no.:		oile no: 918291343910			I : sejalchudas	sama301	2@gmail.com		
OOB: Dec 30, 2000	Category: Open		 '	Handicap: No					
Previous Latest Examination [Details: Sem III(Regular-Rev1	6)	Exam Event	i: Nov-2019	Seat	i No: 729	0666 (Status: ATKT)		
xam form appearance type: F	Fresher								
Paper Details: Please	e select Paper details which yo	ou want to appear (UA -	- University A	ssessment,CA - Col	llege Assessn	nent)			
SN Paper Code		Paper Name					AM - AT		
1 83001 Fir	inancial Accounting and Auditi	ing IX - Financial Accour	nting		Th-UA	Α[]			
2 83007 Fir	inancial Accounting and Auditi	ing X - Cost Accounting			Th-UA	Α[]			
3 83013 Bu	usiness Economics VI				Th-UA	A []			
4 83014 Co	ommerce VI				Th-U/	h-UA []			
5 83015 Di	irect and Indirect Taxation Pap	per II			Th-CA	A []			
6 83016 Ex	xport Marketing Paper II				Th-CA	A []			
Convocation Fee	Exam Form Late I	Fee	Exam Form 9	Super Late Fee	Exar	mination I	Fees		
Mark Statement Fee	Total:			-					
<u>, </u>	nount Received:			No. and Date:					
DD No:	MICR No:]	DD Date:		Bank	:			
Center Preference (Code/Nam	<u> </u>								
enue Preference (Code/Nam	ne):								
o, Director, Board of Examina	nation and Evaluations / The C	ontroller Of Examination	n,		1	Place:	Vidyavihar		
leclare that all statement mad	nt myself for the ensuing exam de in this application are true, on the list of books prescri	complete and correct to t	the best of m	ny knowledge and be	elief. I	Date:			
equest for any special conces	ssion such as change in time of any information the event of any information.	or day fixed for university	ty Examinatio	n etc. on religious or	r any				
ancelled or rejected.	,					C+	dant'a Cianatura		
See the Debata I/UOD/	(A) 1					Siu	ıdent's Signature		
This form is carefully scrutinize esponsibility of fulfillment/rect	eclaration by Principal/HOD/Chairperson his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical purse/term work (if any) according to university rules.								
Place:									
Date:		College Sta	aff Signature			and Signa	ature of l/Chairperson		



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Examination form No.:

'e-Suvidha' account on

Seal and Signature of Principal/HOD/Chairperson



	PRN:	Eligibility Status:	109706	II INO	Division/Section:	Roll No	A	bika	
:	2018016400933663	Eligible		III			4	<u>Luran</u>	
Instru	uction Medium:				Nationality:	India			
			Student's Perso	onal Informat	on				
Stud	ent's Name: GONSA	LVES ABIKA BERNARD			Mother's Name: AC	SNES	Gender	: Female	
Nam	e in Vernacular Langua	ge:गोंसाळवेस अबिका बर्नार्ड							
Addr	ess: House No.181,Villa	age Ward 'C', Father Peter Per	eira Road, Near Kohino	or Hotel,					
City:	Mumbai, Taluka: Kurla,	District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400070					
Telep	ohone no.:	Mob	ile no: 919867813102		Email	: abikagonsa	lves@gmail.co	ım	
DOB	: Jan 09, 2001	Category: Open		Physically	Handicap: No				
Previ	ious Latest Examination	Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 7283257 (Status: Pass)	
Exan	Exam form appearance type: Fresher								
Pape	er Details: Pleas	se select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name				AM	- AT	
1	83001 I	Financial Accounting and Audit	ing IX - Financial Accou	ınting		Th-UA	A[]		
2	83007 I	Financial Accounting and Audit	ing X - Cost Accounting	1		Th-UA	A[]		
3	83013 I	Business Economics VI				Th-UA	A[]		
4	83014	Commerce VI				Th-UA	A []		
5 83015 Direct and Indirect Taxation Paper II Th-									
6	6 83016 Export Marketing Paper II Th-CA []								
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination Fees		
Mark	Statement Fee	Total:							
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_		mount Received:	Coll		No. and Date:	lpi			
DD N		MICR No:		DD Date:	Bank:				
	er Preference (Code/Na	•							
	e Preference (Code/Na	,							
		nation and Evaluations / The C					Place: Vidy	avihar	
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true, ous and the list of books prescr	complete and correct to	the best of n	ny knowledge and be	lief. I	Date:		
reque other	est for any special conc	ession such as change in time nat in the event of any informati	or day fixed for universit	ty Examination	on etc. on religious or	any			
canc	Student's Signature								
	aration by Principal/HOI	=							
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 burse/term work (if any) according to university rules.								
Place	e:								
Date	Date:								

College Staff Signature



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	PRN:	Eligi	bility Status:	Examination 1 10970		Division/Section:	Roll No	::	0,
	2018016400933671		Eligible						
Instru	uction Medium:					Nationality:	India		
				Student's Po	ersonal Informati	on			
Stud	ent's Name: CHAUI	HAN RIYA RA	JESH			Mother's Name: N	EHA	(Gender: Female
Nam	e in Vernacular Langua	age:चौहान रिय	ग राजेश						
Addr	ess: 12/a pankaj -A I.b	.s marg ghatl	kopar west						
City:	mumbai, Taluka: Kurla	ı, District: Mu	mbai Suburban, St	ate: Maharashtra, P	IN: 400086				
Tele	ohone no.:		Mot	ile no: 91816942482	27	Emai	I : riyachauha	n486@g	gmail.com
DOB	: Oct 27, 2000	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	83191 (Status: ATKT)
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	ssessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Nar	Paper Name				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Ac	counting		Th-UA	۹[]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accoun	ting		Th-U	۹[]	
3 83013 Business Economics VI							Th-UA	۹[]	
							Th-U	h-UA []	
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	۹[]	
6	83016	Export Marke	eting Paper II				Th-CA	۹[]	
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Ex							Exar	mination	Fees
Mark	Statement Fee		Total:						
			. ,	-1.	0 11				
		Amount Rece	ı		College Receipt	No. and Date:	lpi		
DD N			MICR No:		DD Date:		Bank	:	
	er Preference (Code/N								
	e Preference (Code/N				-4!			1	
	Director, Board of Exam					. d f f db	l la aurala	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 correct	t to the best of m	ny knowledge and be	elief. I	Date:	
requ	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examination	n etc. on religious o	r any		
othei	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		
caric	elied of rejected.							St	udent's Signature
Deck	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 esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical sourse/term work (if any) according to university rules.								
Place	9 :								
Date	:			_					
			College	Staff Signature				nature of D/Chairperson	



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Examination form No.:



PRN: Eligibility Status:			109708	I INU	Division/Section:	: Roll N	No.:	R.v.Khona-			
	2018016400933686		Eligible								
Instr	uction Medium:	•				Nationality:	India				
				Student's Perso	nal Informati	on					
Stud	ent's Name: KHON	A RAJ VIJAY				Mother's Name:	: PRAGNA		Gender: Male		
Nam	e in Vernacular Langu	age:खोना राज	विजय								
Addr	ess: 28/3, ANAND VII	HAR CHS PAN	IDIT DINDAYAL R	OAD, ANAND NAGAR	DOMBIVLI W	/EST					
City:	DOMBIVLI, Taluka: K	alyan, District	: Thane, State: Mal	harashtra, PIN: 421202							
Tele	ohone no.:		Mob	ile no: 919619226950		Er	nail : vijaykhor	na1974@	gmail.com		
DOB	: Nov 07, 1999	Ca	tegory: Open		Physically	Handicap: No					
Prev	ious Latest Examination	on Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Se	eat No: 72	283359 (Status: Pass)		
	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 -	College Asses	sment)			
SN	Paper Code			Paper Name				AM - AT			
1	83001	Financial Ac	counting and Audit	ing IX - Financial Accou	nting		Th-	-UA []			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting			Th-	-UA []			
3	83013	Business Ec	onomics VI				Th-	-UA []			
4	83014	Commerce \	/I				Th-	-UA []			
5	83015	Direct and In	direct Taxation Pa	per II			Th-	-CA[]			
6	83016	Export Marke	eting Paper II				Th-	-CA[]			
Conv	Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees										
Mark	Statement Fee		Total:								
Pavr	nent Details:	Amount Rece	ived:	Col	ege Receint	No. and Date:					
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Cent	er Preference (Code/N	Name):					·				
Venu	ie Preference (Code/N	lame):									
To, [Director, Board of Exar	mination and E	Evaluations / The C	ontroller Of Examinatio	n,			Place:	: Vidyavihar		
				nination. I have remitted				Date:			
				complete and correct to bed for the examination				Date.			
requ	est for any special con	cession such	as change in time	or day fixed for universi	ty Examination	n etc. on religious	s or any				
	r ground. I understand elled or rejected.	that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is lia	able to be				
								S	tudent's Signature		
Decl	aration by Principal/H0	OD/Chairperso	on								
				me. The information process is required at the second							
	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	e:										
				_							
Date	· ·										
				College Sta	aff Signature				nature of		
							Prir	ncipal/HO	D/Chairperson		



Date:

University of Mumbai, Mumbai

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

Examination form No.: 109709 Eligibility Status: PRN: Division/Section: Roll No.: Keyori 2018016400933694 Eligible Nationality: Instruction Medium: India Student's Personal Information Student's Name: THAKKAR KEYURI DEVENDRA Mother's Name: JYOTSNA Gender: Female Name in Vernacular Language:ठक्कर केयूरी देवेंद्र Address: ROOM NO 2, NARAYAN JOSHI CHAWL, SHASTRI NAGAR DEVI CHOWK City: DOMBIVLI WEST, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202 Telephone no.: Mobile no: 919769551801 Email: keyuthakkar@gmail.com DOB: Jul 30, 2000 Physically Handicap: No Category: Open Previous Latest Examination Details: Sem I(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7014703 (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 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA[] 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA[] 2 3 83013 Th-UA[] Business Economics VI 4 83014 Th-UA[] Commerce VI 5 83015 Direct and Indirect Taxation Paper II Th-CA[] 83020 Computer systems and Applications Paper II Th-UA [] ;Th-CA [] Exam Form Late Fee Convocation Fee **Examination Fees** Exam Form Super Late Fee 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, Director, Board of Examination and Evaluations / 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:

College Staff Signature



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B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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	PRN:	Eligit	oility Status:	Examination fo 109710		Division/Section:	Roll No	.:	Rathad	
	2018016400933705		Eligible						Carrie	
Instr	uction Medium:		-			Nationality:	India			
		·		Student's Per	sonal Informati	on				
Stud	ent's Name: RATHO	D DEWANG	MAHESH			Mother's Name: R	UPA	Ge	ender: Male	
Nam	e in Vernacular Langua	ige:राठोड देवां	ग महेश							
Addr	ess: ROOM NO. 4 SUL	OCHANABAI	CHAWL PARSH	IWADI GHATKOPAR	WEST					
City:	MUMBAI, Taluka: Kurl	a, District: Mu	mbai Suburban, S	tate: Maharashtra, Pl	N: 400086					
Tele	ohone no.:		Mob	ile no: 919920372818	3	Ema	il : dewangrath	nod9a@gı	mail.com	
DOB	: Dec 07, 2000	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Sen	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 7283	3508 (Status: ATKT)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ise select Pap	er details which y	ou want to appear (U	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name	е				AM - AT	
1	83001	Financial Acc	ounting and Audit	ing IX - Financial Acc	ounting	A[]				
2	83007	Financial Acc	ounting and Audit	ing X - Cost Accountir	ng		Th-U	A []		
3	83013	Business Eco	onomics VI				Th-U	A[]		
4 83014 Commerce VI Th									JA []	
5	83015	Direct and Inc	direct Taxation Pa	per II			Th-C	A []		
6	83020	Computer sys	stems and Applica	tions Paper II			Th-U	A [] ;Th-C	A[]	
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination							mination F	ees		
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Recei	ved:	С	ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
	ie Preference (Code/Na									
To, [Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar	
	uest permission to pres							Date:	-	
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requ	est for any special cond	ession such a	as change in time	or day fixed for univer	sity Examination	n etc. on religious o	r any			
	ground. I understand telled or rejected.	hat in the eve	nt of any informati	on being found false	or incorrect, my	candidature is liable	e to be			
canc	clica of rejected.							Stud	dent's Signature	
Decl	aration by Principal/HO	D/Chairperso	n							
This	form is carefully scruting	nized by the C	ollege staff and by	me. The information	printed in the f	orm is correct to the	best of my kno	owledge.	l also undertake the	
	esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
				1						
Place	e :									
				_						
Date	:									
				College S	Staff Signature			and Signa ipal/HOD/	ture of Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:		bility Status:	Examination for 10971		Division/Section:	Roll No.	.:	0.0				
	2018016400933713		Eligible						Plat			
Instr	uction Medium:	-				Nationality:	India					
				Student's Pe	rsonal Informati	on						
Stud	ent's Name: MEMO	NOHD KAI	F ANWAR			Mother's Name: W	AHEEDA	(Gender: Male			
Nam	e in Vernacular Langua	ge:मेमन मोह	म्मद कैफ अन्वर									
Addr	ess: ROOM NO 202 ME	MON APT N	AQSOOD NAGA	R ALMAS COLONY	ROAD KAUSA	MUMBRA						
City:	THANE, Taluka: Thane	, District: Tha	ane, State: Mahara	ashtra, PIN: 400612								
Tele	ohone no.:		Mob	ile no: 91809734011	2	Emai	I : KAIFMEMC	NAA@	GMAIL.COM			
DOB	: Apr 01, 2000	Cat	egory: Open		Physically	Handicap: No						
Prev	ious Latest Examinatior	Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33404 (Status: ATKT)			
Exar	n form appearance type	: Fresher										
Pape	er Details: Plea	se select Par	oer details which y	ou want to appear (l	JA - University A	ssessment,CA - Co	llege Assessm	nent)				
SN	Paper Code			Paper Nam	ne			AM - AT				
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	counting		Th-UA	۹[]				
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	ing		Th-UA	۹[]				
3	83013	Business Eco	onomics VI				Th-UA	۹[]				
									n-UA []			
5	83015	Direct and Inc	direct Taxation Pa	per II			Th-CA	۹[]				
6	83016	Export Marke	eting Paper II				Th-CA	۹[]				
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Mark	Statement Fee		Total:									
Pavr	nent Details:	mount Recei	ved.	(College Receipt	No. and Date:						
DD N			MICR No:		DD Date:		Bank	:				
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	ie Preference (Code/Na											
To, [Director, Board of Exam	nation and E	valuations / The C	ontroller Of Examina	ition,			Place:	Vidyavihar			
	uest permission to pres							D. I.	•			
	are that all statement magnet that all statement magnet through the syllal							Date:				
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othe	r ground. I understand ti elled or rejected.	nat in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be					
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Decl	aration by Principal/HO	D/Chairperso	n									
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cour	se/term work (if any) ac	cording to un	iversity rules.									
Place	e:											
Date												
Dale	•			College	Staff Signature				ace: Vidyavihar ate: Student's Signature			



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			Examination 10971	12	Division/Section:	Roll No.	ı.:	Juans		
- 2	2018016400933721	l	Eligible		/IIIIIIIII		l	!	A	
nstrı	uction Medium:					Nationality:	India			
				Student's P	Personal Informati	on				
Stude	ent's Name: KOTHA	ARI DHVANI F	PARAG			Mother's Name: JA	ALPA		Gender: Female	
Name	e in Vernacular Langua	age:कोठारी ध्व	ानी पराग							
Addr	ess: c/12- 353 Mahavir	r Jyot-2nd floc	or Vallabh Baug La	ne Ghatkopar-East	Mumbai-77					
<u> </u>	mumbai, Taluka: Kurla	a, District: Mur								
	ohone no.: 21025037		Mot	oile no: 9196993732	.73	Emai	il : dhvanikotha	ari2000(@gmail.com	
	: Aug 11, 2000		tegory: Open			Handicap: No				
	ious Latest Examinatio		n III(Regular-Rev1	6)	Exam Even	it: Nov-2019	Seat	ι No: 728	83365 (Status: Pass)	
	n form appearance type									
		ase select Par	per details which y			Assessment,CA - Co	ilege Assessm	nent)		
SN	Paper Code	<u> </u>		Paper Nai			AM - AT			
1	83001			ing IX - Financial Ac			Th-UA			
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-UA			
3 83013 Business Economics VI								A[]		
4	83014	Commerce V	•				Th-UA			
5	83015		direct Taxation Pa	per II			Th-CA			
6	83016	Export Marke					Th-CA			
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ived:		College Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	.		
Cent	er Preference (Code/N	lame):					•			
Venu	ie Preference (Code/N	lame):								
To, C	Director, Board of Exam	nination and E	ivaluations / The C	ontroller Of Examin	nation,			Place:	Vidyavihar	
decla	uest permission to pres	nade in this ap	oplication are true,	complete and correct	ect to the best of m	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond							\vdash		
other	ground. I understand									
cance	elled or rejected.						1	St	tudent's Signature	
Decla	aration by Principal/HC	DD/Chairperso	on				-			
This	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.									
Place	»:									
Date:				College	e 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:



PRN: Eligibility Status:		Examination for 10971;		Division/Section:	Roll No):	ywheer		
	2018016400933736	Р	rovisional						your -
Instru	uction Medium:	•				Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: QURES	HI YUHEEN	FAZAL			Mother's Name: Y/	ASMEEN	(Gender: Female
Nam	e in Vernacular Langua	ge:कुरेशी यूही	फाझल						
Addr	ess: NEAR J.J HOSPIT	AL ,67,RUM	ANI MANZIL,ROC	M NO 11,KHANDIYA	STREET,MUN	IBAI CENTRAL,MU	MBAI		
City:	MUMBAI, Taluka: Mum	bai, District:	Mumbai City, Stat	e: Maharashtra, PIN:	400008				
Tele	phone no.:		Mot	ile no: 91702150574	8	Emai	l : yashfeenqı	ureshi19	97@gmail.com
DOB	: Nov 20, 2000	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatior	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83494 (Status: ATKT)
Exan	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (l	JA - University A	Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Nan	пе				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	counting	Th-UA[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	ing		Th-U	A[]	
3		Business Ec	onomics VI				Th-U		
4	83014	Commerce V	′1				Th-U	A []	
5	83015	Direct and In	direct Taxation Pa	per II			Th-C		
6	83016	Export Marke	eting Paper II				Th-C	A[]	
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Mark	Statement Fee		Total:						
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	er Preference (Code/Na	ame).	IMIOIT INO.		DD Date.		Dank		
	ue Preference (Code/Na								
	Director, Board of Exam		valuations / The C	controller Of Examina	ntion.			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	riace.	viuyaviilai
decla	are that all statement ma	ade in this ap	plication are true,	complete and correc	t to the best of m	ny knowledge and be	elief. I	Date:	
	gone through the syllal est for any special conc								
othe	r ground. I understand t	nat in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be		
canc	elled or rejected.							St	udent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
				me. The information	n printed in the fo	orm is correct to the	best of my kn	owledge	e. I also undertake the
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.								
cour	se/term work (if any) ac	cording to ur	liversity rules.						
Place	·	<u> </u>					<u> </u>		
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Date	•			College	Staff Signature		Seal	and Siar	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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination for 109714		Division/Section:	Roll No	.:	(Daniel)			
:	2018016400933744		Eligible						Donewara			
nstru	ction Medium:	<u>-</u>				Nationality:	India		•			
				Student's Pe	rsonal Informati	on						
Stude	ent's Name: SANK	PAL DEVEND	RA SHIVAJI			Mother's Name: S	UVARNA		Gender: Male			
Nam	e in Vernacular Langua	age:देवेंद्र शिवा	जी संकपाळ									
Addr	ess: ROOM NO. 101/8	, INDIRA NA	GAR VASHI NAKA	MAHUL ROAD CHE	MBUR MUMBA	I						
City:	MUMBAI, Taluka: Kurl	la, District: Mu	umbai Suburban, S	tate: Maharashtra, P	IN: 400074							
Telep	hone no.:		Mob	ile no: 91702104643	6	Ema	il : as.suppu02	293@gn	nail.com			
OOB	Feb 10, 2000	Ca	tegory: Open		Physically	Handicap: No						
⊃revi	ous Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 72	83531 (Status: Pass)			
Exan	n form appearance typ	e: Fresher										
Pape	r Details: Plea	ase select Pa	per details which y	ou want to appear (l	JA - University A	ssessment,CA - Co	llege Assessn	nent)				
SN	Paper Code			Paper Nam	ne		AM - AT					
1	83001	Financial Ac	counting and Audit	ing IX - Financial Acc	g IX - Financial Accounting Th-U							
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounti	ing		Th-U	A[]				
3	83013	Business Ec	onomics VI				Th-U	A[]				
4 83014 Commerce VI							Th-U	n-UA []				
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	A[]				
6 83016 Export Marketing Paper II Th-CA []												
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees			
Mark	Statement Fee		Total:									
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		Amount Rece	ı		College Receipt	No. and Date:	- In .					
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	er Preference (Code/N											
	e Preference (Code/N	,										
	irector, Board of Exan							Place:	Vidyavihar			
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eque	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 liabl	e to be					
Janic	elled of rejected.							St	tudent's Signature			
Decla	aration by Principal/HC	D/Chairperso	on									
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 purse/term work (if any) according to university rules.											
Place	e:											
Date:				College	Staff Signature				ation Fees ace: Vidyavihar te: Student's Signature edge. I also undertake the			



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 2021 event.

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PRN: Eligibility Status: Examination form No.: Division/Section:				Roll No.	.:	Pavin				
:	2018016400933752	Pi	rovisional						Jascaro	
Instru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: PARIN	MUKESH SH	IARDA			Mother's Name: G	OPI	(Gender: Male	
Nam	e in Vernacular Langua	ıge:परीनं मुके	श शारदा							
Addr	ess: D2/1401,HYDE P/	ARK OFF GH	ODBUNDER ROA	D,NEAR TULSIDHA	M,MANPADA T	HANE WEST				
City:	THANE, Taluka: Thane	e, District: Tha	ane, State: Mahara	shtra, PIN: 400610						
Telep	ohone no.:		Mob	ile no: 91961933265	i3	Emai	l : parinsharda	a9@gma	ail.com	
DOB	: Nov 21, 2000	Cat	egory: Open		Physically	Handicap: No				
Previ	ous Latest Examination	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33579 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	ise select Par	oer details which y	ou want to appear (JA - University A	ssessment,CA - Co	llege Assessm	nent)		
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1	83001	Financial Acc	counting and Audit	ng IX - Financial Ac	counting		Th-UA	A[]		
2	83007	Financial Acc	counting and Audit	ng X - Cost Account	ing		Th-UA	۱] ۲		
3 83013 Business Economics VI								۱] ۲		
4	83014	Commerce V	Ί				Th-UA	۱] ۲		
5	83015	Direct and In	direct Taxation Pa	oer II			Th-CA	۱] ۲		
6	83023	Investment A	nalysis and Portfo	io Management Pap	er II		Th-CA	۱] ۲		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ved:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank			
Cent	er Preference (Code/N	ame):								
Venu	e Preference (Code/Na	ame):								
To, C	Pirector, Board of Exam	ination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres							D. I.	,	
	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 unive	ersity Examination	n etc. on religious or	r any			
	ground. I understand telled or rejected.	hat in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							Stı	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	n							
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	Э :									
Date	:			College	Staff Signature		Saala	and Sign	nature of	
				Conlege	Clair Orginature				283579 (Status: Pass) AM - AT on Fees : Vidyavihar Student's Signature ge. 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligib	oility Status:	Examination 1097		Division/Section:	Roll No	::	
2	2018016400933767	E	Eligible						13/
Instru	ıction Medium:	- !				Nationality:	India		
				Student's P	ersonal Informati	on			
Stude	ent's Name: PANDY	A VAIBHAV J	JAYESH			Mother's Name: Bl	HARATI	(Gender: Male
Name	e in Vernacular Languaç	je:वैभव जयेश	ा पंड्या						
Addre	ess: B/15 Krushnai Niwa	as Koper Roa	ad Dombivli West	Chetan Store					
City:	MUMBAI, Taluka: Kalya	n, District: Th	hane, State: Maha	erashtra, PIN: 42120	02				
Telep	hone no.:		Mob	ile no: 9199308268	52	Emai	l : vaibhavpan	ndya280	7@gmail.com
DOB:	Jul 28, 2000	Cate	egory: Open		Physically	Handicap: No			
Previ	ous Latest Examination	Details: Sem	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33458 (Status: Fail)
Exam	form appearance type:	Fresher							
Pape	r Details: Pleas	se select Pap	er details which y	ou want to appear (UA - University A	Assessment,CA - Co	lege Assessn	nent)	
SN	Paper Code			Paper Na	me				AM - AT
1	83001 F	inancial Acc	ounting and Audit	ing IX - Financial Ad	ccounting		Th-U	A[]	
2	83007 F	inancial Acc	ounting and Audit	ing X - Cost Accour	nting		Th-U	A []	
3	83013 E	Business Eco	nomics VI				Th-U	A []	
4	83014	Commerce VI	<u> </u>				Th-U	A[]	
5	83015	Direct and Ind	direct Taxation Pa	per II			Th-CA	A []	
6	83020	Computer sys	stems and Applica	tions Paper II			Th-UA	A [] ;Th-	CA[]
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Exam						Exar	mination	Fees	
Mark	Statement Fee		Total:						
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		mount Receiv			College Receipt	No. and Date:	lpi		
DD N			MICR No:		DD Date:		Bank	:	
	er Preference (Code/Na								
_	e Preference (Code/Na	,						1	
	irector, Board of Exami						l la a cala	Place:	Vidyavihar
decla	uest permission to prese re that all statement ma gone through the syllab	ide in this app	plication are true,	complete and corre	ct to the best of n	ny knowledge and be	elief. I	Date:	
reque	est for any special conce	ession such a	as change in time	or day fixed for univ	ersity Examination	on etc. on religious or	any		
	ground. I understand the	at in the ever	nt of any informat	on being found fals	e or incorrect, my	candidature is liable	e to be		
Carice	elled or rejected.							St	udent's Signature
Decla	aration by Principal/HOD	D/Chairpersor	n						
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place): 								
Date:				College	e Staff Signature				nature of D/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 2021 event.

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	PRN:	ikility Status:	Division/Section:	Poll No					
			ibility Status:	Examination f 10971	17	DIVISION/Section.	Roll No) .	Durgarah
	2018016400933775		Eligible		(1)111111111111111111111111111111111111				
nstru	uction Medium:					Nationality:	India		
				Student's P	Personal Information				
Stude	ent's Name: BAFNA	A DIVYANSH	ASHOK			Mother's Name: M	EENA		Gender: Male
Name	e in Vernacular Langua	age:बाफना टि	<u> इंट्यांश अशोक</u>						
Addr	ess: A 20 GIDHAR NA	GAR GHATK	(OPAR WEST						
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	tate: Maharashtra, F	PIN: 400086				
	phone no.:		Mob	oile no: 91845098354	48	Emai	il : divyanshba	afna2@g	gmail.com
DOB: Sep 14, 2000 Category: Open Physically Handicap: No									
	ious Latest Examinatio		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Seaf	t No: 728	83152 (Status: Pass)
	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 Assessr	nent)	
SN	Paper Code			Paper Nar	me				AM - AT
1	83001	Financial Acc	counting and Audit	ting IX - Financial Ac	counting		Th-U/	A[]	
2	83007	Financial Acc	counting and Audit	ting X - Cost Accoun	iting		Th-U/	A[]	
3	83013	onomics VI		Th-U/					
4	83014	Commerce V	/1				Th-U/	A[]	
5	83015	Direct and In-	ndirect Taxation Pa	per II			Th-C/		
6	83029	Elements of	Operational Resea	ırch Paper II			Th-C/	A[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Recei	in od:		College Receipt I	No and Date:			
DD N		Alliount i vecci	MICR No:		DD Date:	NO. and Date.	Bank		
	er Preference (Code/N	Jame).	IVIICITIVO.		DD Date.		Daim		
	ue Preference (Code/Na								
	Director, Board of Exam	,		Controller Of Examin				Diago	Videovibor
	uest permission to pres					ed fee for the same.	I hereby	Place:	Vidyavihar
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							\vdash	
other	r ground. I understand t								
cance	elled or rejected.							St	tudent's Signature
Deck	aration by Principal/HO	DD/Chairperso	on						
This	form is carefully scrutir	inized by the C	College staff and by	v me. The informatic	on printed in the f	orm is correct to the	best of my kn	ıowledge	e. I also undertake the
respo	onsibility of fulfillment/r	rectification of	f the information. H	e/she is regular stud	dent of this Collec	je and has complete	d the required	d attenda	ance and practical
cours	se/term work (if any) ac	ccording to un	iversity rules.						
	-								
Place	<i></i>					l			
~						ļ			
Date: College Staff Signatu						l	Seal	and Sign	nature of
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination for 109718		Division/Section:	Roll No).:	2003
;	2018016400933783		Eligible					ļ	Children
nstrı	uction Medium:	_				Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: GHADI	I PRATHAME	SH VISHNU			Mother's Name: M	EGHANA		Gender: Male
	e in Vernacular Langua								
	ess: 10, SIDDHIVINAY					A PADA, DOMBIVLI	WEST		
<u> </u>	DOMBIVLI, Taluka: Ka	alyan, District							
								h213pvg	g@gmail.com
DOB: Mar 21, 2000 Category: Open Physically Handicap: No									
⊃revi	ious Latest Examinatio	on Details: Ser	m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Seaf	t No: 728	83249 (Status: Pass)
	n form appearance type								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (L	JA - University A	ssessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Nam					AM - AT
1	83001	Financial Ac	counting and Audit	5				A[]	
2	83007	Financial Ace	counting and Audit	ting X - Cost Accounti	ing		Th-U/	A[]	
3	83013	Business Eco	onomics VI				Th-U/		
4	83014	Commerce V					Th-U/		
5	83015	+	ndirect Taxation Pa	per II			Th-C/		
6	83016	Export Marke	eting Paper II				Th-C/	A[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	Amount Recei	ived:		College Receipt	No and Date:			
DD N		- Illount 1 toco.	MICR No:		DD Date:	10. drid Dato.	Bank		
	er Preference (Code/N	 Jame):	IWIGHT TEC.					-	
	ue Preference (Code/Na								
	Director, Board of Exam		Evaluations / The C	Controller Of Examina	 ation,			Place:	Vidyavihar
l requ	uest permission to pres	sent myself fo	or the ensuing exan	nination. I have remitt	tted the prescribe			L	viayaviila.
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.							St	tudent's Signature
Deck	aration by Principal/HC	DD/Chairperso	on						
	form is carefully scrutir onsibility of fulfillment/r								
	onsibility of fulfillment/r se/term work (if any) ac			e/sne is regular stude	ent or trus conce	је апи наѕ соттртето	a the required	J allenue	апсе апи ргасиса
	· ·								
Place	э :					ļ	l		
				_		ļ	l		
Date:	:					ļ	l <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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Examination form No.:

Discipling (Section 1)



	PRN:	Eligi	bility Status:	109719		Division/Section:	Roll No).:	& Dhulla	
	2018016400933791		Eligible						A JAMES	
Instr	uction Medium:	•				Nationality:	India			
				Student's Perso	nal Informati	on				
Stud	ent's Name: DHULL	A KAJAL JIT	ENDRA			Mother's Name: Pl	REETI	(Gender: Female	
Nam	e in Vernacular Langua	ge:धुळीला का	जल जितेंद्र					·		
Addr	ess: NEW GEETA CHS	, 2ND FLOO	OR ANAND NAGA	R , PANDURANG WAD	I MANPADA	ROAD , DOMBIVILI	EAST			
City:	DOMBIVILI, Taluka: Ka	alyan, District	t: Thane, State: Ma	harashtra, PIN: 421201						
Tele	ohone no.:		Mob	ile no: 919819798402		Emai	l : kajaldhulla	03@gma	ail.com	
DOB	: Mar 14, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33226 (Status: ATKT)	
Exar	n form appearance type	: Fresher								
Pape	er Details: Plea	se select Pa	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	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	nting	Th-U	A []			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting		Th-U	A []			
3	83013	Business Ec	onomics VI					Th-UA[]		
4	83014	Commerce V	<u>′</u> 1				Th-U	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II				A[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U	A [] ;Th-	CA[]	
Conv	vocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exa	mination	Fees	
Mark	Statement Fee		Total:							
Payr	nent Details:	mount Rece	ived:	Coll	ege Receipt	No. and Date:				
DD N	lo:		MICR No:	1	DD Date:		Bank	(:		
Cent	er Preference (Code/Na	ame):					•			
Venu	ie Preference (Code/Na	ame):								
To, [Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examination	n,			Place:	Vidyavihar	
				nination. I have remitted				Date:	•	
				complete and correct to ibed for the examination				Date.		
requ	est for any special cond	ession such	as change in time	or day fixed for universit	y Examination	on etc. on religious o	any			
	r ground. I understand t elled or rejected.	hat in the eve	ent of any informat	on being found false or	incorrect, my	candidature is liable	e to be			
Cancelled of rejected.								St	udent's Signature	
Declaration by Principal/HOD/Chairperson										
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place	e :									
				_						
Date	:			College Stoff Signature		0 - 1		atum of		
				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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	PRN:	Eligi	ibility Status:	Examination fo 109720		Division/Section:	Roll No) .:	Dong	
;	2018016400933802		Eligible			l		I		
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: MESTF	RI AMEY ANII	L			Mother's Name: A0	CHALA		Gender: Male	
Nam	e in Vernacular Langua	age:मेस्जी अमे	ाय अनिल ————							
Addr	ess: 3/1 ,bhuwad chav	wl Shivaji nag	jar Tembhipada Ro	ad						
	Bhandup, Taluka: Kurl	la, District: Mı								
	phone no.:			oile no: 918291679535			il : ameymestr	ri83@gm	nail.com	
DOB: May 22, 2001 Category: Open Physically Handicap: No										
⊃revi	ious Latest Examinatio	on Details: Ser	m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Sea	t No: 728	83406 (Status: Fail)	
	n form appearance type									
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (U	JA - University A	ssessment,CA - Co	llege Assessr	nent)		
SN	Paper Code			Paper Nam					AM - AT	
1	83001				ng IX - Financial Accounting					
2	83007			ng X - Cost Accounting				A[]		
3	83013	Business Eco						Th-UA[]		
4	83014	Commerce V					Th-U			
5	83015		ndirect Taxation Pa	-			Th-C			
6	83023	Investment A		lio Management Pape			Th-C	A[]		
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			mination	ı Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Recei	ived:		College Receipt I	No and Date:				
DD N			MICR No:		DD Date:	VO. dila Dato.	Bank	<u>к</u> .		
	er Preference (Code/N		INITOTATIO.							
	ue Preference (Code/N									
	Director, Board of Exam		 Evaluations / The €	Controller Of Examina	tion,			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	l idec.	viayaviilai	
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. l	Date:		
	gone through the sylla est for any special cond									
other	r ground. I understand									
cance	elled or rejected.							St	tudent's Signature	
Decl:	aration by Principal/HC	DD/Chairpers	on							
This	form is carefully scrutir onsibility of fulfillment/r	inized by the C	College staff and by							
	se/term work (if any) ac			e/Sile is regular stace	All Oi tino Oonog	e dilu ilas compicio	a the required	Janeira	dilce dia practical	
Place	·									
166	<i>.</i>					ļ	l			
Date:						ļ				
Juic.				College Staff Signature				nature of		
				College Stall Signature			Princ	D/Chairperson		



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

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Examination form No.:



	PRN:	Eligi	bility Status:	109721	I INU	Division/Section:	Roll No	.:	(during		
	2018016400933817		Eligible						Reduction		
Instr	uction Medium:	·				Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: SORT	E RUTUJA RA	AVINDRA			Mother's Name: K	AVITA	(Gender: Female		
Nam	e in Vernacular Langu	age:सोरटे ऋतु	जा रवींद्र								
	ess: g wing 301 chirag										
City:	MUMBAI, Taluka: Kur	la, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN:	400086						
Tele	ohone no.:			ile no: 918108759647		Ema	il : rutujasorte	1001@g	mail.com		
DOB	: Aug 20, 2000	Ca	tegory: Reserved (SC)	Physically	Handicap: No					
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33615 (Status: ATKT)		
	n form appearance typ										
	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 Name					AM - AT		
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accou	nting		Th-U	۹[]			
2	83007	Financial Ac	counting and Audit	ng X - Cost Accounting		Th-U	٩[]				
3	83013	Business Ec	onomics VI			Th-UA	٩[]				
4	83014	Commerce \	/I			Th-UA	Th-UA[]				
5	83015	Direct and In	direct Taxation Pa	oer II			Th-CA	٩[]			
6	83020	Computer sy	stems and Applica	tions Paper II			Th-UA	A [] ;Th-	CA[]		
Conv	ocation Fee		Exam Form Late	-ee	ee Exam Form Super Late Fee			mination	Fees		
Mark	Statement Fee		Total:								
Dov.	nent Details:	Amount Rece	ivod:	Call	logo Possint	No. and Data:					
DD N		Amount Nece	MICR No:	<u> </u>	DD Date:	No. and Date:	Bank				
	er Preference (Code/N	lame).	INIOTY NO.		DD Date.		Dank	·			
	ie Preference (Code/N										
	·		Evaluations / The C	ontroller Of Examinatio	n.			Place:	Vidyavihar		
				nination. I have remitted		ed fee for the same	I hereby	Place.	viuyaviilai		
decla	are that all statement n	nade in this ap	oplication 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 university							
				on being found false or							
canc	elled or rejected.							St	udent's Signature		
Decl	aration by Principal/HC	DD/Chairners	on .					0	adont o dignature		
	• •	-		me. The information p	rinted in the f	orm is correct to the	hest of my kny	owledae	Lalso undertake the		
resp	onsibility of fulfillment/i	rectification of	the information. H	e/she is regular student							
cour	se/term work (if any) a	ccording to ur	niversity rules.								
Place	e:										
Date:				Callaga Cheff Cinnatura			Seel and Signature of				
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson				
									Principal/HOD/Chairperson		



PRN:

University of Mumbai, Mumbai

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Eligibility Status:



Roll No.:

Division/Section:



:	2018016400933825		Eligible						· Nee D	
Instru	uction Medium:					Nationality:	India			
				Student's Persor	nal Information	n				
Stud	ent's Name: PALTA	NEERAJ TA	RUN			Mother's Name: JA	YSHREE	(Gender: Male	
Nam	e in Vernacular Langua	ıge:पाळता नीः	ज तरुण							
	ess: MAIN BUNGLOW IDAYAL ROAD MULUI		AN NO. 2 CARE O	F JALARAM ASISH DEV	IDAYAL RO	AD MULUND WES	Γ AN NO. 2	CARE O	JALARAM ASISH	
City:	MUMBAI, Taluka: Mun	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN: 400	080					
Telep	ohone no.:		Mob	ile no: 917506184284		Emai	l : neeraJP/	ALTA2000	@GMAIL.COM	
DOB	: Apr 22, 2000	Cat	egory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283445 (Status: ATKT)					
Exam form appearance type: Fresher										
Pape	er Details: Plea	ise select Pa	oer details which y	ou want to appear (UA -	University A	ssessment,CA - Co	llege Asses	sment)		
SN	Paper Code			Paper Name					AM - AT	
1 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA [-UA []		
2 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA []								-UA []		
3	83013	Business Eco	onomics VI		Th-	-UA []				
4	83014	Commerce V	7				Th-	-UA []		
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	83016	Export Marke	eting Paper II				Th-	-CA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form S	Super Late Fee	Ex	kamination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ved:	Colle	ege Receipt N	lo and Date:				
DD N			MICR No:	<u>'</u>	DD Date:	20.0.	Ва	nk:		
Cent	er Preference (Code/N	ame):		l .			I			
Venu	ie Preference (Code/Na	ame):								
To, C	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examination	,			Place:	Vidyavihar	
				nination. I have remitted to complete and correct to the complete and correct to the correct to				Date:		
				ibed for the examination						
				or day fixed for university						
	groung. I understand i elled or rejected.	nat in the eve	ent of any informat	on being found false or i	ncorrect, my	candidature is liable	e to be			
Student's Signature								udent's Signature		
Declaration by Principal/HOD/Chairperson										
respo	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	ectification of	the information. H	me. The information pri e/she is regular student o	nted in the fo of this Colleg	rm is correct to the e and has complete	best of my l d the requir	knowledge red attenda	e. I also undertake the ance and practical	
Place	Э :									
Date	:									
				College State	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibili'	lity Status:	109723	II NO	Division/Section:	Roll No).:	tehap.
	2018016400933833 Eligible								20.1
Instru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	ion			
Stude	ent's Name: PANDY	'A ISHA NAYAN	NESHKUMAR			Mother's Name: PA	ANNABEN	G	ender: Female
Name	e in Vernacular Languaç	ge:पंड्या इशा न	।यनेशकुमार						
Addr	ess: B/16 vasant vihar o	chs 4th floor r	near rixa stand,	opp om bunglow ayre r	road dombiva	ali E			
City:	DOMBIVALI E, Taluka:	Kalyan, Distric	t: Thane, State: N	Maharashtra, PIN: 421	201				
Teler	phone no.: 2880006		Mobi	ile no: 919820147553		Email	l : nayaneshp	andya@y	rahoo.co.in
DOB	: Dec 08, 2000	Categ	gory: Open		Physically	Handicap: No			
	ious Latest Examination		III(Regular-Rev16	٥)	Exam Even	nt: Nov-2019	Seat	t No: 7283	3457 (Status: Pass)
Exam	n form appearance type:								
Pape	er Details: Pleas	se select Paper	r details which yo	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)	
SN	Paper Code			Paper Name					AM - AT
1				ng IX - Financial Accou			Th-U	A[]	
2	83007 F	Financial Accou	unting and Auditir	ng X - Cost Accounting	J		Th-U	A[]	
3	83013 E	Business Econo	omics VI				Th-U	Γh-UA []	
4	83014	Commerce VI					Th-U	A []	
5	83015	Direct and Indir	rect Taxation Pap	per II			Th-C/	A []	
6	83020	Computer syste	ems and Applicati	ions Paper II			Th-U/	A [] ;Th-C	CA[]
Conv	ocation Fee	E:	xam Form Late F	-ee	Exam Form	Super Late Fee	Exar	mination F	ees
Mark	Statement Fee	To	otal:						
Davn	nent Details: Ar	mount Receive			Ilogo Peceint	No. and Date:			
DD N			ICR No:	<u> </u>	DD Date:	INO. and Date.	Bank		
	er Preference (Code/Na		1011110.		DD Date.				
	ue Preference (Code/Na								
	Director, Board of Exami	,	aluations / The Co	ontroller Of Examination				Place:	VC-tdhan
	uest permission to prese					ed fee for the same	l herehy	Piace.	Vidyavihar
decla	are that all statement magnetic splead are that all statement magnetic splead are splead as a second are specified as a second are specif	ade in this appli	lication are true, c	complete and correct to	o the best of n	ny knowledge and be	elief. l	Date:	
reque	est for any special conce	ession such as	s change in time o	or day fixed for universi	ity Examination	on etc. on religious or	any		
other	r ground. I understand th								
сапс	elled or rejected.							Stu	dent's Signature
Decla	aration by Principal/HOD	D/Chairperson							
respo	form is carefully scrutini onsibility of fulfillment/re- se/term work (if any) acc	ectification of the	ne information. He						
Place	> :								
Date:	<u>:</u>								

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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: Eligibility Status: Examination form No.: Division/Section: Roll No.							0.:	Alionida		
2	2018016400933841		Eligible							
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	ion				
Stude	ent's Name: RUPAF	REL NISHITA	KAMLESHBHAI			Mother's Name: SE	EMABEN	(Gender: Female	
Name	e in Vernacular Langua	age:रुपारेल नि	शिता कमलेशभाई							
	ess: ALI BAHADUR CH									
		la, District: Μι	umbai Suburban, S	State: Maharashtra, PIN	1: 400080					
	phone no.:			oile no: 917738016505			il : nishitarupa	arel12@g	gmail.com	
	3: Apr 12, 2001		tegory: Open		Physically	/ Handicap: No				
							Sea	at No: 728	83519 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape	ı	ase select Par	per details which y	ou want to appear (UA	\ - University A	Assessment,CA - Col	lege Assess	ment)		
SN Paper Code Paper Name									AM - AT	
1 83001 Financial Accounting and Auditing IX - Financial Accounting								JA[]		
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-U	JA[]		
3 83013 Business Economics VI								Th-UA[]		
4		Commerce V					Th-U	JA[]		
5	83015	Direct and In-	ndirect Taxation Pa	per II			Th-C	CA[]		
6	83016	Export Marke	eting Paper II				Th-C	CA[]		
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	Fees	
Mark	Statement Fee		Total:							
Povn	ment Details:	Amount Recei	d.		ollege Receipt	No and Date:				
DD N			MICR No:		DD Date:	No. and Date.	Ban	Ne:		
	ter Preference (Code/N		IVIICH NO.		DD Date.		Dani	К.		
	ue Preference (Code/Na									
	`		= ::clustions / The (Controller Of Everningti				T _{=:}		
				Controller Of Examination nination. I have remitted		ad foo for the came	l haraby	Place:	Vidyavihar	
				complete and correct to				Date:		
have	gone through the sylla	abus and the li	list of books prescr	ribed for the examinatio	on for which I a	am appearing. I shall	not	\vdash		
				or day fixed for univers ion being found false or						
cance	elled or rejected.		, , , , , , , , , , , , , , , , , , ,						t alle O's serious	
Student's Signature							udent's Signature			
	Declaration by Principal/HOD/Chairperson This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the							ووالا منامة ماد الماد		
				y me. The information p le/she is regular studen						
	se/term work (if any) ac			orono io rogana.		, o a	u u.o		21100 and products.	
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Place	ə :									
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Date:										
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligi	bility Status:	Examination 1 10972		Division/Section:	Roll No	::	0	
:	2018016400933856		Eligible						Avent	
Instru	uction Medium:	<u> </u>				Nationality:	India	<u>'</u>		
				Student's P	ersonal Informati	on				
Stud	ent's Name: JOSHI	AVANI ARVI	ND			Mother's Name: M	ANISHA	(Gender: Female	
Nam	e in Vernacular Langua	age:जोशी अव	वनी अरविंद							
Addr	ess: VAISHALI NAGAF	R C2 41 VAIS	HALI CHS BAL RA	JESHWAR ROAD I	MULUND WEST					
City:	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, F	PIN: 400080					
Tele	ohone no.:		Mob	ile no: 9195941284	32	Emai	l : avanijoshi0	23@gm	ail.com	
DOB	: Aug 20, 2000	Ca	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Se	m I(Regular-Rev16)	Exam Even	t: Nov-2019	Seat	: No: 70	14647 (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	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Nar	me			AM - AT		
1	83001	Financial Ac	counting and Audit	ing IX - Financial Ac	counting		Th-UA	۹[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting			Th-UA	۹[]		
3	83013	Business Ec	onomics VI				Th-UA	۹[]		
4	83014	Commerce \	/ I				Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	er II			Th-CA	۹[]		
6	83016	Export Marke	eting Paper II				Th-CA	۹[]		
Conv	ocation Fee		Exam Form Late	Fee Exam Form Super Late Fee			Exar	mination	Fees	
Mark	Statement Fee		Total:							
			. ,		0 "					
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	er Preference (Code/N									
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	Director, Board of Exam					od Con Condon and	l le conte	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 correc	ct to the best of m	ny knowledge and be	elief. I	Date:		
requ	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examination	n etc. on religious o	r any			
othe	ground. I understand	that in the eve	ent of any informat	on being found false	e or incorrect, my	candidature is liable	e to be			
cancelled or rejected.								St	udent's Signature	
Declaration by Principal/HOD/Chairperson										
resp	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ad	ectification of	the information. H							
Place	ə:									
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)

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	PRN:	Eligi	bility Status:	Examination for 109726		Division/Section:	Roll No).:	Esso.	
	2018016400933864		Eligible						400	
Instru	uction Medium:	•				Nationality:	India	•		
				Student's Pers	onal Informat	on				
Stud	ent's Name: KHAN	ABDUL BASI	T FEROZ AHMED			Mother's Name: A	MIRUNNISA	G	Gender: Male	
Nam	e in Vernacular Langua	age:खान अब्दु	ल बासित फिरोज अ	हमद						
Addr	ess: A/403 NOOR E JA	AHAN 2ND, F	PIPE ROAD KURL	A WEST						
City:	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN	I: 400070					
Tele	ohone no.:		Mob	ile no: 919833155235		Ema	il : rushdakhar	n22222@	gmail.com	
DOB	: Sep 06, 2000	Ca	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3335 (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	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name				AM - AT		
1	83001	Financial Ac	counting and Audit	ing IX - Financial Acco	unting	Th-U	A []			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting				A []		
3	83013	Business Ec	onomics VI	Th						
4	83014	Commerce \	/I				Th-U/	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II	er II			A []		
6	83016	Export Marke	eting Paper II				Th-C/	A []		
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee		Total:	·						
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		Amount Rece	1	[00	, 	No. and Date:	Danie			
DD N			MICR No:		DD Date:		Bank	<u> </u>		
	er Preference (Code/N									
	e Preference (Code/N									
	Director, Board of Exam					16 6 11		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 t	o the best of n	ny knowledge and b	elief. I	Date:		
requ	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			
	ground. I understand telled or rejected.	that in the eve	ent of any informati	on being found false o	r incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							Stu	ıdent's Signature	
Declaration by Principal/HOD/Chairperson										
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 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	9 :									
				-						
Date	•			College Staff Signature		Seal and Signature of				
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	Examination form 109727	No.:	Division/Section:	Roll No.	.:	Necha.	
:	2018016400933872		Eligible						1 560°	
Instru	uction Medium:					Nationality:	India	•		
				Student's Person	nal Informati	on				
Stude	ent's Name: SHAH I	NEEHA MUL	CHAND			Mother's Name: VA	ARSHA	G	Gender: Female	
Nam	e in Vernacular Langua	age:शाह नेह	त मुल्चंद							
Addr	ess: F/703, NAVNEET	NAGAR LOD	HA HERITAGE D	OMBIVLI (EAST)						
City:	DOMBIVLI, Taluka: Ka	lyan, District:	. Thane, State: Ma	harashtra, PIN: 421201						
Telep	phone no.:		Mob	pile no: 918691912014		Emai	l : shahneha84	41@gma	ail.com	
DOB	: Oct 02, 2000	Cat	tegory: Open		Physically	Handicap: No				
Previ	ous Latest Examination	n Details: Ser	m III(Regular-Rev1	16)	Exam Even	t: Nov-2019	Seat	No: 728	3548 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	ise select Pa	per details which y	ou want to appear (UA -	- University A	Assessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Accour	nting		Th-UA	۹[]		
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounting						
3	83013	Business Eco	onomics VI				Th-UA	۹[]		
4	83014	Commerce V	<u>/I</u>				Th-UA	١[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	A[]		
6	83029	Elements of	Operational Resea	arch Paper II			Th-CA	۱] ۲		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees	
Mark	Statement Fee		Total:							
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		Amount Recei			<u> </u>	No. and Date:	Danie	_		
DD N		\	MICR No:		DD Date:		Bank	-		
	er Preference (Code/Na									
	e Preference (Code/Na				_					
				Controller Of Examination		- d f f db	l basab	Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
have	gone through the sylla	bus and the l	ist of books prescr	ibed for the examination	for which I a	m appearing. I shall	not			
				or day fixed for university ion being found false or i						
	celled or rejected.									
								Stu	ıdent's Signature	
	aration by Principal/HO	•								
respo		ectification of	the information. H	y me. The information pri le/she is regular student						
Place) :									
									l l	

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

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	PRN:	Eligi	ibility Status:	Examination form 109728	m No.:	Division/Section:	Roll No) .:	Negorg.		
_2	2018016400933887	l	Eligible		IIII		l		109		
nstru	uction Medium:					Nationality:	India				
				Student's Person	onal Informati	ion					
tude	ent's Name: POKHA	ARKAR KAJA	AL DATTATRAY			Mother's Name: Sl	JSHILA		Gender: Female		
lame	e in Vernacular Langua	age:पोखरकर व	भाजल दत्तात्रय								
ddre	ess: 9/B1/203, SAI AN/	AND CHS SA	NGHARSH NAGA	R, CHANDIVALI FARM	√ ROAD AND	HERI EAST					
city:	MUMBAI, Taluka: Kurl:	a, District: Μι	umbai Suburban, S	State: Maharashtra, PIN	1: 400072						
	phone no.:		Mob	oile no: 918097987974			il : kajalp2805	,2001@g	gmail.com		
OB	: May 28, 2001	Cat	tegory: Open			/ Handicap: No					
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seaf	t No: 728	83488 (Status: Pass)		
xam	n form appearance type	e: Fresher									
ape	er Details: Plea	ase select Pa	per details which y	ou want to appear (UA	· - University /	Assessment,CA - Co	llege Assessr	nent)			
SN	Paper Code			Paper Name				AM - AT			
1	83001	Financial Acr	counting and Audit	ing IX - Financial Accoυ	unting		Th-U	A []			
2	83007	Financial Acr	counting and Audit	ing X - Cost Accounting	g	Th-U/	A []				
3	83013	Business Eco	onomics VI			Th-U	Th-UA[]				
4	83014	Commerce V	/1						Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C/	A[]			
6	83023	Investment A	analysis and Portfo	lio Management Paper	:11		Th-C/	A[]			
Conv	ocation Fee		Exam Form Late	Fee	e Exam Form Super Late Fee			mination	Fees		
/lark	Statement Fee		Total:								
		Amount Recei	T	Col	, 	No. and Date:					
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	er Preference (Code/Na										
	ue Preference (Code/Na	•									
				Controller Of Examination				Place:	Vidyavihar		
Iecla	are that all statement ma	nade in this ap	pplication are true,	nination. I have remitted complete and correct to ibed for the examination	o the best of m	ny knowledge and be	elief. I	Date:			
eque	est for any special conc	cession such	as change in time	or day fixed for universi ion being found false or	sity Examination	on etc. on religious or	r any				
	elled or rejected.	diat in a.v	ant or any machine	Off boing found in	, IIICOITOU,,	Carialada la	, 10 50		<u>.</u>		
								Stu	tudent's Signature		
This espo		nized by the C rectification of	College staff and by f the information. H	y me. The information p le/she is regular student							
Place	ə:										
Date:				College St	taff Signature			and Sign	nature of D/Chairperson		
							, FIIIIC	ipai/i iOL	J/Chaliperson		



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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 109729	m No.:	Division/Section:	Roll No	.:	&	
:	2018016400933895	Eligible						16 ra	
Instru	uction Medium:				Nationality:	India			
			Student's Pers	onal Informat	ion				
Stude	ent's Name: VISHW	AKARMA AANCHAL RAMJANA	AM		Mother's Name: MA	ADHURI	G	ender: Female	
Nam	e in Vernacular Langua	ge:VISHWAKARMA AANCHAL	. RAMJANAM						
Addr	ess: LAXMI NAGAR JA	NTA COLONY RM NO 11 NEA	R RAMESHWAR TEM	IPLE GHATK	OPAR EAST				
City:	mumbai, Taluka: Kurla	, District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400075					
Telep	ohone no.:	Mob	ile no: 918080106332		Emai	: anchalshar	ma@gma	ail.com	
DOB	: Mar 11, 2000								
Previ	ious Latest Examination	t No: 728	3769 (Status: Pass)						
Exan	n form appearance type	: Fresher							
Pape	r Details: Plea	se select Paper details which y	ou want to appear (UA	A - University A	Assessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1 83001 Financial Accounting and Auditing IX - Financial Accounting							A[]		
2 83007 Financial Accounting and Auditing X - Cost Accounting							A[]		
3	83013	Business Economics VI				Th-U	Th-UA[]		
4	83014	Commerce VI				Th-U			
5	83015	Direct and Indirect Taxation Pa	per II			Th-C	A[]		
6	83016	Export Marketing Paper II				Th-C	A []		
Conv	rocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination I	Fees	
Mark	Statement Fee	Total:							
Pavn	nent Details:	mount Received:	Co	Ilege Receipt	No. and Date:				
DD N		MICR No:	100	DD Date:	IVO. and Date.	Bank			
	er Preference (Code/Na			DD Date.		Dank			
	ie Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·							
	,	ination and Evaluations / The C	ontroller Of Examination	าท			Diago	Vidyovihor	
		ent myself for the ensuing exam			ed fee for the same.	hereby	Place:	Vidyavihar	
		ade in this application are true,					Date:		
		bus and the list of books prescri ession such as change in time							
other	ground. I understand t	hat in the event of any informati							
canc	elled or rejected.						Stu	dent's Signature	
Decla	aration by Principal/HO	D/Chairperson							
This respo	form is carefully scrutin	ized by the College staff and by ectification of the information. H cording to university rules.							
Place	e: 								
Date									

College Staff Signature



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	PRN:	Eligil	bility Status:	Examination for 109730		Division/Section:	Roll No	::		
:	2018016400933906		Eligible						The state of the s	
Instru	uction Medium:	<u> </u>				Nationality:	India	-		
				Student's Per	sonal Informati	on				
Stud	ent's Name: SHEWA	ALE AAKASH	I BHARAT			Mother's Name: N	IRMALA	(Gender: Male	
Nam	e in Vernacular Langua	ge:शेवाळे आव	नाश भरत							
Addr	ess: nanvnath chawl su	ıryangar İbs n	narg							
City:	vikhroli, Taluka: Kurla,	District: Mum	ıbai Suburban, Sta	te: Maharashtra, PIN:	400083					
Tele	phone no.:		Mob	ile no: 919322647567	1	Emai	il : bharatshew	vale101(@gmail.com	
DOB	: Aug 29, 2000	Cat	egory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Se									33592 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape	er Details: Plea	se select Par	oer details which y	ou want to appear (U	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acco	ounting	Th-U	A[]			
2	83007	Financial Acc	counting and Audit	ng X - Cost Accounting				A[]		
3	83013	Business Eco	onomics VI					A[]		
4	83014	Commerce V	7				Th-U/	A[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA[]										
6 83016 Export Marketing Paper II Th-CA []										
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	mount Recei	ved:	Co	ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):			l					
Venu	ue Preference (Code/Na	ame):								
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar	
	uest permission to pres							D-4	·	
	are that all statement mage gone through the sylla							Date:		
requ	est for any special cond	ession such	as change in time	or day fixed for univer	sity Examination	n etc. on religious o	r any			
othe	r ground. I understand t elled or rejected.	hat in the eve	ent of any informat	on being found false of	or incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							St	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on							
	form is carefully scruting									
	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.									
2001										
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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	PRN:	Eligi	ibility Status:	Examination form 109731	n No.:	Division/Section:	Roll No.).:	Rojet	
:	2018016400933914	Р	Provisional		1111				Jack	
nstrı	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stude	lent's Name: RAJAT	RAMESH				Mother's Name: JA	YASHREE	C	Gender: Male	
	e in Vernacular Langua									
	ress: 304, Shankeshwai									
		Panvel, Distr		Maharashtra, PIN: 4102	210					
	phone no.:			oile no: 917506016239	1 3,5,7,7 11 (3 1 1 1					
	3: May 27, 2000		tegory: Open			y Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	t No: 728	33134 (Status: Pass)	
	n form appearance type		1 - 9 - 12-6		11.1					
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SN	Paper Code		2 - JA 42	Paper Name				AM - AT		
1				ting IX - Financial Accou			Th-UA			
2				ting X - Cost Accounting	j	Th-UA				
3		Business Eco					Th-UA []			
4		Commerce V					Th-UA			
5			ndirect Taxation Pa	per II			Th-CA			
6 83016 Export Marketing Paper II Th-CA []										
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Mark	Statement Fee		Total:		<u> </u>					
Payn	ment Details:	Amount Recei	pived:	Col	llege Receipt	No. and Date:				
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Cent	ter Preference (Code/Na	ame):	•							
Venu	ue Preference (Code/Na	ame):								
To, C	Director, Board of Exam	ination and F	Evaluations / The C	Controller Of Examination	n,			Place:	Vidyavihar	
				nination. I have remitted				Date:		
				complete and correct to ibed for the examination				Date.		
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			
	r ground. I understand t celled or rejected.	that in the eve	ent of any informati	ion being found false or	incorrect, my	/ candidature is liable	e to be			
								Stı	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
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Place	3 :					!				
~						!				
Date:	:			College Staff Signature			Seal and Signature of			
				College Stall Signature			Principal/HOD/Chairperson			



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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PRN:		Eligi	bility Status:	Examination for 109732		Division/Section:	Roll No	.:	*	
	2018016400933922		Eligible							
Instr	uction Medium:	•				Nationality:	India		•	
				Student's Pe	rsonal Informati	on				
Stud	ent's Name: SALOT	DHARMI DE	EPAK			Mother's Name: Na	AYNA	(Gender: Female	
Nam	e in Vernacular Langua	ge:स्लॉट धर्मी	दीपक							
Addr	ess: 70, ODHVRAM KU	IRPA RAGU	VANSHI NAGAR,	SN ROAD MULUND	WEST,MUMBA	1				
City:	Mumbai, Taluka: Muml	oai, District: N	Лumbai City, State	: Maharashtra, PIN: 4	100080					
Tele	ohone no.:		Mob	ile no: 91975741435	4	Emai	il : dharmisalo	t@gmai	l.com	
DOB	: Oct 05, 2000	Cat	egory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Se									83524 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape	er Details: Plea	se select Pa _l	oer details which y	ou want to appear (l	JA - University A	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Nam	ne			AM - AT		
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	counting	Th-UA	۹[]			
2	83007	Financial Acc	counting and Audit	ng X - Cost Accounting				۹[]		
3	83013	Business Eco	onomics VI	Т			Th-UA	۹[]		
4	83014	Commerce V	7	•			Th-U	۹[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []										
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	mount Recei	ved:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):					I			
Venu	ie Preference (Code/Na	ime):								
To, [Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examina	tion,			Place:	Vidyavihar	
	uest permission to pres are that all statement ma							Date:		
have	gone through the sylla	ous and the I	ist of books prescr	ibed for the examinat	ion for which I a	m appearing. I shall	not			
	est for any special conc ground. I understand t									
canc	elled or rejected.	nat in the eve	ent of any informat	on being found raise	or incorrect, my	candidature is liable	e to be			
								St	tudent's Signature	
	aration by Principal/HO	=								
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									
cour	se/term work (if any) ac	cording to un	iversity rules.							
Place	e:									
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Date	:			0.11	01-1101-11		0. 1	I O'		
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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Application Form for Examination of Summer Session 2021 event.

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PRN:		Eligi	bility Status:	Examination form 109733	m No.:	Division/Section:	Roll No	.:	10150		
2	2018016400933937		Eligible						Jegos ?		
nstru	uction Medium:	!				Nationality:	India	•			
				Student's Pers	onal Informati	on					
Stude	ent's Name: JAIN VI	ISHIKA PRA	√IN			Mother's Name: Pl	JSHPALATA	C	Gender: Female		
lam	e in Vernacular Langua	ige:जैन विशि	का प्रवीण								
Addr	ess: 1201 12th Floor Tu	ulsi Majestic	Postal Colony Plot	No 7 Near MAA Hospit	ta Chembur E						
City:	Mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400071						
elep	phone no.:		Mob	ile no: 918879608538		Emai	l : pravinenter	prise@y	ahoo.co.in		
ОВ	: Jul 26, 2000	Ca	tegory: Open		Physically	Handicap: No					
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019									3295 (Status: ATKT)		
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	83001	Financial Ac	counting and Audit	ing IX - Financial Accοι	unting		Th-U	4[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting)	Th-U	٩[]				
3	83013	Business Ec	onomics VI			Th-U	Th-UA[]				
4	83014	Commerce \	/I						Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	4[]			
6 83016 Export Marketing Paper II Th-CA []											
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees		
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)ov m	nent Details:	Amount Rece	ivod:	Co	Ilogo Possint	No. and Data:					
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	er Preference (Code/Na	ame).	IMICITIO.		DD Date.		Dank	-			
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	Director, Board of Exam		Evaluations / The C	ontroller Of Examination	on.			Place:	Vidyavihar		
	uest permission to pres					ed fee for the same	l hereby	riace.	viuyaviiiai		
lecla	re that all statement m	ade in this ap	oplication are true,	complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:			
	gone through the sylla est for any special cond										
	ground. I understand t										
anc	elled or rejected.							Stu	udent's Signature		
)ecl:	aration by Principal/HO	D/Chairners	n e					0	adonico Oignataro		
		=		me The information n	rinted in the fo	orm is correct to the	hest of my kny	owledae	Lalso undertake the		
espo	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										
cours	se/term work (if any) ac	cording to ur	niversity rules.								
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Place) .										
)ate				College St	Collogo Stoff Signature			Soal and Signature of			
				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 2021 event.

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PRN:		Eligil	bility Status:	Examination f 10973		Division/Section:	Roll No	ı.i	b N	
	2018016400933945		Eligible						Back	
Instr	uction Medium:	•				Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: SHAIKH	I MOHD SAD	DIQ MOHD WAHIE)		Mother's Name: Na	AZAMA	(Gender: Male	
Nam	e in Vernacular Langua	ge:शेख मोहद	सादिक मोहद वाहि	द						
Addr	ess: ROOM NO.13, CH	AWL NO.43,	IBRAHIM HARO	ON CHAWL QURES	H NAGAR KURL	A EAST				
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	State: Maharashtra, F	PIN: 400070					
Tele	ohone no.:		Mob	ile no: 91816914815	51	Emai	il : sadiqshaikl	h201@g	mail.com	
DOB	: Sep 20, 2000	Cat	egory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Set									83566 (Status: ATKT)	
Exar										
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)										
SN	Paper Code			Paper Nar	ne			AM - AT		
1	83001	Financial Acc	counting and Audit	ing IX - Financial Ac	counting	Th-U	A[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	ng X - Cost Accounting			A[]		
3	83013	Business Eco	onomics VI		Т			A[]		
4	83014	Commerce V	7					Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA []									-CA[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	mount Recei	ved:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):			l					
Venu	ie Preference (Code/Na	ıme):								
To, [Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres							<u>.</u>	•	
	are that all statement manager that all statement manager through the syllal							Date:		
	est for any special conc									
	ground. I understand the	hat in the eve	ent of any informat	ion being found false	or incorrect, my	candidature is liable	e to be			
Caric	elled or rejected.							St	udent's Signature	
Decl	aration by Principal/HO	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									
cour	se/term work (if any) ac	cording to un	iversity rules.							
Place	ə :									
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Date	:			College	Staff Signature		Sool	and Sic.	nature of	
				College Staff Signature					D/Chairperson	



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Application Form for Examination of Summer Session 2021 event.

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Eligibility Status:	Examination form 109735	No.:	Division/Section:	Roll No.	.:	Fileans			
Eligible		∥ _]				Some			
•			Nationality:	India					
	Student's Perso	nal Information	on						
SHALI SHYAM DIPESH			Mother's Name: HF	ENA	C	Gender: Male			
e:Hindi									
alpanagri mulund w B. R road	J Vaishali nagar								
i, District: Mumbai City, State	: Maharashtra, PIN: 400	080							
Felephone no.: 21640962 Mobile no: 919920472555 Email : shyamb									
Category: Open	Handicap: No								
Details: Sem III(Regular-Rev	(6)	Exam Even	t: Nov-2019	Seat	No: 728	33180 (Status: Pass)			
xam form appearance type: Fresher									
e select Paper details which y	ou want to appear (UA -	- University A	ssessment,CA - Col	lege Assessm	nent)				
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de in this application are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:				
ssion such as change in time	or day fixed for university	y Examinatio	n etc. on religious or	r any					
at in the event of any informat	ion being found false or i	incorrect, my	candidature is liable	to be					
					Stu	udent's Signature			
/Chairperson									
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 purse/term work (if any) according to university rules.									
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	Eligible HALI SHYAM DIPESH e:Hindi alpanagri mulund w B. R road ii, District: Mumbai City, State Mob Category: Open Details: Sem III(Regular-Rev1 Fresher e select Paper details which y nancial Accounting and Audit nancial Accounting and Audit usiness Economics VI ommerce VI irect and Indirect Taxation Pa xport Marketing Paper II Exam Form Late Total: Total: nount Received: MICR No: ne): ation and Evaluations / The Count myself for the ensuing example in this application are true, and the list of books prescrission such as change in time at in the event of any information. He count of the information. He counted by the College staff and by tification of the information. He counted in the information. He could be information. He could be information. He college staff and by tification of the information. He could be information. He college staff and by tification of the information. He could be information. He college staff and by tification of the information. He college staff and by tification of the information. He college staff and by tification of the information. He college staff and by tification of the information. He college staff and by tification of the information. He college staff and by tification of the information. He college staff and by tification of the information.	Student's Personal Student's Personal Student's Personal Paper in Mobile no: 919920472555 Category: Open Details: Sem III(Regular-Rev16) Fresher e select Paper details which you want to appear (UA: Paper Name nancial Accounting and Auditing IX - Financial Accounting and Auditing IX - Cost Accounting usiness Economics VI ommerce VI irrect and Indirect Taxation Paper II Exam Form Late Fee Total: MICR No: ne): ne): ne): ation and Evaluations / The Controller Of Examination and the list of books prescribed for the examination sist on such as change in time or day fixed for universit at in the event of any information being found false or //Chairperson ned by the College staff and by me. The information profification of the information. He/she is regular student ording to university rules.	Student's Personal Information HALI SHYAM DIPESH e:Hindi alpanagri mulund w B. R road Vaishali nagar ii, District: Mumbai City, State: Maharashtra, PIN: 400080 Mobile no: 919920472555 Category: Open Physically Details: Sem III(Regular-Rev16) Exam Event Paper Name Pa	Eligible Student's Personal Information	Eligible Nationality: India	Eligible Nationality: India Student's Personal Information Nationality: India Student's Personal Information Mother's Name: HEENA College Receipt No. and Date: India Student's Personal Information Nother's Name: HEENA College Receipt No. and Date: India Student's Personal Information Nother's Name: HEENA College Receipt No. and Date: India Student's Personal Information Nother's Name: HEENA College Nother Nother's Name: HEENA College Nother's Name: HeENA College Nother's Name: HEENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA College Nother's Name: HeENA			



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination 10973	36	Division/Section:	Roll No	o.:	Hirash	
	2018016400933961	P	Provisional						77.4	
nstrı	uction Medium:					Nationality:	India			
					Personal Information	on				
Stude	ent's Name: SINGH	I AVINASH KI	UMAR DASHRATI	<u>+</u>		Mother's Name: PO	MANOC	(Gender: Male	
Name	e in Vernacular Langua	age:सिंग अविन	नाश कुमार दशरथ							
	ess: ROOM NO.479, J									
	MUMBAI, Taluka: Kurl	la, District: Μι								
	phone no.:		Mob tegory: Open	oile no: 9187674792		Handicap: No	I: mr.avinash	ısingh89	0@gmail.com	
	: Oct 16, 2001		70							
	ious Latest Examinatio		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83752 (Status: Pass)	
Exam form appearance type: Fresher										
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment) SN Paper Code Paper Name								ment)	^ ^ ^ T	
SN 1	Paper Code 83001	Financial Ac		ting IX - Financial Ac		Th-U	11 11	AM - AT		
2	83007	+		ting X - Cost Accoun			Th-U			
3 83013 Business Economics VI						Th-UA []				
4 83014 Commerce VI							Th-UA[]			
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C			
6 83020 Computer systems and Applications Paper II Th-UA									-CA[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees	
Mark	Statement Fee		Total:							
	nent Details:	Amount Recei	ivod:		College Receipt I	No and Date:				
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	er Preference (Code/N	 lame):	WIIOTTTO.					·.		
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	Director, Board of Exam	,	Evaluations / The C	ontroller Of Examin	ation,			Place:	Vidyavihar	
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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 university	ersity Examinatio	on etc. on religious or	r any			
	r ground. I understand t elled or rejected.	that in the eve	ent of any informate	on being found false	e or incorrect, my	candidature is liable	e to be			
	<u>, </u>							St	tudent's Signature	
	aration by Principal/HO									
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			Examination form 109737	n No.:	Division/Section:	Roll No.	.:	- sl	
	2018016400933976		Eligible						- 9
Instru	uction Medium:		-			Nationality:	India		-
				Student's Perso	onal Informati	on			
Stud	ent's Name: JAIN T	ANISH JITEN	IDRA			Mother's Name: C	HANDRALEKI	HA (Gender: Male
Nam	e in Vernacular Langua	ge:जैन तनिश	ा जितेंद्र कुमार						
				WL, HARIYALI VILLAG					
City:	VIKHROLI EAST, Talu	ka: Kurla, Di		urban, State: Maharash	tra, PIN: 4000	083			
	ohone no.:			ile no: 917208113626					
	: Oct 20, 2000		tegory: Open		Physically Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 72	83294 (Status: ATKT)
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	isc sciecti a	per details writerry	Paper Name	- Offiversity P	133C33IIICIII, OA - 00	liege Assessin	iciti)	AM - AT
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5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	۸[]	
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Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	mount Rece	ived:	Col	lege Receipt	No. and Date:			
DD N		unount rece	MICR No:		College Receipt No. and Date: DD Date: B				
	er Preference (Code/Na	ame):			22 2410.			•	
	ie Preference (Code/Na								
To, E	Director, Board of Exam	ination and E	Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar
				nination. I have remitted				Date:	•
				complete and correct to bed for the examination				Date.	
requ	est for any special cond	ession such	as change in time	or day fixed for universi	ty Examination	n etc. on religious o	r any		
	r grouna. I understand t elled or rejected.	nat in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be		
	•							St	udent's Signature
	aration by Principal/HO	=							
				r me. The information pre/ e/she is regular student					
	se/term work (if any) ac			orono io rogalai olaaoiii	. 0	,o aaao oop.o			and and product.
Place	9:								
D				1					
Date	:			College Staff Signature			Seal and Signature of		
			College Stall Signature			Principal/HOD/Chairperson			



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	bility Status:	Examination f 10973		Division/Section:	Roll No).:	Ohumasla	
	2018016400933984		Eligible		-					
Instr	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: MIR SF	IUMAILA NO	OR MOHAMMED			Mother's Name: AC	QUEELA		Gender: Female	
Nam	e in Vernacular Langua	ige:मीर शुमैल	ा नूर मोहम्मद							
Addr	ess: 35/4, LIG COLON	Y V B NAGAF	R, PIPE ROAD KU	RLA WEST						
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, F	PIN: 400070					
Tele	phone no.:		Mob	ile no: 91900403157	71	Emai	l : aqueela.me	eer.am@	gmail.com	
DOB	: Oct 30, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	t No: 728	33706 (Status: Pass)							
Exam form appearance type: Fresher										
Pape	er Details: Plea	ise select Par	per details which y	ou want to appear (I	UA - University A	Assessment,CA - Col	lege Assessn	nent)		
SN	Paper Code			Paper Nan	ne				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	counting	Th-U	A[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	ting		Th-U	A[]		
3	83013	Business Eco	onomics VI				Th-U	A[]		
4 83014 Commerce VI Th-t								h-UA []		
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA []									
Con	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	ment Details:	Amount Recei			College Receipt	No and Date:				
DD N			MICR No:		DD Date:	140. drid Bate.	Bank	·		
	er Preference (Code/Na		WIIOTTTO.		DD Date.		Bank	·-		
	ue Preference (Code/Na									
	Director, Board of Exam			ontroller Of Examina	ation.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	l hereby	li lace.	viuyaviilai	
decla	are that all statement m	ade in this ap	oplication are true,	complete and correc	t to the best of m	ny knowledge and be	elief. l	Date:		
	gone through the sylla est for any special conc									
othe	r ground. I understand t									
canc	elled or rejected.							Stı	udent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on .							
This 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	ə:									
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 2021 event.

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	PRN:	Eligi	bility Status:	Examination for 109739		Division/Section:	Roll No.	:	0	
:	2018016400933992		Eligible						S.K	
nstru	uction Medium:					Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stude	ent's Name: KHAN	SALMAN AB	DUL HAMID			Mother's Name: Sa	AFINA	(Gender: Male	
Nam	e in Vernacular Langua	age:खान सलग	गान अब्दुल हमीद							
Addr	ess: ROOM 250, SON	AWANE CHA	WL, GROUP NO.	3, TAGORE NAGAR,	i					
City:	VIKHROLI EAST, Talı	ıka: Kurla, Di	strict: Mumbai Sub	urban, State: Mahara	shtra, PIN: 4000	083				
Telep	phone no.:		Emai	l : skhan9970	3@gma	il.com				
OOB	: Oct 27, 2000	Ca	tegory: Open		Physically	Handicap: No				
Previ	ous Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83351 (Status: Pass)	
Exan	n form appearance typ	e: Fresher								
Pape	r Details: Plea	ase select Pa	per details which y	ou want to appear (L	JA - University A	Assessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Ac	counting and Audit	ing IX - Financial Acc	ounting	Th-U/	4[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounti	ng		Th-U/	4[]		
3	83013	Business Ec	onomics VI				Th-U/	4[]		
4	83014	Commerce \	/I				Th-U/	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	4[]		
6	83023	Investment A	Analysis and Portfo	lio Management Pap	er II		Th-CA	4[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Rece	ived:	Ic	College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/N	lame):					<u> </u>			
√enu	e Preference (Code/N	ame):								
Γο, C	Director, Board of Exan	nination and E	Evaluations / The C	ontroller Of Examina	tion,			Place:	Vidyavihar	
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eque	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 ev	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be			
Janic	elled of rejected.							St	udent's Signature	
Decla	aration by Principal/HC	DD/Chairperso	on							
	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility 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) a			ersile is regular stude	ent of this Collet	ge and has complete	u ine required	auenua	ance and practical	
Place	e :									
				-						
Date:										
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			
				1		Principal/HOD/Cha		an poroon		



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 109740	No.:	Division/Section:	Roll No.:	.:	00.7
2	2018016400934001	Eligible				1		8
nstru	uction Medium:	-			Nationality:	India		
			Student's Person	nal Informati	on			
stude	ent's Name: VEGAD	DRASHTI VASANT			Mother's Name: DA	KSHA	(Gender: Female
 lam	e in Vernacular Languaç	 ge:हष्टी						
ddr	ess: 605, Amrut Tower,	Dadasaheb gaikwad road Opp	tambe nagar					
City:	mumbai, Taluka: Mumb	oai, District: Mumbai City, State	: Maharashtra, PIN: 4000	080				
eler	phone no.:	: chahhivegad	d@gma	il.com				
ОВ	: Nov 19, 1999	Category: Open		Physically	Handicap: No			
revi	ous Latest Examination	n Details: Sem I(Regular-Rev16	j)	Exam Even	nt: Nov-2019	Seat	No: 701	14621 (Status: Pass)
xam	n form appearance type:	: Fresher						
ape	er Details: Pleas	se select Paper details which y	ou want to appear (UA -	University A	Assessment,CA - Colle	ege Assessm	ient)	
SN	Paper Code		Paper Name					AM - AT
1	83001 F	Financial Accounting and Audit	ing IX - Financial Accour	nting		Th-UA	۱[]	
2	83007 F	Financial Accounting and Audit	ing X - Cost Accounting			Th-UA	۱[]	
3	83013 E	Business Economics VI				Th-UA	۱[]	
4	83014 C	Commerce VI				Th-UA	١[]	
5	83015 E	Direct and Indirect Taxation Pa	per II			Th-CA	۱]	
6	83016 E	Export Marketing Paper II				Th-CA	۱] ۲	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees
/lark	Statement Fee	Total:						
		<u> </u>						
_		mount Received:	<u> </u>		No. and Date:	<u> </u>		
DD N		MICR No:		DD Date:		Bank:	<u>. </u>	
	er Preference (Code/Na	<u> </u>						
	ue Preference (Code/Nai	•						
		ination and Evaluations / The C					Place:	Vidyavihar
		ent myself for the ensuing exam					Date:	
		ade in this application are true, bus and the list of books prescri						
eque	est for any special conce	ession such as change in time	or day fixed for university	y Examinatio	on etc. on religious or	any	l	
	r ground. I understand th elled or rejected.	hat in the event of any informati	on being found false or i	ncorrect, my	candidature is liable	to be	l	
u	Jilou di Tojodida.						Stı	udent's Signature
ecla	aration by Principal/HOD	D/Chairperson						
		ized by the College staff and by						
		ectification of the information. He cording to university rules.	e/she is regular student of	of this Collec	je and has completed	the required	attenda	ance and practical
,Oui c		——————————————————————————————————————						
Place	a ·							
100	<i></i>							

College Staff Signature



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Examination form No.:

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	PRN:	Eligi	ibility Status:	109741	ii NO	Division/Section:	Roll No.	.:	
2	2018016400934016		Eligible		III				Payale
Instru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: RAJBH	HAR PRIYA N	IANDLAL			Mother's Name: SA	NJU	(Gender: Female
Nam	e in Vernacular Langua	age:राजभर प्रि	ाया नंदलाल						
Addr	ess: Room NO 11,Sai	krishna Buildi	ing Juna Ayre Roa	d, Near Saibaba Mandii	ir				
City:	Dombivli, Taluka: Kaly	yan, District: T	hane, State: Maha	rashtra, PIN: 421201					
Teler	phone no.:		Mob	pile no: 917900163452	no: 917900163452 Email : priyarajbhar03@gmail.com				
DOB	: Jul 29, 2000	Cat	tegory: Open		Physically	Handicap: No			
	ious Latest Examinatio		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	. No: 728	83498 (Status: Pass)
	n form appearance type								
 -		ase select Par	per details which y	ou want to appear (UA	- University A	Assessment,CA - Coll	lege Assessm	nent)	
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ting IX - Financial Accou	ınting		Th-UA		
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounting	J		Th-UA		
3	83013	Business Eco	onomics VI			Th-UA	4[]		
4	83014	Commerce V	/1			Th-UA	Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	۹[]	
6	83029	Elements of	Operational Resea	ırch Paper II			Th-CA	1 []	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	ı Fees
Mark	Statement Fee		Total:						
Davn	ment Details:	Amount Recei		Col	llogo Peceint	No. and Date:			
DD N		AIIIOUIII I NECCI	MICR No:	<u> </u>	DD Date:	NO. and Date.	Bank:		
	er Preference (Code/N	ησω 6).	IMIOIT IVO.		DD Date.			·	
	ue Preference (Code/N	-							
	·		 Evaluations / The C	Controller Of Examination	 on.			Place:	Vidyavihar
				nination. I have remitted		ed fee for the same.		i idee.	Viuyaviilai
decla	are that all statement m	nade in this ap	pplication are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:	
nave reauc	gone through the sylla est for any special con	abus and the incession such	as change in time	ibed for the examination or day fixed for universit	า for which i a itv Examinatic	m appearing. i snaii i on etc. on religious or	not anv		
other	r ground. I understand			ion being found false or					
cance	elled or rejected.							St	tudent's Signature
Deck	aration by Principal/HC	DD/Chairpers	on						adolite olgilata.
	•	-		y me. The information pr	rinted in the f	orm is correct to the I	hest of mv kno	owledge	l also undertake the
respo	onsibility of fulfillment/r	rectification of	f the information. H	le/she is regular student					
cours	se/term work (if any) ac	ccording to un	niversity rules.						
<u> </u>									
Place:									
Data									
Date:				College Staff Signature		Seal and Signature of			
				College Staff Signature					D/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

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	PRN:	Eligi	ibility Status:	Examination for 109742	2	Division/Section:	Roll No).:	Lshul
2	2018016400934024		Eligible						XSV
nstrı	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: SEHRA	A PARAMJIT	BHUPINDER			Mother's Name: Al	MRIT		Gender: Male
Name	e in Vernacular Langua	age:सेहरा परम	ाजीत भूपिंदर						1
	ess: HOUSE NO. 15/4								
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400082									
Telephone no.: Mobile no: 917045287084 Email : PARAM.SE									GMAIL.COM
_	: Nov 25, 2000		tegory: Open			Handicap: No			
	ious Latest Examinatio		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83740 (Status: ATKT)
	n form appearance type								
Pape		ase select Par	per details which y	ou want to appear (U	JA - University A	ssessment,CA - Co	llege Assessn	nent)	
SN	Paper Code	<u> </u>		Paper Nam					AM - AT
1	83001			ing IX - Financial Acc			Th-U/		
2 83007 Financial Accounting and Auditing X - Cost Accounting						Th-U/			
3 83013 Business Economics VI							Th-U		
4	83014	Commerce V	<u>/I</u>				Th-U	A[]	
5	83015	Direct and In-	direct Taxation Pa	per II			Th-C/	I-CA[]	
6	83016	Export Marke	 				Th-C	A []	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Recei	ived.		College Receipt I	No and Date:			
DD N			MICR No:		DD Date:	10. 0 20	Bank		
	er Preference (Code/N								
	ie Preference (Code/N								
	Director, Board of Exam		Evaluations / The C	Controller Of Examina	tion.			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	Fiace.	Viuyaviiiai
decla	are that all statement m	nade in this ap	oplication 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	ground. I understand								
cance	elled or rejected.							St	tudent's Signature
Decla	aration by Principal/HC	D/Chairperso	on						
This respo	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	»:								
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 2021 event.

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Examination form No.:

Disciple 16



	PRN:	Eligibility Status:	109743	INO	Division/Section:	Roll No	.:	* Mran		
	2018016400934032	Eligible		I				W. B. Juak Hvon		
nstrı	uction Medium:	•			Nationality:	India				
			Student's Person	nal Informati	on					
Stud	ent's Name: HARSI	HAVARTHAN SURESH			Mother's Name: G.	AYATHRI DE'	VI C	Gender: Male		
Nam	e in Vernacular Langua	age:HARSHAVARTHAN SURES	SH							
٩ddr	ess: A WING 401 KOH	INOOR PLAZA, PUNA LINK RO	OAD, ABOVE BHARAT	GAS COMP	ANY, CHAKKINAKA	, KALYAN EA	ST			
City:	KALYAN, Taluka: , Dis	strict: Thane, State: Maharashtra	, PIN: 421306							
ГеІеј	ohone no.:	Mob	ile no: 919619528668	_	Emai	I : harishs171	1@gmai	il.com		
OOB	: Nov 17, 2000	Category: Open		Physically	Handicap: No					
Prev	ious Latest Examinatio	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33756 (Status: ATKT)		
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	ase select Paper details which ye	ou want to appear (UA -	University A	ssessment,CA - Co	llege Assessn	nent)			
SN	Paper Code		Paper Name				AM - AT			
1	83001	Financial Accounting and Auditi	ng IX - Financial Accour	nting		Th-U	۹[]			
2	83007	Financial Accounting and Auditi	ng X - Cost Accounting		Th-U	۹[]				
3	83013	Business Economics VI			Th-U	۹[]				
4	83014	Commerce VI						Th-UA[]		
5	83015	Direct and Indirect Taxation Page	per II					Th-CA[]		
6	83020	Computer systems and Applica	tions Paper II			Th-U	4 [] ;Th-	CA[]		
Conv	ocation Fee	Exam Form Late I	Fee	e Exam Form Super Late Fee			mination	Fees		
Mark	Statement Fee	Total:								
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_		Amount Received:	<u> </u>		No. and Date:	DI				
OD N		MICR No:	<u> </u> L	DD Date:		Bank				
	er Preference (Code/N	<u>'</u>								
	e Preference (Code/N	· · · · · · · · · · · · · · · · · · ·	entreller Of Eversinetien				I			
		nination and Evaluations / The C			d foo for the same	l horoby	Place:	Vidyavihar		
		sent myself for the ensuing example and in this application are true,					Date:			
		bus and the list of books prescri					-			
		cession such as change in time of that in the event of any informati								
	elled or rejected.	, , , , , , , , , , , , , , , , , , , ,	3	,				de alla O'a cata co		
Student's Signature							udent's Signature			
	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									
		ccording to university rules.	· ·	,	•			'		
Place	e:									
			_							
Date	:		Callaga Chaff Cianashura		Cool and Cimpohus of					
			College Staff Signature			Seal and Signature of Principal/HOD/Chairperson				



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	PRN:	Eligi	ibility Status:	Examination 1 10974		Division/Section:	Roll No.).:	the Special	
:	2018016400934047		Eligible						Aright in forchal	
nstrı	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: PANCH	HAL ANJALI N	MANOJ			Mother's Name: AN	NITABEN		Gender: Female	
Nam	e in Vernacular Langua	age:ANJALI								
Addr	ess: 18/B, Sahakar Da	ırshan Kisan r	nagar no. 1							
City:	THANE, Taluka: THAN	NE, District: T	hane, State: Maha	rashtra, PIN: 40060	4					
Геler	phone no.:		Moh	oile no: 91993076969	91	Emai	il : panchal_ml	k@yaho	oo.com	
ООВ	: Aug 11, 2001	Ca	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Se	m I(Regular-Rev16	<u>,) </u>	Exam Even	t: Nov-2019	Seat	ι No: 701	14635 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Pap€	er Details: Plea	ase select Pa	per details which y	ou want to appear (UA - University A	Assessment,CA - Col	llege Assessm	nent)		
SN	Paper Code			Paper Nar	me				AM - AT	
1	83001	Financial Ac	counting and Audit	ting IX - Financial Ac	counting		Th-UA	A []		
2	83007	Financial Ac	counting and Audit	ting X - Cost Accoun	ıting		Th-UA	A []		
3	83013	Business Eco	onomics VI				Th-UA	A []		
4	83014	Commerce V	/I					Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A []		
6	83023	Investment F	Analysis and Portfo	lio Management Pa	per II		Th-CA	A []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees	
Mark	Statement Fee		Total:							
		Amount Recei	T		College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank:	<u>: </u>		
	er Preference (Code/N									
	ue Preference (Code/Na									
	Director, Board of Exam							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	ct to the best of m	ny knowledge and be	elief. I	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			
	r ground. I understand t elled or rejected.	that in the eve	ent of any informate	on being found false	e or incorrect, my	candidature is liable	e to be			
Jane.	alled or rejected.							St	tudent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on							
respo	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	rectification of	f the information. H							
Place	ə: 									
Date:	:			College	e Staff Signature		Seal (and Sigr	nature of	
				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			Examination forr 109745	n No.:	Division/Section:	Roll No	.:	A	
;	2018016400934055	Eligible		III				news	
nstrı	uction Medium:	•			Nationality:	India			
			Student's Pers	onal Informati	on				
Stud	ent's Name: DOSHI	NILAY CHETAN			Mother's Name: Cl	HETNA	C	Gender: Male	
Nam	e in Vernacular Langua	ge:निलय दोशी							
Addr	ess: 201,trishala apt. p	k. road end, sarvodaya nagar N	Iulund West						
City:	Mumbai, Taluka: Mum	bai, District: Mumbai City, State	: Maharashtra, PIN: 400	0800					
Tele	ohone no.:	Mob	Emai	l : nilaydoshi0	2@gma	il.com			
OOB	: Dec 06, 1999								
Prev	ious Latest Examination	n Details: Sem I(Regular-Rev16)	Exam Even	t: Nov-2019	Seat	t No: 701	4634 (Status: ATKT)	
Exan	n form appearance type	e: 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	83001	Financial Accounting and Audit	ng IX - Financial Accounting				A []		
2	83007	Financial Accounting and Audit	ing X - Cost Accounting]		Th-U	A []		
3	83013	Business Economics VI				Th-U	A []		
4	83014	Commerce VI					Th-UA[]		
5	83015	Direct and Indirect Taxation Pa	oer II			Th-C	A []		
6	83016	Export Marketing Paper II				Th-C	A []		
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Davr	nent Details:	mount Received:	Col	llege Receipt	No. and Date:				
DD N		MICR No:	[00]	DD Date:	140. and Date.	Bank			
	er Preference (Code/Na			DD Date.		Barin			
	ie Preference (Code/Na	•							
	,	ination and Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar	
		ent myself for the ensuing exan			ed fee for the same.	I hereby	1 1000.	Vidyaviilai	
decla	ire that all statement m	ade in this application are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:		
		bus and the list of books prescr ession such as change in time							
othe	ground. I understand t	hat in the event of any informat							
canc	elled or rejected.						Stı	udent's Signature	
Deck	Declaration by Principal/HOD/Chairperson								
This	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								
	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.								
cour	se/term work (ii any) ac	cording to university rules.							
Place	<u> </u>						_		
iact	.								
)a+c									
Date	•		College Staff Signature		Seal and Signature of				
			College Staff Signature					D/Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			bility Status:	Examination form 109746	1 No.:	Division/Section:	Roll No).:	Harman
	2018016400934063		Eligible		ı III				
ารtrเ	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	ion			
tude	ent's Name: SANDH	<u>IU HARMANI</u>	PREETSINGH JAF	RNAILSINGH		Mother's Name: Kl	JLWINDERK/	AUR (Gender: Male
lam	e in Vernacular Langua	age:संधू हरमन	।प्रीतसिंघ जर्नालसिंग						1
ddr	ess: 4/406 PANCHJAN	IYA CHS, NE	AR NAVODAYA E	NGLISH HIGH SCHOO	L,KISAN NA	GAR 1,THANE WES	Τ		
City:	THANE, Taluka: Thane	e, District: The							
	phone no.:		1	oile no: 919167234928		Emai	I : sandhuharr	mansing	gh05@gmail.com
	: Dec 22, 1999		tegory: Open		Physically Handicap: No				
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83527 (Status: ATKT)
	n form appearance type								
<u> </u>		ise select Par	per details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)	
SN	Paper Code			Paper Name					AM - AT
1				ting IX - Financial Accou			Th-U/		
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounting			Th-UA	A[]	
3		Business Eco	onomics VI				Th-UA[]		
4	83014	Commerce V	<u>/I</u>			Th-U/	Th-UA[]		
5	83015	Direct and In-	ndirect Taxation Pa	per II			Th-C	A[]	
6		Export Marke	eting Paper II				Th-C	A[]	
onv	ocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
/lark	Statement Fee		Total:		<u> </u>				
	nent Details:	Amount Recei		Coll	loge Receipt	No and Date:			1
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	er Preference (Code/Na		IVIICIT INC.		DD Date.		Bank	LT.	
	ue Preference (Code/Na								
	`		Evaluations / The C	Controller Of Examination	<u> </u>			T _{DI}	N. 7
				nination. I have remitted		ad foo for the same	Lhoroby	Place:	Vidyavihar
Iecla	are that all statement ma	nade in this ap	pplication are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:	
				ibed for the examination or day fixed for universit				\vdash	
ther	r ground. Í understand tl			ion being found false or					
ance	elled or rejected.		-	-			I	l st	tudent's Signature
العور	aration by Principal/HO	\D/Chairners(<u> </u>						udent's orginature
		-		y me. The information pr	ripted in the f	form is correct to the	bost of my kn	-owledge	a Lalco undertake the
espo	onsibility of fulfillment/re	ectification of	f the information. H	le/she is regular student					
	se/term work (if any) ac			-		•			•
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Place	3 :						I		
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)ate:	:			O. II O W. O		01.010			
				College Staff Signature			Seal and Signature of 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination fo 109747	7	Division/Section:	Roll No.	.:	Niyati	
7	2018016400934086		Eligible						0	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stud	ent's Name: SHAH I	NIYATI SANJ	JAY			Mother's Name: BE	ELA	(Gender: Female	
Nam	e in Vernacular Langua	age:SHAH NI	YATI SANJAY							
Addr	ess: 14 PANBHAI NIW	AS VP ROAD	CROSS KASTUF	RBA ROAD MULUNE	WEST					
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, Pl	IN: 400080					
Teler	phone no.:		Moh	oile no: 918291219297	7	Emai	l : shahniyati4	7@gma	nil.com	
DOB	: Jul 13, 2000	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	t: Nov-2019	Seat	ι No: 728	33549 (Status: ATKT)			
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear (U	JA - University A	ssessment,CA - Co	lege Assessm	nent)		
SN	Paper Code			Paper Nam	Paper Name				AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Acc	ounting		Th-UA	A []		
2	83007	Financial Ac	counting and Audit	ting X - Cost Accounti	ng		Th-UA	Α[]		
3	83013	Business Eco	onomics VI				Th-UA	A []		
4	83014	Commerce V	/1				Th-UA	A []		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A []		
6	83016	Export Marke	eting Paper II				Th-CA	A []		
Conv	ocation 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	<u>:</u>		
	er Preference (Code/Na									
	ue Preference (Code/Na									
	Director, Board of Exam							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	t to the best of m	ny knowledge and be	elief. I	Date:		
reque	est for any special cond	cession such	as change in time	or day fixed for univer	rsity Examinatio	n 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	or incorrect, my	candidature is liable	to be			
Janu	alled of rejected.							St	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on							
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	э:									
Date	:			College	Staff Signature		Seal a	and Sigr	nature of	
				College Stall Signature					D/Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

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	PRN:	Eligi	ibility Status:	Examination f 10974		Division/Section:	Roll No) .:	= Asal
2	2018016400934094		Eligible					ļ	S Asof
nstrı	uction Medium:			-		Nationality:	India		
				Student's Pr	ersonal Informati	on			
Stude	ent's Name: SAYYE	ED ASMA ABI	UBAKAR			Mother's Name: FA	AUZIYA		Gender: Female
	e in Vernacular Langua								
	ess: ROOM NO 05 1S								
	MUMBAI, Taluka: Kurl	la, District: Μι							
	phone no.:		I	oile no: 91797769248	1		il : asmasayye	ed8149@	ฏgmail.com
	: Aug 26, 2000		tegory: Open			Handicap: No			
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Sea	t No: 728	83540 (Status: Pass)
	n form appearance type								
		ase select Par	per details which y	ou want to appear (ssessment,CA - Co	lege Assessr	nent)	
SN	Paper Code	<u> </u>		Paper Nar					AM - AT
1				ting IX - Financial Ac			Th-U		
2		+		ting X - Cost Account	ting		Th-U		
3	83013	Business Eco					Th-U		
4		Commerce V					Th-U		
5		+	ndirect Taxation Pa				Th-C		
6		Computer sy	stems and Applica				'	IA [] ;Th-	
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Payn	ment Details:	Amount Recei			College Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bank	k:	
Cent	er Preference (Code/N	lame):	1						
	ue Preference (Code/Na								
To, C	Director, Board of Exam	nination and F	Evaluations / The C	Controller Of Examina	ation,			Place:	Vidyavihar
	uest permission to pres							<u></u>	
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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 telled or rejected.								
Carro	elled of rejected.							St	tudent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
respo	form is carefully scrutir onsibility of fulfillment/re se/term work (if any) ac	rectification of	f the information. H						
	sertenn work (ii a, , = -		IIVersity raiss.						
Place	ə: 								
Date							İ		
Date:				College	e 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

Disciple 16



	PRN:	Eligi [/]	ibility Status:	109749	II NO	Division/Section:	Roll No.	.:	las las
:	2018016400934105		Eligible		l III				Janchal
nstru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stud	lent's Name: SHARM	//A AANCHAI	L CHANDRABHAN	Ī		Mother's Name: PU	JSHPA		Gender: Female
lam	ne in Vernacular Langua	ıge:शर्मा आंचर	ल चंद्रभान						
ddr	ess: A WING ROOM N	O. 905 SAI S	IDDHI BLDG NO.	18, OPP. KOHINOOR F	HOSPITAL KI	JRLA WEST			
City:	MUMBAI, Taluka: Kurla	a, District: Μι	umbai Suburban, S	State: Maharashtra, PIN:	: 400070				
elep	phone no.:		Mob	oile no: 919076390987		Email	l : man2066.m	ns@gma	ail.com
ОВ	3: Nov 17, 1999	Cat	tegory: Open		Physically Handicap: No				
revi	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83744 (Status: ATKT)
xan	n form appearance type	e: Fresher							
ape	er Details: Plea	se select Par	per details which y	ou want to appear (UA	University A	ssessment,CA - Col	lege Assessm	nent)	
SN	Paper Code			Paper Name					AM - AT
1	83001 I	Financial Acc	counting and Audit	ing IX - Financial Accou	unting		Th-UA	۹[]	
2	83007 I	Financial Acr	counting and Audit	ing X - Cost Accounting	 J	Th-UA	4 []		
3	83013 I	Business Eco	onomics VI			Th-UA	4[]		
4	83014	Commerce V	/I						
5	83015 I	Direct and In	ndirect Taxation Pa	per II	er II			۹[]	
6	83029 I	Elements of	Operational Resea	rch Paper II			Th-CA	A []	
Conv	vocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exan	mination	Fees
/lark	Statement Fee		Total:						
_		Amount Recei	1	<u> </u>	llege Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bank:	<u> </u>	
	ter Preference (Code/Na								
	ue Preference (Code/Na	-							
				Controller Of Examination				Place:	Vidyavihar
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	r ground. I understand the celled or rejected.	hat in the eve	ent of any informati	ion being found false or	incorrect, my	candidature is liable	to be		
anc	elled of rejected.							Stı	udent's Signature
)ecl	aration by Principal/HOI	D/Chairperso	on						
esp		ectification of	f the information. He	y me. The information pr le/she is regular student					
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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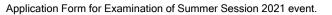


	PRN:	Eligi	ibility Status:	Examination form 109750	n No.:	Division/Section:	Roll No.	.:	200		
:	2018016400934113	 	Eligible		lIII		l _		Heres		
nstrı	uction Medium:					Nationality:	India				
				Student's Perso	onal Informati	on					
Stude	ent's Name: PATEL	ADITI BHAV	ESH			Mother's Name: SA	VITA		Gender: Female		
lam	e in Vernacular Langua	age:aditi									
ddr	ress: 790/11,Abhyudaya	a Nagar, Kala	achowki, Mumbai-4	,00033.							
City:	Mumbai, Taluka: Muml	bai, District: N	Numbai City, State	e: Maharashtra, PIN: 400)033						
eler	phone no.:		Moh	oile no: 919082628629	no: 919082628629 Email : aditipatel552@gmail.com						
ОВ	3: Mar 11, 2000	Cat	tegory: Open		Physically	Handicap: No					
revi	rious Latest Examinatior	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83719 (Status: ATKT)		
xan	n form appearance type	e: Fresher									
ape	er Details: Plea	ise select Par	per details which y	ou want to appear (UA	- University A	ssessment,CA - Col	lege Assessm	nent)			
SN	Paper Code			Paper Name	Paper Name				AM - AT		
1	83001	Financial Acc	counting and Audit	ting IX - Financial Accou	ınting		Th-UA	4[]			
2	83007	Financial Acr	counting and Audit	ting X - Cost Accounting			Th-UA	4[]			
3	83013	Business Eco	onomics VI			Th-UA	4[]				
4	83014	Commerce V	/I		1				Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II	rll				Th-CA[]		
6	83016	Export Marke	eting Paper II				Th-CA	A []			
onv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
/lark	Statement Fee		Total:								
		Amount Recei	1	<u> </u>		No. and Date:					
DD N			MICR No:		DD Date:		Bank:	<u>:</u>			
	ter Preference (Code/Na										
	ue Preference (Code/Na										
				Controller Of Examination				Place:	Vidyavihar		
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eque	est for any special conc	cession such	as change in time	or day fixed for universit	ty Examinatio	on etc. on religious or	any				
		hat in the eve	ent of any informati	ion being found false or	incorrect, my	candidature is liable	to be				
anc.	celled or rejected.							St	udent's Signature		
)ecl	aration by Principal/HO	D/Chairperso	on								
espo	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 Str	aff Signature				nature of		
							Princi	.pai/HOL	D/Chairperson		



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



 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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PRN: Eligibility Status:			Examination form 109751	1 No.:	Division/Section:	Roll No.	.:	North		
	2018016400934121	Eligible								
Instru	uction Medium:	_			Nationality:	India				
			Student's Perso	nal Informati	on					
Stud	ent's Name: RANGN	EKAR MANAS SAINATH			Mother's Name: SA	AILI	C	Gender: Male		
Nam	e in Vernacular Languag	je:manas								
Addr	ess: 16/570 deepjyoti su	ıbhash nagar chembur mumba	i 400071 16/568 deepjy	oti subhash n	nagar chembur mum	bai 400071				
City:	mumbai, Taluka: Kurla,	District: Mumbai Suburban, Sta	ate: Maharashtra, PIN: 4	400071						
Tele	ohone no.:	Mob	ile no: 919920870634		Emai	l : aniketrocks	777@gr	nail.com		
DOB	: Sep 11, 2000	Category: Reserved (0	OBC)	Physically	Handicap: No					
Prev	ious Latest Examination	Details: Sem I(Regular-Rev16)	Exam Even	t: Nov-2019	Seat	No: 701	4698 (Status: Pass)		
Exan	n form appearance type:	Fresher								
Pape	r Details: Pleas	se select Paper details which yo	ou want to appear (UA	 University A 	ssessment,CA - Co	llege Assessm	nent)			
SN	Paper Code		Paper Name				AM - AT			
1	83001 F	inancial Accounting and Auditi	ng IX - Financial Accou	nting		Th-UA	۹[]			
2	83007 F	inancial Accounting and Auditi	ng X - Cost Accounting			Th-UA	A[]			
3	83013 E	Business Economics VI				Th-UA	۹[]			
4	83014 C	Commerce VI						Th-UA[]		
5	83015	Direct and Indirect Taxation Par	oer II			Th-CA	A[]			
6	83016 E	Export Marketing Paper II					۹[]			
Conv	ocation Fee	Exam Form Late F	Fee	ee Exam Form Super Late Fee			nination	Fees		
Mark	Statement Fee	Total:								
	.5		lo "							
		mount Received:	<u> </u>		No. and Date:	- Is .				
DD N		MICR No:		DD Date:		Bank	:			
	er Preference (Code/Na	•								
	e Preference (Code/Na	,								
		nation and Evaluations / The C					Place:	Vidyavihar		
decla	are that all statement ma	ent myself for the ensuing exam de in this application are true, o	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:			
		ous and the list of books prescri ession such as change in time of								
		at in the event of any information								
canc	elled or rejected.						St.	udent's Signature		
Dool	aration by Principal/UOF)/Chairneman					Sit	duent'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								Lalso undertake the		
resp	onsibility of fulfillment/re	ctification of the information. He	e/she is regular student	of this Colleg	ge and has complete	d the required	l attenda	ince and practical		
cour	se/term work (if any) acc	cording to university rules.	-							
Place	e :									
			_							
Date			Callaga Stoff Signatura		CI-	d C:	ations of			
			College Staff Signature				and Sign pal/HOD	ature of D/Chairperson		



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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 109752		Division/Section:	Roll No	:	ala:	
	2018016400934136		Eligible						Somothe	
Instru	uction Medium:	!				Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stud	ent's Name: AYARE	NIMISHA AF	RVIND			Mother's Name: SI	JJATA	(Gender: Female	
Nam	e in Vernacular Langua	ge:आयरे निवि	मेषा अरविंद							
Addr	ess: B4-69, D.G.Q.A C	OLONY JAG	DUSHA NAGAR (GHATKOPAR (W)						
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, P	IN: 400086					
Tele	phone no.:		Mob	ile no: 91829124803	3	Emai	l : nimishaaya	re14@g	gmail.com	
DOB	: Dec 14, 2000	Cat	egory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat								: No: 728	33149 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape	er Details: Plea	se select Pa _l	per details which y	ou want to appear (l	JA - University A	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	counting	Th-UA	۹[]			
2	83007	Financial Acc	counting and Audit	ng X - Cost Accounting				۹[]		
3	83013	Business Eco	onomics VI		Т			4[]		
4 83014 Commerce VI								A[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	Th-CA[]		
6 83023 Investment Analysis and Portfolio Management Paper II							Th-CA	4[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	mount Recei	ived:	0	College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):	I .				I			
	ue Preference (Code/Na									
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examina	tion,			Place:	Vidyavihar	
	uest permission to preseare that all statement ma							Date:		
	gone through the syllal									
	est for any special conc r ground. I understand t									
canc	elled or rejected.		,	3	,			_ ر	de alla O'a callana	
Student's Signature							udent's Signature			
	eclaration 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 isponsibility 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 un	iversity rules.							
Place	e:									
				_						
Date:				College Staff Signature		Seal	and Siar	nature of		
			College Staff Signature					D/Chairperson		



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

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 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligi	ibility Status:	Examination form 109753	1 No.:	Division/Section:	Roll N	No.:	Namira.		
:	2018016400934144		Eligible		III			!	(I Van		
nstrı	uction Medium:			·		Nationality:	India				
				Student's Perso	onal Informati	on					
Stude	ent's Name: SHAIKH	H NAMIRA FA	AKIR MOHD			Mother's Name: SH KHATOON	IABANA	(Gender: Female		
Nam [,]	e in Vernacular Langua	ige:शेख नामीः	रा फकीर मोहम्मद								
Addr	ess: DURGA MANDIR,	ROOM NO.	J1, PLOT NO.6 LIN	NE - C, BAIGANWADI G	GOVANDI, MI	JMBAI					
City:	MUMBAI, Taluka: Kurla	a, District: Mu		State: Maharashtra, PIN:	400043						
Telephone no.: Mobile no: 919769141583 Email : saniya						ı : saniyasa	yyad98@ç	gmail.com			
	: Jul 07, 1999	tegory: Open		Physically	Handicap: No						
	ious Latest Examination	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Se	eat No: 728	83569 (Status: Pass)			
	n form appearance type										
 -		se select Par	per details which y	ou want to appear (UA	- University A	ssessment,CA - Col	lege Asses	sment)			
SN	Paper Code			Paper Name					AM - AT		
1	5							-UA []			
2 83007 Financial Accounting and Auditing				ing X - Cost Accounting	1			-UA []			
3 83013 Business Economics VI					Th-L				h-UA []		
4		Commerce V	<u>/I</u>				Th-	-UA []			
5 83015 Direct and Indirect Taxation Paper II Th-CA[]											
6	83020	Computer sy	stems and Applica	itions Paper II			Th-'	-UA [] ;Th-	-CA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	xamination	Fees		
Mark	Statement Fee		Total:								
¬	5 D - 4 - 11 - 1 A	· · · · · · · · · · · · · · · · · · ·		Call	' · · · Danaina	N					
		Amount Recei	T			No. and Date:		-1			
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	er Preference (Code/Na										
	ue Preference (Code/Na		Tolerations / The C	2 - traller Of Evendentie							
				Controller Of Examination		- I fac for the come	Lharabu	Place:	Vidyavihar		
decla	are that all statement ma	ade in this ap	pplication are true,	nination. I have remitted complete and correct to ribed for the examination	the best of m	ny knowledge and be	elief. I	Date:			
reque	est for any special conc	cession such a	as change in time	or day fixed for universit	ty Examinatio	n etc. on religious or	r any				
	r ground. I understand the elled or rejected.	hat in the eve	ent of any informate	tion being found false or	incorrect, my	candidature is liable	to be				
Jane	med of rejected.							St	tudent's Signature		
Deck	aration by Principal/HOI	D/Chairpersc	on								
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place): 										
Date				College Sta	aff Signature			al and Sigr ncipal/HO[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 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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k in your 'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination forn 109754		Division/Section:	Roll No.	.:	Poatana.	
	2018016400934152	Eligible		<u> </u>				The state of the s	
Instru	uction Medium:				Nationality:	India			
			Student's Perso	onal Informati	on				
Stud	lent's Name: RATHOI	D PRAFULLA SHAILESH			Mother's Name: A	LKA	G	Gender: Female	
Nam	ne in Vernacular Languag	ge:राठोड प्रफुल्ला शैलेश							
Addr	ess: SEVASASANG HO	DSPITAL, L.B.S MARG GHATK	OPAR WEST						
		a, District: Mumbai Suburban, S		: 400086					
	phone no.:	Mot	oile no: 919653347795		Ema	il : rathodpsa@	@gmail.c	om	
DOB	3: Sep 27, 2000	Category: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019						Seat	t No: 728	33510 (Status: ATKT)	
Exan	n form appearance type:	: Fresher							
Pape		se select Paper details which y	ou want to appear (UA	University A	Assessment,CA - Co	llege Assessm	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001 F	Financial Accounting and Audit	ing IX - Financial Accou	unting	A[]				
2	83007 F	Financial Accounting and Audit	ing X - Cost Accounting	9		Th-UA	A[]		
3	83013 E	Business Economics VI				Th-UA	A []		
4	83014 C	Commerce VI				Th-UA	A []		
5 83015 Direct and Indirect Taxation Paper II Th-C							A[]		
6	83020 C	Computer systems and Applica	ations Paper II			Th-UA	A [] ;Th-0	CA[]	
Conv	vocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
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_		mount Received:	Col		No. and Date:				
DD N		MICR No:		DD Date:		Bank	:		
	ter Preference (Code/Na	•							
	ue Preference (Code/Nai	<u>, , , , , , , , , , , , , , , , , , , </u>							
To, [Director, Board of Examination	ination and Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar	
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true, bus and the list of books prescr	complete and correct to	o the best of n	ny knowledge and b	elief. I	Date:		
reque other	est for any special conce r ground. I understand th	ession such as change in time hat in the event of any informat	or day fixed for universi	ity Examination	on etc. on religious o	r any			
	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	e:								
Date):								

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:



	PRN:	Eligi	bility Status:	109755	I INU	Division/Section:	Roll No	.:			
	2018016400934167		Eligible						Shillow Stalls		
Instr	uction Medium:					Nationality:	India				
				Student's Perso	nal Informati	on					
Stud	ent's Name: SHETT	TY SHODHAN	SADASHIVA			Mother's Name: St	JJATHA	(Gender: Male		
Nam	e in Vernacular Langua	age:SHETTY	SHODHAN सदाशिव	Т							
Addr	ess: ROOM NO.409,JA	AI BAJRANG	BALI CO-OPERAT	IVE, KHAMBADEV NA	GAR, SANT	ROHIDAS MARG.					
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	tate: Maharashtra, PIN:	400017						
Tele	ohone no.:		Mob	ile no: 917900058795		Emai	l : shodhansh	etty409(@gmail.com		
DOB	: May 27, 2000	Cat	tegory: Open		Physically Handicap: No						
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33591 (Status: Pass)		
Exar	n form appearance type	e: Fresher									
Pape	er Details: Plea	ase 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	83001	Financial Acc	counting and Auditi	ng IX - Financial Accou	nting		Th-U	۹[]			
2	83007	Financial Acc	counting and Auditi	ng X - Cost Accounting			Th-U	۹[]			
3	83013	onomics VI			Th-U	۹[]					
4 83014 Commerce VI									Th-UA[]		
5 83015 Direct and Indirect Taxation Paper				oer II			Th-C	۹[]			
6	83023	Investment A	Analysis and Portfol	io Management Paper	II		Th-C	۹[]			
Conv	ocation Fee		Exam Form Late I	-ee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee		Total:								
Payr	nent Details:	Amount Rece	ived:	Coll	ege Receipt	No. and Date:					
DD N			MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/N	lame):									
	ie Preference (Code/N										
To, [Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar		
				ination. I have remitted				Date:			
				complete and correct to bed for the examinatior				Date.			
requ	est for any special cond	cession such	as change in time of	or day fixed for universi	ty Examination	n etc. on religious or	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				
canc	clica of rejected.							St	udent's Signature		
Decl	aration by Principal/HC	D/Chairperso	on								
				me. The information pr							
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular student	of this Collec	ge and has complete	d the required	d attenda	ance and practical		
		ooranig to ai		1		1					
Place	e:										
Date	<u>.</u>										
				College Staff Signature			Seal and Signature of				
			1		Principal/HOD/Chairperson						



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Application Form for Examination of Summer Session 2021 event.

Examination form No.:

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PRN: Eligibility Status:				Examination form 109756	n No.:	Division/Section:	Roll No	.:	M. R. Vadelya	
	2018016400934183		Eligible						· Line ·	
nstr	uction Medium:					Nationality:	India	•		
				Student's Perso	onal Informat	ion				
Stud	ent's Name: VADOL	IYA MANSI I	RAMESHBHAI			Mother's Name: M	IANISHA	C	Gender: Female	
Nam	e in Vernacular Langua	age:Mansi rar	neshbhai Vadoliya							
Addı	ess: C/204 dedhia niwa	as Chheda ro	oad Dombivali (eas	st)						
City:	Dombivali, Taluka: Kal	yan, District:	Thane, State: Mah	arashtra, PIN: 421201						
	phone no.:			ile no: 918454837667	no: 918454837667 Email : mansivadoliya@gmail.com					
DOE	3: Oct 14, 2000	Cat	tegory: Open		Physically	Handicap: No				
⊃rev	ious Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Ever	t: Nov-2019	Sea	t No: 728	3645 (Status: ATKT)	
	n form appearance type									
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA	- University /	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1 83001 Financial Accounting and Audi							Th-U	A[]		
2 83007 Financial Accounting and Audi				ing X - Cost Accounting		Th-U	A[]			
3 83013 Business Economics VI						Th-U	A[]			
4	83014	Commerce V	/1					Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]		
6	83016	Export Marke	eting Paper II				Th-C	A[]		
Con	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
				0.11	D	No. and Date				
		Amount Rece	T			No. and Date:	D I			
1 DC			MICR No:		DD Date:		Bank	:		
	ter Preference (Code/Na									
	ue Preference (Code/Na		- I discontinuo (The C							
				controller Of Examinatio		16 6 11		Place:	Vidyavihar	
decl	are that all statement m	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examinatior	the best of r	ny knowledge and b	elief. I	Date:		
				or day fixed for universi						
		that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liabl	e to be			
canc	elled or rejected.							Stu	udent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on .					•		
resp		ectification of	the information. H	/ me. The information pre/she is regular student						
Plac	e:									
				_						
Date	:				" O.					
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

Disciple 16



PRN: Eligibility Status:		109757	IINO	Division/Section:	Roll No.	.:	(1) June		
2	2018016400934191		Eligible		l III	1			130
nstrı	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	ion			
Stude	lent's Name: SAPRA	A MANSI NITI	N			Mother's Name: TV	VINKLE	(Gender: Female
lam	ne in Vernacular Langua	age:मानसी							
ddr	ess: B- WING FLAT NO	O# 104 SHRE	E VARIYA FREIN	DSHIP CO-OP. HOUSI	NG SOCIETY	Y NEAR MARUTI MA	HADEV NAG	iAR,	
City:	DOMBIVALI, Taluka: ,	District: Thar	ne, State: Maharas	htra, PIN: 421201					
eler	phone no.:			pile no: 918291236565		Email	l : mnssapra@	<u>⊅</u> gmail.c	com
ОВ	3: Jun 08, 2000	Cat	tegory: Reserved (OBC)	Physically	/ Handicap: No			
revi	rious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	No: 728	83735 (Status: ATKT)
xan	n form appearance type	e: Fresher							
'ape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)	
SN	Paper Code	<u> </u>		Paper Name				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting		Th-UA	۹[]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	l .		Th-UA	۹[]	
3 83013 Business Economics VI						Th-UA	۹[]		
4	83014	Commerce V	/1			Th-U/	Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	۹[]	
6	83016	Export Marke	eting Paper II				Th-CA	Α[]	
Convocation Fee Exam Form Late Fee				Fee	Exam Form	Super Late Fee	Exar	mination	Fees
/lark	Statement Fee		Total:						
		^ :t Dooo	· - a.		In the December	No. and Date:			1
_		Amount Recei	T	<u> </u>		No. and Date:	Ponk		
DD N			MICR No:		DD Date:		Bank:	<u>:</u>	
	ter Preference (Code/Na								
	ue Preference (Code/Na	<u> </u>		`					
				Controller Of Examination		for for the come	l barabu	Place:	Vidyavihar
Iecla	are that all statement ma	nade in this ap	pplication are true,	nination. I have remitted complete and correct to	the best of m	ny knowledge and be	elief. I	Date:	
				ibed for the examination or day fixed for universit					
ther	r ground. I understand t			ion being found false or					
ance	celled or rejected.						1	St	tudent's Signature
Declaration by Principal/HOD/Chairperson									
	•	-		y me. The information pr	rinted in the f	form is correct to the	best of my kn	owledge	e. I also undertake the
espo	onsibility of fulfillment/re	ectification of	f the information. He	le/she is regular student					
course/term work (if any) according to university rules.									
Place:									
)ate:	:			College Stoff Signature			Sool and Signature of		
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



PRN:

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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Eligibility Status:

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Roll No.:

Division/Section:



2	2018016400934202		Eligible						Hetal 3
Instru	ction Medium:	-				Nationality:	India		
				Student's Person	nal Information	on			
Stude	ent's Name: PANC	HAL HETAL J	IITENDRABHAI			Mother's Name:	KOKILABEN	(Gender: Female
Name	e in Vernacular Langu	age:पांचाल हेत	ाल जितेंद्रभाई						
Addre	ess: B-110, 1ST FLOC	OR, JAI SHIVI	NERI HOUSING SO	DC., PADWAL NAGAR, V	WAGLE EST	ATE, THANE WE	ST		
City:	THANE, Taluka: Thar	e, District: Th	ane, State: Mahara	ashtra, PIN: 400604					
Telep	hone no.:		Mob	ile no: 918454910565		Em	ail : panchalhj	3@gmail	.com
DOB	May 27, 2001	Ca	tegory: Open		Physically	Handicap: No			
Previ	ous Latest Examination	on Details: Se	m III(Regular-Rev1	6)	Exam Event	:: Nov-2019	Sea	at No: 72	83450 (Status: Pass)
Exan	n form appearance typ	e: Fresher							
Pape	r Details: Ple	ase select Pa	per details which y	ou want to appear (UA -	University A	ssessment,CA - 0	College Assess	ment)	
SN	Paper Code			Paper Name					AM - AT
1 83001 Financial Accounting and Auditing IX - Financial Accounti					ting		Th-l	JA []	
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-l	JA []	
3 83013 Business Economics VI							Th-l	JA []	
4 83014 Commerce VI							Th-l	JA []	
5 83015 Direct and Indirect Taxation Paper II Th-CA []									
6 83016 Export Marketing Paper II Th-							CA []		
Convocation Fee Exam Form Late Fee					Exam Form S	Super Late Fee	Exa	amination	Fees
Mark	Statement Fee		Total:						
			. ,	0.11					
		Amount Rece			· .	No. and Date:	D	.l	
DD N		I\.	MICR No:		DD Date:		Bar	IK:	
	er Preference (Code/N								
	e Preference (Code/N		Evaluations / The C	ontroller Of Examination,				T _{=:}	
				nination. I have remitted t		nd foo for the same	a Lhoroby	Place:	Vidyavihar
decla	re that all statement n	nade in this ap	oplication are true,	complete and correct to t	he best of m	y knowledge and	belief. I	Date:	
				ibed for the examination to or day fixed for university					
other	ground. I understand			on being found false or ir					
cance	ancelled or rejected. Student's Signature								
Decla	aration by Principal/Ho	DD/Chairperso	on						
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the 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.								
Dlace	•								
Place	<i>.</i>			_					
Data									
Date:				College Staff Signature Seal and Signa					



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 109759		Division/Section:	Roll No	u:	Ø=0	
:	2018016400934225	Eligible						(AC)	
Instru	uction Medium:	•	•		Nationality:	India			
			Student's Person	onal Informati	on				
Stud	ent's Name: MESTF	RY SIDDHESH PANDURANG			Mother's Name: PF	RIYA	C	Gender: Male	
Nam	e in Vernacular Langua	age:मेस्त्री सिद्धेश पांडुरंग							
	ress: ROOM NO.3 SHA AD,BHANDUP WEST	NKAR PANDIAN CHAWL,DAT	TIWADI,JM ROAD,BHA	ANDUP WEST	ROOM NO.3 SHAN	IKAR PANDIA	AN CHA	WL,DATTIWADI,JM	
City:	Mumbai, Taluka: Kurla	, District: Mumbai Suburban, S	tate: Maharashtra, PIN:	400078					
Tele	phone no.:	Mol	bile no: 918454835055		Emai	l : siddheshme	estry320	@gmail.com	
DOB	3: Jan 12, 2001	Category: Reserved ((OBC)	Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev	16)	Exam Even	t: Nov-2019	Seat	t No: 728	33407 (Status: Pass)	
Exan	m form appearance type	e: Fresher							
Pape	er Details: Plea	ase select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001	Financial Accounting and Audit	ting IX - Financial Accou	unting		Th-U	A []		
2	83007	Financial Accounting and Audit	ting X - Cost Accounting	9		Th-U	A []		
3	83013	Business Economics VI				Th-U	Th-UA[]		
4	83014	Commerce VI				Th-U	A[]		
5 83015 Direct and Indirect Taxation Paper II Th-C							A[]		
6 83020 Computer systems and Applications Paper II Th-U							A [] ;Th-0	CA[]	
Conv	vocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
		<u> </u>				•			
_		Amount Received:	Col	llege Receipt	No. and Date:				
DD N		MICR No:		DD Date:		Bank	:		
Cent	ter Preference (Code/Na	ame):							
Venu	ue Preference (Code/Na	ame):							
To, E	Director, Board of Exam	ination and Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar	
decla	are that all statement m	ent myself for the ensuing exar ade in this application are true, bus and the list of books presci	complete and correct to	o 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	n etc. on religious or	any			
	r ground. I understand t elled or rejected.	that in the event of any informat	tion being found false or	r incorrect, my	candidature is liable	to be			
Caric	elled of rejected.						Stu	udent's Signature	
Decla	Peclaration by Principal/HOD/Chairperson								
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 esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place	e:								
Date									

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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Examination form No.:



	PRN:	Eligi	bility Status:	109760	II INO	Division/Section:	Roll No	.:	Flam	
2018016400934233 Eligible										
nstr	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stuc	ent's Name: MAJAL	KAR TEJAS	MURLIDHAR			Mother's Name: U	RMILA	G	ender: Male	
Nam	e in Vernacular Langua	age:तेजस मुर	त्रीधर माजलकर							
Add	ess: D/1 ,CHANDRAB	AI NIWAS NE	HRU NAGAR KAN	IJURMARG(EAST)						
City:	MUMBAI, Taluka: Kur	la, District: Mu	ımbai Suburban, S	tate: Maharashtra, PIN:	400042					
Tele	phone no.:		Mob	ile no: 918080072945	no: 918080072945 Email : majalkartejas11@gmail.com					
DOE	3: Aug 11, 2001	Ca	tegory: Open		Physically	Handicap: No				
⊃rev	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3385 (Status: Pass)	
Exai	n form appearance typ	e: Fresher								
Pap	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 83001 Financial Accounting and Aud				ing IX - Financial Accou	ınting		Th-U	A[]		
2 83007 Financial Accounting and Aud				ing X - Cost Accounting			Th-U	A[]		
3	83013	Business Ec	onomics VI			Th-U	••			
4	83014	Commerce \	<u>/I</u>				Th-U	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	A[]		
6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th-C/	A []		
Con	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination I	Fees	
Marl	Statement Fee		Total:							
Davi	ment Details:	Amount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD I		-tinount recc	MICR No:		College Receipt No. and Date: DD Date:			·•		
	ter Preference (Code/N	lame).	imorrito.		DD Date.		Bank	••		
	ue Preference (Code/N									
	,		 Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted		ed fee for the same.	I hereby	l lacc.	Viayaviilai	
				complete and correct to				Date:		
				ibed for the examination or day fixed for universi						
othe	r ground. I understand			on being found false or						
cano	elled or rejected.							Stu	dent's Signature	
Dec	aration by Principal/HC	DD/Chairperso	on .						J	
resp		ectification of	the information. H	r me. The information pre/she is regular student						
Plac	e:									
				_						
Date	:									
				College Sta	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 2021 event.

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PRN: Eligibility Status: Examination form No.: Division/S		Division/Section:	Roll No	ı.:	- a vadar-					
	2018016400934241	Eligible		III				22 rodor		
Instru	uction Medium:				Nationality:	India				
		_	Student's Pers	onal Informati	on					
Stud	ent's Name: KADAM	SURAJ SANTOSH			Mother's Name: S\	NATI	(Gender: Male		
Nam	e in Vernacular Languaç	ge:कदम सुरज संतोष								
Addr	ess: FLT, NO 13, GELD	A DHAM A WING 3RD FLOOF	RIFLE RANGE ROAL	NEAR MUM	BAI BANK					
City:	MUMBAI, Taluka: Kurla	, District: Mumbai Suburban, S	State: Maharashtra, PIN	I: 400086						
Tele	phone no.:	Mot	pile no: 918108489177		Emai	l : surajkadam	1531@g	mail.com		
DOB	3: Mar 26, 2000	Category: Open	_	Physically	Handicap: No					
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283311 (Status: ATKT)										
	Exam form appearance type: Fresher									
Pape	er Details: Pleas	se select Paper details which y	ou want to appear (UA	A - University A	ssessment,CA - Co	lege Assessn	nent)			
SN	Paper Code		Paper Name					AM - AT		
1		Financial Accounting and Audit	ing IX - Financial Accor	ng IX - Financial Accounting						
2	83007 F	Financial Accounting and Audit	ing X - Cost Accounting	g		Th-U	A[]			
3		Business Economics VI				Th-U				
4		Commerce VI			Th-U	.,				
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	8 83016 Export Marketing Paper II Th-CA []									
Conv	vocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee	Total:								
Pavn	ment Details: Ar	mount Received:	Co	llege Receipt I	No. and Date:					
DD N		MICR No:		DD Date:		Bank				
	ter Preference (Code/Na									
	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·								
To, C	Director, Board of Exami	nation and Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar		
		ent myself for the ensuing exar					_	•		
		ade in this application are true, ous and the list of books prescr					Date:			
requ	est for any special conce	ession such as change in time	or day fixed for univers	ity Examinatio	n etc. on religious or	r any				
othe	r ground. I understand the celled or rejected.	nat in the event of any informat	ion being found false of	r incorrect, my	candidature is liable	to be				
Caric	elled of rejected.						St	udent's Signature		
Decl	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									
		cording to university rules.			,					
Place	e:									
			_							
Date	c									
			College Si	College Staff Signature				nature of D/Chairperson		



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Application Form for Examination of Summer Session 2021 event.

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Examination form No.:

Disciple 16



PRN: Eligibility Status:			109762	Division/s	Section:	Roll No.	- Hay		
	2018016400934256 Eligible			Stories					
Instr	uction Medium:	-!		Nationali	ty:	India	•	_	
			Student's Perso	nal Information					
Stud	ent's Name: MOMA	YA AKANKSHA DEEPAK		Mother's	s Name: Bl	HAVANA	Gender: Female		
Nam	e in Vernacular Langua	ge:मोमय आकांशा दीपक							
Addr	ess: C WING 303 OM L	.AXMI PARK TUKARAM NAGA	R DOMBIVALI EAST						
City:	THANE, Taluka: Kalyar	n, District: Thane, State: Mahara	shtra, PIN: 421201						
Tele	ohone no.:	Mobi	le no: 919029100778		Emai	il : naynadand(@gmail.com		
DOB	: Feb 01, 2001	Category: Open		Physically Handicar	o: No				
Prev	ious Latest Examinatior	n Details: Sem III(Regular-Rev16	6)	Exam Event: Nov-20	19	Seat	No: 7283415 (Status: Pass)		
Exar	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Paper details which yo	ou want to appear (UA	 University Assessme 	nt,CA - Co	llege Assessm	nent)		
SN	Paper Code		Paper Name				AM - AT		
1	83001	Financial Accounting and Auditing	ng IX - Financial Accou	nting		Th-UA	A[]		
2	83007	Financial Accounting and Auditing	ng X - Cost Accounting		Th-UA	A[]			
3	83013	Business Economics VI				Th-UA	A[]		
4	83014	Commerce VI				Th-UA	Th-UA[]		
5	83015	Direct and Indirect Taxation Pap	er II			Th-CA	A[]		
6	83016	Export Marketing Paper II				Th-CA	A[]		
Conv	ocation Fee	Exam Form Late F	ee	Exam Form Super Lat	te Fee	Exam	nination Fees		
Mark	Statement Fee	Total:							
Pavr	nent Details:	mount Received:	Coll	ege Receipt No. and D	Jate.			_	
DD N		MICR No:	<u> </u>	DD Date:	ato.	Bank:	·	-	
	er Preference (Code/Na			DD Dato.		Barin.	•	_	
	ue Preference (Code/Na	•						_	
	`	ination and Evaluations / The Co	ontroller Of Examination	n,			Place: Vidyavihar	1	
		ent myself for the ensuing exam			the same.	I hereby	ridge. Vidyaviilai		
		ade in this application are true, o					Date:		
		bus and the list of books prescril ession such as change in time o						-	
othe	ground. I understand the	hat in the event of any information							
canc	elled or rejected.						Student's Signature		
Decl	aration by Principal/HO	D/Chairperson						_	
resp	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. He cording to university rules.							
		<u> </u>	T		T			٦	
Place	e:								
			-						
Date	:		College Ctr	off Signature		Cool o	and Signature of		
			College Staff Signature			Principal/HOD/Chairperson			



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	PRN:	Eligibility Status:	Examination fo 109763		Division/Section:	Roll No).:	RAS	
:	2018016400934264	Eligible						R.A. Reter	
Instru	uction Medium:				Nationality:	India			
			Student's Per	rsonal Informati	on				
Stud	ent's Name: PATEL I	RIMPAL ASHWIN			Mother's Name: RI	TABEN		Gender: Female	
Nam	e in Vernacular Languaç	ge:पटेल रिम्पल अश्विन							
Addr	ess: ROOM NO. 2/4 KA	ILASH NAGAR MG ROAD O	PP. SBI BANK GHATK	OPAR EAST					
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban,	State: Maharashtra, Pl	N: 400077					
Tele	phone no.:	Mo	bile no: 917666308828	3	Emai	l : amishapate	el231200	02@gmail.com	
DOB	: Oct 01, 2000	Category: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283722 (Status									
Exam form appearance type: Fresher									
Pape	er Details: Pleas	se select Paper details which	you want to appear (U	A - University A	ssessment,CA - Col	lege Assessr	nent)		
SN	Paper Code		Paper Nam					AM - AT	
1				ng IX - Financial Accounting					
2	-	Financial Accounting and Aud	iting X - Cost Accounting	ng		Th-U	A []		
3	-	Business Economics VI				Th-U			
4 83014 Commerce VI Th-UA									
5	83015	Direct and Indirect Taxation P	aper II			Th-C	A []		
6	6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA []								
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee	Total:							
Pavr	nent Details: Ar	mount Received:	C	ollege Receipt I	No. and Date:				
DD N		MICR No:		DD Date:		Bank	<u></u>		
Cent	er Preference (Code/Na	ıme):							
Venu	ue Preference (Code/Na	me):							
To, C	Director, Board of Exami	nation and Evaluations / The	Controller Of Examinat	tion,			Place:	Vidyavihar	
		ent myself for the ensuing exa					D-4	·	
		ade in this application are true ous and the list of books preso					Date:		
reque	est for any special conce	ession such as change in time	or day fixed for univer	sity Examinatio	n etc. on religious or	r any			
	r ground. I understand th elled or rejected.	nat in the event of any informa	tion being found false	or incorrect, my	candidature is liable	to be			
caric	Student's Signature								
Deck	aration by Principal/HOD	D/Chairperson							
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical source/term work (if any) according to university rules.								
Place	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)

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:			Examination form 109764	1 No.:	Division/Section:	Roll No).:	anager.	
:	2018016400934287		Eligible		<u> </u>				And warfer.
nstrı	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: QURES	SHI SHEHNA	Z DAWOOD			Mother's Name: Cl	HANDBEE	(Gender: Female
	e in Vernacular Langua	- •							
	ess: salam chawl room								
		a, District: Mı		State: Maharashtra, PIN:	: 400083				
	phone no.:			pile no: 917039967074		I	I : sonudawoo	odquresh	hi@gmail.com
	: Dec 28, 1998		itegory: Open		, , , ,	/ Handicap: No			
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283730 (Status: Pass)									83730 (Status: Pass)
	n form appearance type		1 - 9 - 11-6		11.1				
		ise select Par	per details which y	rou want to appear (UA	- University P	Assessment, CA - Co	ilege Assessn	nent)	
SN	Paper Code			Paper Name					AM - AT
1 83001 Financial Accounting and Aud 2 83007 Financial Accounting and Aud							Th-U/		
				ing X - Cost Accounting	1		Th-U/		
3						Th-U/			
4		Commerce V		11			Th-U/		
5			ndirect Taxation Pa	•			Th-C/		04.51
6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA [] Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees									
	vocation Fee		Exam Form Late	ree	Exam Form	Super Late Fee	Exar	mination	1 Fees
Mark	Statement Fee		Total:		<u></u>				
Payn	ment Details: A	Amount Recei	ived:	Col	lege Receipt	No. and Date:			
DD N	10:		MICR No:		DD Date:		Bank	C:	
Cent	er Preference (Code/Na	ame):						-	
Venu	ue Preference (Code/Na	ame):							
To, C	Director, Board of Exam	ination and F	Evaluations / The C	Controller Of Examination	n,			Place:	Vidyavihar
				nination. I have remitted				Date:	
				complete and correct to ibed for the examination				Date.	
reque	est for any special conc	cession such	as change in time	or day fixed for universit	ity Examinatio	on etc. on religious o	r any		
	r ground. I understand tl elled or rejected.	hat in the eve	ent of any informati	ion being found false or	incorrect, my	candidature is liable	e to be		
JUI	31100 01 10j00100.							St	tudent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
				y me. The information pr					
	onsibility of fulfillment/re se/term work (if any) ac			le/she is regular student	of this Coile	je and has complete	d the required	d attenua	ance and practical
									
Place	e:					!	1		
Date:	i.					ļ			
				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 2021 event.

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PRN: Eligibility Status:			Examination form 109765	n No.:	Division/Section:	Roll No.	.:	Nandini	
;	2018016400934314	Eligible						Manatha	
nstrı	uction Medium:	•			Nationality:	India			
			Student's Person	onal Informati	on				
Stud	ent's Name: MANGI	E NANDINI RANCHHOD			Mother's Name: RA	AMILA	(Gender: Female	
Nam	e in Vernacular Langua	ıge:मांगे नंदिनी रणछोड							
Addr	ess: 02, RAJDEEP BU	ILDING, GHANSHYAM GUPTE	ROAD, NEAR DON B	OSCO SCHO	OL,				
City:	DOMBIVLI, Taluka: Ka	lyan, District: Thane, State: Ma	narashtra, PIN: 421202						
Tele	ohone no.:	Mob	ile no: 919320919307		Emai	l : om.shipping	g07@gn	nail.com	
OOB	: May 19, 2000	Category: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sem I(Regular-Rev16)	Exam Even	t: Nov-2019	Seat	No: 701	14687 (Status: ATKT)	
Exan	n form appearance type	e: 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	83001	Financial Accounting and Audit	ng IX - Financial Accounting				۹[]		
2	83007	Financial Accounting and Audit	ng X - Cost Accounting	ng X - Cost Accounting					
3	83013	Business Economics VI				Th-UA	۹[]		
4	83014	Commerce VI					A[]		
5	83015	Direct and Indirect Taxation Pa		Th-CA	A[]				
6	83016	Export Marketing Paper II				Th-CA	۱] ۲		
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee	Total:							
Pavn	nent Details:	Amount Received:	Col	lege Receipt I	No. and Date:				
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	er Preference (Code/N			DD Date.		Bank	•		
	ie Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·							
	`	ination and Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
req	uest permission to pres	ent myself for the ensuing exan	nination. I have remitted	the prescribe	ed fee for the same.	l hereby		viayaviila.	
		ade in this application are true, bus and the list of books prescr					Date:		
		ession such as change in time							
othe	ground. I understand t	hat in the event of any informati							
canc	elled or rejected.						Stı	udent's Signature	
Deck	aration by Principal/HO	D/Chairperson							
		nized by the College staff and by							
		ectification of the information. Haccording to university rules.	e/she is regular student	of this Collec	e and has complete	d the required	l attenda	ance and practical	
Jours	Societiii work (ii ariy) ac	coraling to university rules.							
Place	<u>e:</u>								
	-		_						
Date									
	-		College St	aff Signature				nature of	
						Princi	pal/HOC	D/Chairperson	



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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: Eligibility Status:			-	109766		Division/Section:	Roll No.).I	Judan	
	2018016400934322		Eligible		ill .					
instru	uction Medium:					Nationality:	India			
				Student's Person	nal Informati	ion				
		WAL MAHEK				Mother's Name: Po	MANOC		Gender: Female	
	e in Vernacular Langua									
	ess: B-1/501, VIKAS C									
	THANE, Taluka: Thane	e, District: The								
	phone no.: 25472353		Mob	oile no: 919821062018		Emai	il : sbe2002@g	gmail.co	m	
	: Nov 02, 1999		tegory: Open		Physically	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	t No: 728	33137 (Status: ATKT)	
	n form appearance type	e: Fresher								
Pape	er Details: Plea	ment)								
SN	Paper Code			Paper Name	Paper Name				AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Accour	nting		Th-UA	A []		
2	83007	Financial Acr	counting and Audit	ting X - Cost Accounting			Th-UA	A []		
3	83013	Business Eco	onomics VI				Th-UA	A []		
4	83014	Commerce V	/I	Т				Th-UA []		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A []		
6	83016	Export Marke	eting Paper II				Th-C	A []		
Conv	ocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
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	ue Preference (Code/Na									
				Controller Of Examination				Place:	Vidyavihar	
decla	are that all statement m	nade in this ap	pplication are true,	nination. I have remitted complete and correct to	the best of m	ny knowledge and be	elief. I	Date:		
				ibed for the examination or day fixed for university				<u> </u>		
other	r ground. I understand t			ion being found false or i						
canc	elled or rejected.							l Sti	udent's Signature	
Dack	aration by Principal/HO	\D/Chairners						0	udent's Signature	
This 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 purse/term work (if any) according to university rules.									
Place	ə:									
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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: Eligibility		Eligibility Status:	Examination form 109767	n No.:	Division/Section:	Roll No).:	Suryanarayan			
	2018016400934337	Eligible		III							
Instru	uction Medium:				Nationality:	India					
			Student's Perso	onal Informati	ion						
Stud	ent's Name: DUBEY	SURYANARAYAN SUNILKUN	//AR		Mother's Name: SA	AVITA		Gender: Male			
Nam	e in Vernacular Languaç	ge:दुबेय सूर्यनारायण सुनीलकुमार									
		DHESHWAR GRIHNIRMAN S			GHATKOPAR WES	T MUMBAI					
_		a, District: Mumbai Suburban, S		: 400086							
	phone no.:		oile no: 918104349095			l : surajdubey	193@gn	nail.com			
	: Mar 03, 2001	Category: Open			Handicap: No						
		n Details: Sem III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83234 (Status: ATKT)			
	n form appearance type:										
_		se select Paper details which y		- University F	Assessment,CA - Col	lege Assessn	nent)	AT			
SN	Paper Code	The second Asset Asset and Asset Ass	Paper Name	**		Th. II	^ []	AM - AT			
1		Financial Accounting and Audit				Th-U/					
2		Financial Accounting and Audit	ing X - Cost Accounting	<u> </u>		Th-U/					
3		Business Economics VI Commerce VI				Th-UA					
5		Direct and Indirect Taxation Pa	enor II								
6		Export Marketing Paper II	per ii			Th-C/					
-	ocation Fee	Exam Form Late	Egg	Evam Form	Super Late Fee	'	Mination	Fooe			
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DD N	lo:	MICR No:		DD Date:		Bank	с:				
Cent	er Preference (Code/Na	ame):									
Venu	ue Preference (Code/Nai	me):									
To, [irector, Board of Exami	ination and Evaluations / The C	controller Of Examination	n,			Place:	Vidyavihar			
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:				
		bus and the list of books prescriession such as change in time									
other	r ground. I understand th	hat in the event of any informati									
canc	elled or rejected.						St	udent's Signature			
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This 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 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.										
21											
Place	£										
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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:



	PRN:	Eligi	ibility Status:	109768	II NO	Division/Section:	Roll No.	.:	Wanstika.
2	2018016400934345		Eligible					ļ	
Instru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	ion			
Stude	ent's Name: HINGU	J DARSHIKA (CHANDU			Mother's Name: BH	IAVANA	(Gender: Female
Name	e in Vernacular Langua	age:हिंगु दर्शिव	न <u>चंदू</u>						
Addro	ess: 45/3RD FLOOR, I	LAXMI BHUV	AN, KISAN NAGA	R-1, WAGLE ESTATE,	THANE				
City:	THANE, Taluka: Thane	e, District: Th	ane, State: Mahara	ashtra, PIN: 400604					
Teler	phone no.:		Mob	oile no: 918828350970		Email	l : hingudarshi	ika123€	ฏgmail.com
DOB	: Feb 26, 2001	Cat	tegory: Open		Physically	/ Handicap: No			
	ious Latest Examination		m I(Regular-Rev16	i)	Exam Even	nt: Nov-2019	Seat	No: 70	14676 (Status: ATKT)
	n form appearance type	e: Fresher							
-	er Details: Plea	ase select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code	<u> </u>		Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ting IX - Financial Accou	ınting		Th-UA	۹[]	
2	83007	Financial Aco	counting and Audit	ting X - Cost Accounting	J		Th-UA	۹[]	
3	83013	Business Eco	onomics VI			Th-UA	۹[]		
4	83014	Commerce V	/I			Th-U <i>F</i>	Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	۱] ۲	
6	83016	Export Marke	eting Paper II				Th-CA	۱[]	
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Mark	Statement Fee		Total:						
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		Amount Recei	1	<u> </u>		No. and Date:	Donk		
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	er Preference (Code/N								
	ue Preference (Code/Na		Tradications / The C						
				Controller Of Examination		fac for the come		Place:	Vidyavihar
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other	r ground. I understand t			ion being found false or					
cance	elled or rejected.							St	tudent's Signature
Deck	aration by Principal/HO)D/Chairpers(ddone o oignata. o
	•	-		y me. The information pr	rinted in the f	orm is correct to the	hest of mv knr	owledge	a Lalso undertake the
respo	onsibility of fulfillment/re	rectification of	f the information. H	le/she is regular student					
cours	se/term work (if any) ac	ccording to un	niversity rules.						
اعدات									
Place	3 :								
Date:	•			College Staff Signature		Seal and Signature of			
				College Stall Signature					D/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status			bility Status:	Examination 10976		Division/Section:	Roll No.	.:		
	2018016400934361		Eligible						Oayeba.	
Instru	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	ion				
Stud	ent's Name: SHAIK	H LAYEBA B	ANO RAZAB ALI			Mother's Name: G	OUSIYA BAN	0 0	Gender: Female	
Nam	e in Vernacular Langua	age:शेख लायेब	ग बानो रज़ब अली							
Addr	ess: D/O RAJU RAJJA	B ALI RAIN, I	FURKANIYA CHO	UK , KAMLA RAMA	N NAGAR BAIG	ANWANDI, GOVANI	OI , MUMBAI			
City:	MUMBAI, Taluka: Kurl	a, District: Μι	ımbai Suburban, S	State: Maharashtra, F	PIN: 400043					
Tele	ohone no.:		Mob	ile no: 9196195007	87	Emai	il : shaikhnami	ira25@g	mail.com	
DOB	: May 11, 2001	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	: No: 728	33564 (Status: Pass)							
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear (UA - University A	Assessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Nai	me				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Ac	counting		Th-UA	A[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accoun	ting		Th-UA	A[]		
3	83013	Business Eco	onomics VI				Th-UA	A[]		
4	83014	Commerce V	/I				Th-UA	۹[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6	6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA []									
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee		Total:							
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DD N		Amount Rece	MICR No:		College Receipt DD Date:	No. and Date.	Bank			
	er Preference (Code/N	ame).	MICK NO.		DD Date.		Dalik	•		
	ie Preference (Code/N									
	Director, Board of Exam			Controller Of Evamin	ation			Diana	\C.d. and her	
	uest permission to pres					ed fee for the same	I hereby	Place:	Vidyavihar	
decla	are that all statement m	ade in this ap	oplication are true,	complete and correct	ct to the best of n	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond									
	ground. I understand t							l		
canc	elled or rejected.							Stu	udent's Signature	
Decla	eclaration by Principal/HOD/Chairperson									
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	э:									
Date	:			College	e Staff Signature			-	nature of	



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

Disciple 16



	PRN:	Eligi	bility Status:	109770	II INO	Division/Section:	Roll N	lo.:	672 -		
	2018016400934376		Eligible						Canasi		
nstr	uction Medium:	•				Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: BHALE	KAR MANAS	SI MAHESH			Mother's Name:	MADHURI	(Gender: Female		
Nam	e in Vernacular Langua	age:भालेकर म	ानसी महेश								
Addı	ess: SHIV CHATRAPA	TI CHAWL S	SURYA NAGAR V	KHROLI WEST							
City:	MUMBAI, Taluka: Kurl	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, PIN:	400083						
ГеІе	phone no.:		Mob	ile no: 918828603318		Em	ıail : manasibh	alekar7@	gmail.com		
DOE	: Aug 05, 2001	Cat	tegory: Open		Physically	Handicap: No					
⊃rev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283672 (Status: P						
Exar	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 - C	College Assess	sment)			
SN	Paper Code			Paper Name	Paper Name				AM - AT		
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting		Th-I	JA []			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-l	JA []			
3	83013	Business Ec	onomics VI			Th-I	JA []				
4	83014	Commerce V	/1						Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-0	CA[]			
6	83020	Computer sy	stems and Applica	tions Paper II			Th-I	JA [] ;Th-	·CA[]		
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Mark	Statement Fee		Total:								
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		Amount Rece		Coll		No. and Date:	ln-	.1			
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	er Preference (Code/N										
	ue Preference (Code/Na		Total continue / The C	antalla Of Francis atia	_			_			
				ontroller Of Examinatio		and Care Care the annual		Place:	Vidyavihar		
decla	are that all statement m	iade in this ap	oplication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and	belief. I	Date:			
				ibed for the examinatior or day fixed for universit							
othe	r ground. I understand t			on being found false or							
canc	elled or rejected.							s+	udent's Signature		
Declaration by Principal/HOD/Chairperson								ddent's Olghataic			
	= =	·=		me. The information p	rinted in the f	orm is correct to th	e hest of my k	nowledge	Lalso 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.								
Plac	e:										
Date	:			College Staff Signature		0	l and C:	acture of			
				College Staff Signature				I and Sigr cipal/HOI	D/Chairperson		



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:



	PRN:	Eligi	bility Status:	109771	I INO	Division/Sectio	n: Ro	oll No.:	William		
	2018016400934384		Eligible						Vicin		
nstr	uction Medium:	•				Nationality:	India		•		
				Student's Perso	onal Informati	on					
Stud	ent's Name: SHAH	VIDHI HITES	Н			Mother's Nam	e: SONAL		Gender: Female		
Nam	e in Vernacular Langu	ıage:शाह विधी	हितेश								
1bb/	ess: C-8, GOVIND DF	HAM BLDG, SA	ANGEETA WADI, 1	NERURKAR ROAD, DO	MBIVLI EAS	Т					
City:	DOMBIVLI, Taluka: K	alyan, District	Thane, State: Mal	narashtra, PIN: 421201							
ГеІе	phone no.:		Mob	ile no: 919769568118		I	Email : vidhis	shah2308@gmail.com			
DOE	8: Aug 23, 2000	Cat	tegory: Open		Physically						
	ious Latest Examination		m III(Regular-Rev1	6)) Exam Event: Nov-2019 Seat No: 7283557 (Status: ATI						
Exar	n form appearance typ	e: Fresher									
Pap€	er Details: Ple	ase select Pa	per details which y	ou want to appear (UA	- University A	Assessment,CA	- College As	sessment)			
SN	Paper Code			Paper Name					AM - AT		
1	83001	Financial Acc	counting and Audit	ng IX - Financial Accou	ınting			Th-UA[]			
2	83007	Financial Acc	counting and Audit	ng X - Cost Accounting				Th-UA[]			
3	83013	Business Ec	onomics VI			Th-UA[]					
4	83014	Commerce V	<u>′</u> 1					Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	oer II				Th-CA[]			
6	83016	Export Marke	eting Paper II					Th-CA[]			
Convocation Fee Exam Form Late F				Fee	e Exam Form Super Late Fee			Examination	n Fees		
Mark	Statement Fee		Total:								
Davr	ment Details:	Amount Rece	ived:	Call	lege Receipt	No. and Date:					
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	ter Preference (Code/N	yame).	IMIOITTO.		DD Date.			Dank.			
	ue Preference (Code/N	•									
	,		valuations / The C	ontroller Of Examinatio	n.			Place:	Vidyovibor		
				nination. I have remitted		ed fee for the sa	me I hereby		Vidyavihar		
decla	are that all statement n	nade in this ap	plication are true,	complete and correct to	the best of n	ny knowledge ai	nd belief. I	Date:			
				bed for the examination or day fixed for universited the contraction in the contraction							
othe	r ground. I understand			on being found false or							
canc	elled or rejected.							l s	tudent'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										
resp	consibility 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) a	ccording to ur	niversity rules.								
Die e											
Place:											
Date:				College Staff Signature		Seal and Signature of					
				College Stall 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.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	109772	II NO	Division/Section:	Roll No).:	tenti	
2	2018016400934392		Eligible		III				tipti	
nstru	ıction Medium:	_				Nationality:	India			
				Student's Pers	onal Informati	on				
Stude	ent's Name: TEMGIF	RE DIPTI SO	PAN			Mother's Name: SI	HAILA	(Gender: Female	
Name	e in Vernacular Langua	ge:टेमगिरे दी	प्ती सोपान							
	ess: RAJARAM SINGH					TKOPAR WEST				
City:	MUMBAI, Taluka: Kurla	ı, District: Μι			: 400084					
	phone no.:			ile no: 919867352518			l : diptitemgire	e@gmail	l.com	
	Jul 20, 2001		egory: Open		Physically	Handicap: No				
	ous Latest Examination		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33757 (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 Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1 83001 Financial Accounting and Audi				ing IX - Financial Accoι	unting		Th-U	A []		
2	83007 I	inancial Acc	counting and Audit	ing X - Cost Accounting)		Th-U	A []		
3	83013 I	Business Eco	onomics VI				Th-U	A []		
4	83014	Commerce V	′ I				Th-U	A []		
5	83015 I	Direct and In	direct Taxation Pa	per II			Th-C	A []		
6	83016 I	Export Marke	eting Paper II				Th-C	A []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
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		mount Recei		Col		No. and Date:	- Is .			
DD N			MICR No:		DD Date:		Bank	C:		
	er Preference (Code/Na									
	e Preference (Code/Na									
	irector, Board of Exami							Place:	Vidyavihar	
decla	uest permission to presone that all statement magne through the syllab	ade in this ap	plication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
eque	est for any special conc ground. I understand the	ession such	as change in time	or day fixed for universi	ity Examinatio	n etc. on religious o	any			
	ancelled 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	ctification of	the information. H							
Place	»:									
)ate:										

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:		Examination f 10977		Division/Section:	Roll No	ı.:	2000			
	2018016400934403		Eligible						Quangosd	
Instru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: NANG	ARE PRERAI	NA PRAKASH			Mother's Name: S	ARITA	(Gender: Female	
Nam	e in Vernacular Langua	age:नांगरे प्रेरप	गा प्रकाश							
Addr	ess: ROOM NO.3,JAI	MALHAR PA	GARE CHAWL NE	TAJI PALKAR MAR	G,ASALFA SUNI	DERBAGH ASALFA	,GHATKOPA	R		
City:	GHATKOPAR, Taluka	: Kurla, Distri	ct: Mumbai Suburt	an, State: Maharash	ntra, PIN: 400084					
Tele	ohone no.:		Mot	ile no: 91915207052	23	Emai	il : djpranay23	3@gma	il.com	
DOB	: Apr 04, 2000	Ca	tegory: Reserved (SC)	Physically	Handicap: No				
Prev	ous Latest Examinatio	n Details: Se	m I(Regular-Rev16	i)	Exam Even	t: Nov-2019	Sea	t No: 70	14689 (Status: Pass)	
Exan	n form appearance typ	e: Fresher								
Pape	r Details: Plea	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	83001	Financial Ac	counting and Audit	ing IX - Financial Ac	counting	Th-U	A[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Account	ting		Th-U	A[]		
3	83013	Business Ec	onomics VI				Th-U	A[]		
4	83014	Commerce \	/I					A []		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	Th-CA[]		
6	83029	Elements of	Operational Resea	rch Paper II			Th-C	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
	and Datallan	A I D	·	1.	Oallana Baraini	Marad Data				
		Amount Rece			College Receipt	No. and Date:	ln			
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	er Preference (Code/N									
	e Preference (Code/N		Trakrations / The C	Controller Of Evenin	-4i			I		
	Director, Board of Exan					ad foo for the come	l harabı.	Place:	Vidyavihar	
decla	uest permission to presoure that all statement management management frough the sylla	nade in this ap	oplication are true,	complete and correct	t 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 unive	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 false	or incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							St	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 purse/term work (if any) according to university rules.									
Place	e :									
				_						
Date	:			College Staff Signature		Seal and Signature of				
				College Staπ Signature			Seal and Signature of Principal/HOD/Chairperson			



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination f 10977		Division/Section:	Roll No).:		
:	2018016400934411		Eligible					ļ	Deepali	
nstrı	uction Medium:			-		Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	lent's Name: LODAY	YA DEEPALI S	SANJAY			Mother's Name: G0	OPI		Gender: Female	
Nam	ne in Vernacular Langua	age:LODAYA	DEEPALI SANJA	Υ						
Addr	ress: Plot no 43 B 15 G	Gurudarshan (Garodia Nagar Gh	atkopar East						
City:	Mumbai, Taluka: Mum	ıbai, District: N	Mumbai City, State	: Maharashtra, PIN:	400077					
Tele	phone no.:		Moh	oile no: 91704573512	21	Emai	il : dlodaya23(@gmail.	com	
DOB	3: Jul 23, 2000									
Prev	rious Latest Examination	on Details: Ser	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Sea	t No: 728	83377 (Status: ATKT)	
Exan	m 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 Assessr	nent)		
SN	Paper Code			Paper Nar	me				AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Ac	counting		Th-U/	A[]		
2	83007	Financial Acc	counting and Audit	ting X - Cost Account	iting		Th-U/	A[]		
3	83013	Business Eco	onomics VI				Th-U/	A[]		
4	83014	Commerce V	/I				Th-U/	A[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C/	A[]		
6	83023	Investment A	Analysis and Portfo	olio Management Par	per II		Th-C/	A[]		
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:					-		
		Amount Recei	T		College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	ter Preference (Code/N									
	ue Preference (Code/Na									
	Director, Board of Exam							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	ct to the best of m	ny knowledge and be	elief. I	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			
	r ground. I understand to celled or rejected.	that in the eve	ent of any informate	ion being found false	e or incorrect, my	candidature is liable	e to be			
Cano _	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	DD/Chairperso	on							
This 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 sponsibility 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	e:									
Date	4			College	e Staff Signature				nature of	



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Application Form for Examination of Summer Session 2021 event.

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	PRN:	Eligi	ibility Status:	Examination for 109775		Division/Section:	Roll No) .:	1- 1- 2
2	2018016400934426		Eligible					l	TRathol
Instru	uction Medium:					Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: RATHO	OD HIRAL CH	HANDRESH			Mother's Name: Bl	ANAVANA		Gender: Female
	e in Vernacular Langua								
	ress: MOUNT E-2,604								
<u> </u>	KALYAN, Taluka: Kaly	yan, District: T		arashtra, PIN: 421301 pile no: 918291160026					
	phone no.:	il : hiluurathod	l@gmail	.com					
	: Oct 20, 2000		tegory: Open			Handicap: No			
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83509 (Status: ATKT)
	n form appearance type								
		ase select Par	per details which y	ou want to appear (U		ssessment,CA - Col	lege Assessn	nent)	
SN	Paper Code	<u> </u>		Paper Name					AM - AT
1			-	ting IX - Financial Acco	<u>-</u>		Th-U/		
2				ting X - Cost Accountin	ng		Th-U/		
3	83013	Business Eco					Th-U/		
4	7 7 7	Commerce V					Th-U/		
5			ndirect Taxation Pa	per II			Th-C/		
6		Export Marke	eting Paper II				Th-C/		
	vocation Fee		Exam Form Late	<u>Fee</u>	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Payn	nent Details:	Amount Recei	ived:	C	ollege Receipt	No. and Date:			
DD N	10:		MICR No:		DD Date:		Bank	<u></u>	
Cent	er Preference (Code/N	lame):	•		. 				
Venu	ue Preference (Code/Na	lame):							
To, C	Director, Board of Exam	nination and F	Evaluations / The €	ontroller Of Examinat	tion,			Place:	Vidyavihar
	uest permission to pres							<u>_</u>	•
	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 univers	rsity Examinatio	on etc. on religious or	r any		
other	r ground. I understand t elled or rejected.	that in the eve	ent of any informat	on being found false o	or incorrect, my	candidature is liable	to be		
Jan								St	tudent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
	form is carefully scrutir onsibility of fulfillment/re								
	onsibility of fulfillment/re se/term work (if any) ac			e/sne is regulal stude	nt of this cone	je and nas complete	d the required	J attenue	ance and practical
							<u> </u>		
Place	e:						I		
				_			I		
Date:	:						I		
				College S	Staff Signature				nature 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 2021 event.

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PRN:	Eligibility Status:	Examination form 109776	m No.:	Division/Section:	Roll No.	.:	O e la III.			
2018016400934434	Eligible						R.C. Hadkar			
Instruction Medium:		1		Nationality:	India					
	_	Student's Pers	sonal Information	on						
Student's Name: HADKAI	R RUPALI LALIT			Mother's Name: SU	JNITA	C	Gender: Female			
Name in Vernacular Languaç	ge:हडकर रुपाली ललित									
Address: SONABAI NIWAS	3RD FLOOR ROOM NO 304	ANAND KOLIWADA MI	UMBRA							
City: MUMBRA, Taluka: Tha	ne, District: Thane, State: Mah	arashtra, PIN: 400612								
Telephone no.:	Mo	bile no: 919967143589		Emai	il : rupalihadka	ır25@gm	nail.com			
DOB: Dec 20, 2000	Category: Open		Physically	Handicap: No						
Previous Latest Examination	n Details: Sem III(Regular-Rev	16)	Exam Even	t: Nov-2019	Seat	No: 728	33273 (Status: ATKT)			
Exam form appearance type:	: Fresher									
Paper Details: Pleas	se select Paper details which y	ou want to appear (UA	۱ - University A	ssessment,CA - Col	lege Assessm	nent)				
SN Paper Code		Paper Name	;				AM - AT			
1 83001 F	Financial Accounting and Audi	ting IX - Financial Accor	unting		Th-UA	۲[]				
2 83007 F	Financial Accounting and Audi	ting X - Cost Accounting	g		Th-UA	۱] ۲				
3 83013 E	Business Economics VI				Th-UA	۹[]				
4 83014	Commerce VI				Th-UA	۱ []				
5 83015	Direct and Indirect Taxation Pa	per II			Th-CA	۹[]				
6 83016 E	6 83016 Export Marketing Paper II Th-CA []									
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees			
Mark Statement Fee	Total:									
Decement Detailer			- Page Pageint (No and Data:						
Payment Details: Ar DD No:	mount Received: MICR No:		ollege Receipt I	No. and Date.	Ponk					
		 -	DD Date:		Bank:	<u>-</u>				
Center Preference (Code/Na Venue Preference (Code/Na										
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	ination and Evaluations / The C ent myself for the ensuing exar			-d foo for the came		Place:	Vidyavihar			
declare that all statement ma	ade in this application are true,	complete and correct to	to the best of m	ny knowledge and be	elief. I	Date:				
	bus and the list of books presc ession such as change in time									
other ground. I understand th	hat in the event of any informat					1				
cancelled or rejected.						Stı	udent's Signature			
Declaration by Principal/HOD	D/Chairperson									
This form is carefully scrutini responsibility of fulfillment/re	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.									
Place:										
Date:		College S	Staff Signature			and Signa	nature of D/Chairperson			



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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	109777	I INO	Division/Section:	Roll No	Manquade		
:	2018016400934442	Eligible		III			Mandud		
Instru	uction Medium:				Nationality:	India	•		
			Student's Perso	onal Informati	on				
Stude	ent's Name: DHANA	WADE SAYALI MANGESH			Mother's Name: ME	GHANA	Gender: Female		
Nam	e in Vernacular Langua	ge:धनावडे सायली मंगेश							
Addr	ess: ROOM NO.229,GA	NESH MANDIR CHAWL PITA	MAHA RAMJI NAGAR	GHATKOPAF	R WEST				
City:	GHATKOPAR WEST,	Γaluka: Kurla, District: Mumbai		rashtra, PIN:	400084				
Telep	ohone no.:	Mob	ile no: 919987635264		Email	: mangeshdh	nanawade456@gmail.com		
DOB	: May 04, 2001	Category: Reserved (OBC)	Physically	Handicap: No				
Previ	ious Latest Examination	Details: Sem III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283223 (Status: Fail)					
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 - Coll	ege Assessn	nent)		
SN	Paper Code		Paper Name	•					
1	83001 I	Financial Accounting and Audit	ing IX - Financial Accou	ınting		Th-U	٩[]		
2	83007 I	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	٩[]		
3	83013 I	Business Economics VI				Th-U	٩[]		
4	83014	Commerce VI		Th-UA					
5	83015 I	Direct and Indirect Taxation Pa	per II			Th-C/	A[]		
6	83029 I	Elements of Operational Resea	rch Paper II			Th-C	٩[]		
Conv	rocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination Fees		
Mark	Statement Fee	Total:							
Payn	nent Details: A	mount Received:	Coll	lege Receipt	No. and Date:				
DD N		MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	nme):				I			
Venu	ie Preference (Code/Na	me):							
To, D	Pirector, Board of Exami	nation and Evaluations / The C	ontroller Of Examinatio	n,			Place: Vidyavihar		
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true,	complete and correct to	the best of n	ny knowledge and bel	ief. I	Date:		
reque	est for any special conc	ous and the list of books prescression such as change in time nat in the event of any informati	or day fixed for universi	ty Examination	on etc. on religious or	any			
	elled or rejected.	· · · · · · · · · · · · · · · · · · ·		,			Student's Signature		
Dool	aration by Principal/HOI	D/Chairperson					Student's Signature		
This respo	form is carefully scrutin onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H cording to university rules.							
Place	e:								
Date	:								

College Staff Signature



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

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Examination form No.:

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	PRN:	Eligi	bility Status:	Examination for 109778		Division/Section:	Roll No	.:	Acerti		
	2018016400934457		Eligible						rice		
Instru	uction Medium:					Nationality:	India				
				Student's Pe	rsonal Informati	on					
Stud	ent's Name: MANJ L	JLKAR AART	T PARSHURAM			Mother's Name: S.	ANGITA	(Gender: Female		
Nam	e in Vernacular Langua	age:मंजुळकरः	आरती परशुराम								
Addr	ess: room no f2 mata s	aptshrugi soc	. jmt road ghatkop	ar							
City:	GHATKOPAR, Taluka:	: Kurla, Distric	ct: Mumbai Suburb	an, State: Maharasht	tra, PIN: 400084	ļ <u> </u>					
Tele	ohone no.:			oile no: 91913770514	4	Ema	il : aartimanjul	kar012@	gmail.com		
	: May 15, 2001		tegory: Reserved (Handicap: No					
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33394 (Status: ATKT)		
	n form appearance type										
		ase select Par	per details which y	ou want to appear (L	JA - University A	Assessment,CA - Co	llege Assessn	nent)			
SN	Paper Code			Paper Nam					AM - AT		
1				ing IX - Financial Acc		Th-U/					
2	83007			ing X - Cost Accounti	ing	Th-U/					
3	83013	Business Eco				Th-U/					
4	83014	Commerce V							Th-UA[]		
5			direct Taxation Pa				Th-C/				
6		Computer sy	stems and Applica	· · · · · · · · · · · · · · · · · · ·			<u> </u>	4 [] ;Th-			
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee		Total:								
Payr	nent Details:	Amount Recei	ived:	C	College Receipt	No. and Date:					
DD N			MICR No:	<u> </u>	DD Date:		Bank	:			
Cent	er Preference (Code/N	ame):	1		•		l .				
Venu	ie Preference (Code/Na	ame):									
To, E	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examina	tion,			Place:	Vidyavihar		
decla	uest permission to pres	nade in this ap	oplication are true,	complete and correct	t to the best of n	ny knowledge and be	elief. I	Date:			
	gone through the sylla est for any special cond										
	ground. I understand t	that in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be				
cancelled or rejected. Student's Signature								udent's Signature			
Deck	aration by Principal/HO	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 esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.										
Place											
Date	:										
				College Staff Signature Seal and Signature of Principal/HOD/Chairperso							



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Examination form No.:

Disciple 16



	PRN:	Eligi	ibility Status:	109779	IINO	Division/Section:	Roll No.	.:	Windly .		
	2018016400934465	<u>L</u>	Eligible		l III		l		KIRH		
nstru	uction Medium:					Nationality:	India				
				Student's Perso	onal Informati	on					
Stude	ent's Name: PAWAF	R KIRTI NARI	ENDRA			Mother's Name: ME	EGHA	G	Gender: Female		
Name	e in Vernacular Langua	эge:पवार किर्त	र्ग नरेंद्र								
Addre	ess: PITAMAHA RAMJ	JI NAGAR NE	EAR SCHOOL NO	1 BHATWADI BARVE N	NAGAR GHA	TKOPAR					
City:	GHATKOPAR, Taluka:	: Kurla, Distri	ct: Mumbai Suburb	oan, State: Maharashtra,	, PIN: 400084						
	phone no.:			pile no: 919004101029		Email	l : kirtipawar11	10@gma	ail.com		
	: Jan 07, 2001		tegory: Open		Physically	Handicap: No					
	ious Latest Examination		m I(Regular-Rev16	<u>i)</u>	Exam Even	t: Nov-2019	Seat	No: 701	14696 (Status: Pass)		
	n form appearance type										
-		se select Par	per details which y	ou want to appear (UA	- University A	ssessment,CA - Col	lege Assessm	ient)			
SN	Paper Code			Paper Name				AM - AT			
1				ting IX - Financial Accou			Th-UA				
2				ting X - Cost Accounting	l	Th-UA					
3		Business Eco				Th-UA					
4		Commerce V							Th-UA[]		
5			ndirect Taxation Pa	•			Th-CA				
6		Elements of	Operational Resea	· · · · · · · · · · · · · · · · · · ·			Th-CA	١[]			
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exam	mination	Fees		
Mark	Statement Fee		Total:								
Davn	ment Details:	Amount Recei	inoq.	Col	loge Receipt	No. and Date:					
DD N		MIIOUIII I VECCI	MICR No:	<u> </u>	DD Date:	No. dia Date.	Bank:				
	er Preference (Code/Na	ame).	INITOTATIO.		DD DG.O.						
	ue Preference (Code/Na										
	•	-	 Evaluations / The C	Controller Of Examination				Place:	Vidyavihar		
				nination. I have remitted		ed fee for the same.		Flace.	Vilayaviilai		
decla	are that all statement ma	nade in this ap	pplication are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:			
nave reque	gone through the sylla est for any special cond	bus and the incession such	ist of books prescri	ibed for the examination or day fixed for universit	i for which i a tv Examination	m appearing, i snaii i	not anv				
other	r ground. I understand t			ion being found false or				l			
cance	elled or rejected.							Stı	udent's Signature		
Deck	aration by Principal/HO)D/Chairpers(Juditico digitata.		
		-		y me. The information pr	rinted in the f	orm is correct to the	hest of my kno	owledae	Lalso undertake the		
respo	onsibility of fulfillment/re	ectification of	f the information. H	le/she is regular student							
cours	se/term work (if any) ac	cording to un	iversity rules.								
Place	3 :										
Date:				College Staff Signature			Seal and Signature of				
				College Staff Signature					D/Chairperson		



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligibility Status:	Examination forn 109780		Division/Section:	Roll No.	.:	Rimsha.	
:	2018016400934473	Eligible							
nstru	ıction Medium:				Nationality:	India			
			Student's Perso	onal Information	on				
Stud	ent's Name: SHAIK	H RIMSHA MOHD ARIF			Mother's Name: Gl	JLNAZ BANO) (3	Gender: Female	
Nam	e in Vernacular Langua	ge:शेख रिमश मोहद अरिफ							
Addr	ess: room no 13 netaji i	nagar haroon compound kurla	west						
City:	Mumbai, Taluka: Kurla	, District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400070					
	phone no.:	Mob	ile no: 919137936595	T	Emai	l : abdullahkha	an78620	86@gmail.com	
	: Feb 10, 2000	Category: Open		, ' ' ' '	Handicap: No				
		n Details: Sem III(Regular-Rev1	6)	Exam Event	:: Nov-2019	Seat	No: 728	3572 (Status: Pass)	
	n form appearance type	e: Fresher							
	r Details: Plea	se select Paper details which y	ssessment,CA - Col	lege Assessm	nent)				
SN	Paper Code		Paper Name					AM - AT	
1		Financial Accounting and Audit				Th-UA			
2		Financial Accounting and Audit	ing X - Cost Accounting			Th-UA			
3		Business Economics VI				Th-UA			
4		Commerce VI					Th-UA[]		
5		Direct and Indirect Taxation Pa	per II			Th-CA			
6	-	Export Marketing Paper II				Th-CA			
	ocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exan	nination	Fees	
Mark	Statement Fee	Total:							
Payn	nent Details:	mount Received:	Col	lege Receipt I	No. and Date:				
DD N	lo:	MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):				•			
/enu	e Preference (Code/Na	ame):							
Го, С	Pirector, Board of Exam	ination and Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
		ent myself for the ensuing exan					_	·	
		ade in this application are true, bus and the list of books prescr					Date:		
eque	est for any special cond	ession such as change in time	or day fixed for universi	ty Examinatio	n etc. on religious or	any			
	ground. I understand t elled or rejected.	hat in the event of any informat	on being found false or	incorrect, my	candidature is liable	to be			
Jane	clica or rejected.						Stu	udent's Signature	
Declaration by Principal/HOD/Chairperson									
This	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								
		ectification of the information. H cording to university rules.	e/she is regular student	of this Colleg	e and has complete	d the required	l attenda	nce and practical	
					Т				
Place) :								
			_						
Date									
			College Sta	aff Signature			and Sign		
					Princi	pal/HOD)/Chairperson		



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status:				Examination form 109781	n No.:	Division/Section:	Roll No.:		Planel
2	2018016400934481	Eligit	ible						
Instru	uction Medium:	-				Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: LAD RU	UCHI SUSHIL				Mother's Name: SII	DDHI	G	Gender: Female
Name	e in Vernacular Langua	ıge:लाड रुची सुशील	ਕ						
Addre	ess: room no 4 jayashre	ee niwas near hind	ndi school						
		, District: Mumbai		ate: Maharashtra, PIN:	400084				
	ohone no.:			ile no: 919821454144	ı		: nileshlad007	'@yaho	o.co.in
	: Apr 26, 2001	Category				Handicap: No			
	ious Latest Examination		(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat N	No: 728	3371 (Status: Pass)
	n form appearance type								
		se select Paper de	details which yo	ou want to appear (UA	- University A	ssessment,CA - Coll	ege Assessme	ent)	
SN	Paper Code			Paper Name					AM - AT
1				ing IX - Financial Accou			Th-UA	••	
2				ing X - Cost Accounting			Th-UA		
3		Business Econom	nics VI				Th-UA		
4		Commerce VI					Th-UA	.,	
5		Direct and Indirect		per II			Th-CA		
6		Export Marketing I	-		I_ _		Th-CA		_
	rocation Fee		am Form Late F	Fee	Exam Form	Super Late Fee	Exam	ination	Fees
Mark	Statement Fee	Tota	al:						
Paym	nent Details: A	Amount Received:	:	Col	leae Receipt	No. and Date:			
DD N			CR No:		DD Date:		Bank:		
	er Preference (Code/Na		-				l		
	ie Preference (Code/Na								
To, D	irector, Board of Exam	ination and Evalu	ations / The C	ontroller Of Examination	n,			Place:	Vidyavihar
decla	are that all statement ma	ade in this applica	ation are true, o	nination. I have remitted complete and correct to ibed for the examination	the best of m	ny knowledge and be	hereby lief. I	Date:	, , , , , , , , , , , , , , , , , , ,
reque other	est for any special conc ground. I understand the	cession such as ch	hange in time o	or day fixed for universit on being found false or	ty Examinatio	on etc. on religious or	any		
cance	elled or rejected.							Stu	udent's Signature
Decla	aration by Principal/HO	D/Chairperson							addited digitate.
This f	form is carefully scrutin	nized by the Colleg	information. He	n me. The information pre/she is regular student					
Place	»:								
D-4									

College Staff Signature



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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_		$\overline{}$								
	PRN:	Eligi	ibility Status:	Examination f 10978	82	Division/Section:	Roll No	o.:	(hirag	
-2	2018016400934496	<u> </u>	Eligible				l	!		
nstru	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stude	ent's Name: PATEL	L CHIRAG DIN	NESH			Mother's Name: JC	SHANA	(Gender: Male	
Namo	e in Vernacular Langua	age:PATEL C	HIRAG DINESH							
Addro	ess: A1-301 pooja com	nplex, kaves	ar village, waghbil	naka , ghodbandar ı	road, thane (wes	t)				
City:	thane, Taluka: Thane,	, District: Thar	ne, State: Maharas	htra, PIN: 400601						
Teler	phone no.:		Moh	oile no: 91916764317	73	Emai	il : raj9958@g	gmail.cor	n	
DOB	: Jul 23, 2000	Car	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	on Details: Se	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Sea	at No: 728	83465 (Status: ATKT)	
Exam form appearance type: Fresher										
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assess										
SN	Paper Code			Paper Nar	me				AM - AT	
1	83001	Financial Ac	counting and Audit	ting IX - Financial Ac	counting		Th-U	JA []		
2	83007	Financial Ac	counting and Audit	ting X - Cost Account	iting		Th-U	JA []		
3	83013	Business Eco	onomics VI				Th-U	JA []		
4	83014	Commerce V	/I				Th-U			
5	83015	Direct and In	ndirect Taxation Pa	per II	r II			Th-CA[]		
6	83023			olio Management Par	per II		Th-C	[] A		
Conv	ocation Fee		Exam Form Late			Super Late Fee	<u> </u>	amination	Fees	
Mark	Statement Fee		Total:			·				
		Amount Recei	1		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Banl	k:		
Cente	er Preference (Code/N	lame):								
Venu	ue Preference (Code/N	lame):								
To, D	Director, Board of Exam	nination and E	≟valuations / The C	controller Of Examination	ation,			Place:	Vidyavihar	
decla	uest permission to pres are that all statement man gone through the sylla	made in this ap	pplication are true,	complete and correct	ct to the best of m	ny knowledge and be	elief. I	Date:		
reque	est for any special cond	ncession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
	r ground. I understand elled or rejected.	that in the eve	ent of any informati	ion being found false	e or incorrect, my	candidature is liable	e to be			
Sário. _	alled or rejected.							St	tudent's Signature	
Decla	aration by Principal/HC	OD/Chairperso	on							
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	> :									
Date:	:			College	e Staff Signature			I and Sign	nature of	



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

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B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligi	ibility Status:	Examination 10978	83	Division/Section:	Roll No).:	0. 7
2	2018016400934507		Eligible					ļ	Jupis .
nstrı	uction Medium:					Nationality:	India		
				Student's P	Personal Informati	on			
Stude	ent's Name: TIWAR	RI SUHAS BRI	IJBHUSHAN			Mother's Name: St	JNITA	(Gender: Male
Name	e in Vernacular Langua	age:तिवारी सुह	ास ब्रिजभूषण						
	ess: near panipurvala 2								
	mumbai, Taluka: Kurla	a, District: Mur							
	ohone no.:		Mob tegory: Open	oile no: 9190044279	1	Emai Handicap: No	il : swatiwari0	16@gma	ail.com
	: Jan 27, 2001								
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019									83638 (Status: Pass)
	n form appearance type								
		ase select Par	per details which y			Assessment,CA - Co	Ilege Assessr	nent)	
SN	Paper Code	<u> </u>		Paper Na				AM - AT	
1	83001			ting IX - Financial Ac		Th-U			
2	83007			ting X - Cost Accoun	ıting		Th-U		
3	83013	Business Eco					Th-U		
4	83014	Commerce V	•				Th-U		
5			direct Taxation Pa	per II			Th-C		
6	83016	Export Marke			<u> </u>		Th-C	A []	
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:			
DD N			MICR No:		DD Date:		Bank	<u></u>	
	er Preference (Code/N	Jame):	<u> </u>					-	
Venu	ie Preference (Code/Na	lame):							
To, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examin	nation,			Place:	Vidyavihar
	uest permission to pres							<u>_</u>	•
	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 university	ersity Examinatio	on etc. on religious o	r any		
	r ground. I understand t elled or rejected.	that in the eve	ent of any informat	on being found false	e or incorrect, my	candidature is liable	e to be		
Janic	med of rejected.							St	tudent's Signature
Decla	aration by Principal/HO	D/Chairperso	on n						
respo	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	rectification of	f the information. H	/ me. The information e/she is regular student	on printed in the fordent of this Collect	orm is correct to the ge and has complete	best of my kn d the required	owledge d attenda	e. I also undertake the ance and practical
Place	э :								
Date:				College	e 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:				Examination form 109784	ı No.:	Division/Section:	Roll N	lo.:	Lugache
2	2018016400934515		Eligible		l III				and the same of th
nstrı	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: GAWAI	DE GAURAN	IG MANOHAR			Mother's Name: M.	AMTA		Gender: Male
Name	e in Vernacular Langua	age:गौरांग							
	ess: Barrack No. 1416, snagar 4, Thane 42100		n No.1, Maratha S	ection 32, Ulhasnagar 4	, Thane 4210	004 Barrack No. 1410	ô, Beside Ro	oom No.1,	, Maratha Section 32,
City:	ulhasnagar, Taluka: Ul	hasnagar, Di		e: Maharashtra, PIN: 421	1004				
	phone no.:		Mob	oile no: 919511619870		Emai	l : gaurangg	awade450	01@gmail.com
	: Jan 26, 2001		tegory: Open		Physically Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Se	at No: 728	83247 (Status: ATKT)
	n form appearance type								
		ise select Par	per details which y	ou want to appear (UA	- University A	ssessment,CA - Co	llege Assess	sment)	
SN	Paper Code			Paper Name					AM - AT
1				ting IX - Financial Account				UA []	
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounting	1			UA []	
3		Business Eco	onomics VI					UA []	
4		Commerce V						UA []	
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C	CA[]	
6		Export Marke	, 				Th-C	CA[]	
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	amination	Fees
Mark	Statement Fee		Total:		<u> </u>				
Davn	nent Details:	Amount Recei	ived:	Coll	lege Receint	No. and Date:			
DD N			MICR No:		DD Date:	No. and Date.	Ban		
	er Preference (Code/Na		IVIICITIVO.		DD Date.			ık.	
	ue Preference (Code/Na								
	· · · · · · · · · · · · · · · · · · ·			Controller Of Examination				Tologo	\ fish so dhou
				nination. I have remitted		ed fee for the same	I herehy	Place:	Vidyavihar
decla	are that all statement ma	nade in this ap	pplication are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:	
				ibed for the examination or day fixed for universit				—	
other	r ground. Í understand tl			ion being found false or					
	elled or rejected.			-				St	udent's Signature
Deck	aration by Principal/HO	D/Chairperso	on .						adont o olgitalia
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	ə: 								
Date:	:			College Sta	aff Signature			al and Sign	
						ļ	, Prin	ıcıpal/HOL	D/Chairperson



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligi	ibility Status:	Examination for 109785		Division/Section:	Roll No.) .:	RHBall
2	2018016400934523		Eligible						- Killing &
nstrı	uction Medium:			-		Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: THAKK	(AR RITISHA	DHARMESH			Mother's Name: SE	EEMA		Gender: Female
Name	e in Vernacular Langua	age:ठक्कर रीति	तेषा धर्मेश						1
	ess: 206207/B,ANJALI					ST			
<u> </u>	DOMBIVLI, Taluka: Ka	alyan, District:							
Teler	phone no.:		Mob	oile no: 91916794779	99	Emai	il : seema.dha	ırmesh4	6@gmail.com
DOB: May 07, 2001 Category: Open Physically Handicap: No									
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	ı6)	Exam Even	t: Nov-2019	Seat	t No: 728	83760 (Status: Pass)
	n form appearance type								
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Asses								nent)	
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acr	counting and Audit	ting IX - Financial Acc	counting	Th-UA	A []		
2	83007	Financial Acr	counting and Audit	ing X - Cost Account	ng X - Cost Accounting				
3	83013	Business Eco	onomics VI						
4	83014	Commerce V	/1				Th-UA	A []	
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A []	
6	83020	Computer sy	stems and Applica	itions Paper II			Th-U/	A [] ;Th-	-CA[]
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Recei	ivod:		College Receipt	No and Date:			
DD N			MICR No:		DD Date:	10. and Date.	Bank		
	er Preference (Code/N		IVIICITIVO.		DD Date.		Dank		
	ue Preference (Code/Na								
	Director, Board of Exam		 Evaluations / The C	Controller Of Examina				Place:	Vidvavihar
	uest permission to pres					ed fee for the same.	I hereby	Flace.	Vidyavihar
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.						!	St	tudent's Signature
Deck	aration by Principal/HO	DD/Chairperso	on					1	
This respo	form is carefully scrutir onsibility of fulfillment/re	nized by the Crectification of	College staff and by f the information. H						
COUIS	se/term work (if any) ac	coraing to un	ilversity rules.						
Place	> :								
Date:							1		
Jaic.				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



PRN: Eligibility Status:			Examination form 109786	n No.:	Division/Section:	Roll No).:	40		
	2018016400934546		Eligible						4.	
Instr	uction Medium:	•				Nationality:	India			
				Student's Perso	nal Informati	on				
Stud	ent's Name: KOTHA	RI SIDH RAI	KESH			Mother's Name: D	IMPLE	(Gender: Male	
Nam	e in Vernacular Langua	ge:सिद्ध								
	ess: 201,JANKI CHS,D A,YHANE (W)	HOBI ALI,TE	MBI NAKA,YHAN	E (W) 201,JANKI CHS,[DHOBI ALI,TI	EMBI NAKA,YHANE	(W) 201,JAN	IKI CHS,	DHOBI ALI,TEMBI	
City:	THANE, Taluka: Thane	e, District: The	ane, State: Mahara	shtra, PIN: 400601						
Tele	ohone no.:		Mob	ile no: 917715980981		Ema	il : sidhkothar	349@gr	nail.com	
DOB	: Dec 04, 2000	Cat	egory: Open		Physically Handicap: No					
Prev	ious Latest Examinatior	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33697 (Status: Pass)	
	n form appearance type	: Fresher								
	er Details: Plea	se select Pa _l	per details which y	ou want to appear (UA	- University A	Assessment,CA - Co	llege Assessr	nent)		
SN	Paper Code			Paper Name					AM - AT	
1				ng IX - Financial Accou	nting		Th-U			
2				ng X - Cost Accounting			Th-U			
3		Business Eco					Th-U			
4		Commerce V						Th-UA[]		
5			direct Taxation Pa	per II			Th-C			
6		Export Marke	 				Th-C			
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	Examination Fees		
Mark	Statement Fee		Total:							
Payr	nent Details:	mount Recei	ived:	Coll	ege Receipt	No. and Date:				
DD N	lo:		MICR No:	•	DD Date:		Bank	C:		
Cent	er Preference (Code/Na	ame):		1			·		·	
Venu	ie Preference (Code/Na	ame):								
To, [Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examination	n,			Place:	Vidyavihar	
decla	are that all statement ma	ade in this ap	plication are true,	nination. I have remitted complete and correct to bed for the examination	the best of m	ny knowledge and be	elief. I	Date:	,	
requ	est for any special conc	ession such	as change in time	or day fixed for universit	y Examinatio	n etc. on religious o	r any			
		hat in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
cancelled or rejected. Student's Signature							udent'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 sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical surse/term work (if any) according to university rules.									
Place	ə :									
Date	:									
				College Staff Signature Seal and S Principal/H				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:				Examination form 109787	1 No.:	Division/Section:	Roll No	o.:	0 6	
	2018016400934554		Eligible						Dupoli	
nstr	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: ZORE F	RUPALI PAN	IDURANG			Mother's Name: V	AISHALI	C	Gender: Female	
lam	e in Vernacular Langua	ge:झोरे रुपार्ल	गे पांडुरंग							
Nddr	ess: ROOM NO.4, DAY	'ASAGAR CI	HAWL, NAVYUG N	IITRA MANDAL, RAMA	BAI NAGAR,	GHATKOPAR EAS	Т			
City:	MUMBAI, Taluka: Kurla	a, District: Mi	umbai Suburban, S	tate: Maharashtra, PIN:	400075					
ele	ohone no.:			ile no: 918108725360		Emai	il : rupalizore2	24@gma	il.com	
OB	: Apr 24, 2001	Ca	tegory: Open		Physically	Handicap: No				
rev	ious Latest Examinatior	n Details: Se	m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283667 (Status: Fail)					
	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 - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Ac	counting and Audit	-				A[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting		Th-U	A[]			
3	83013	Business Ec	onomics VI		Th-UA [
4	83014	Commerce \	/I			Th-U	Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]		
6		Elements of	Operational Resea	rch Paper II			Th-C	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
/lark	Statement Fee		Total:							
ayr	nent Details:	mount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N	lo:		MICR No:	<u> </u>	DD Date:		Bank	C :		
Cent	er Preference (Code/Na	ame):	1	-					'	
/enu	ie Preference (Code/Na	ame):								
o, [Director, Board of Exam	ination and E	Evaluations / The C	controller Of Examinatio	n,			Place:	Vidyavihar	
lecla	are that all statement ma	ade in this ap	oplication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
			•	ibed for the examinatior or day fixed for universit				-		
				on being found false or						
anc	elled or rejected.							Stu	udent's Signature	
)ecl	aration by Principal/HO	D/Chairners	on .					0.0	adent o 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									
esp	onsibility of fulfillment/re	ectification of	f the information. H	e/she is regular student						
cour	se/term work (if any) ac	cording to ur	niversity rules.							
Place	.									
Date										
				College Staff Signature Seal and Signature of			nature 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

Examination form No.:

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PRN: Eligibility Status:				Examination form 109788	ı No.:	Division/Section:	Roll No	.:		
:	2018016400934562		Eligible						-	
Instru	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: CHUDA	ASAMA KIRT	I JEETENDRA			Mother's Name: U	SHA	(Gender: Male	
Nam	e in Vernacular Langua	age:CHUDAS	AMA KIRTI JEETE	ENDRA						
				IK PLOT, L.B.S MARG		R WEST				
City:	Mumbai, Taluka: Kurla	ı, District: Mur	mbai Suburban, St	ate: Maharashtra, PIN: 4	400086					
	ohone no.:		Mob	ile no: 918655565861		Ema	il : KIRTICHUI	DASAMA	A09@GMAIL.COM	
	: May 26, 2001		tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m I(Regular-Rev16	i)	Exam Even	t: Nov-2019	Seat	t No: 701	14655 (Status: Pass)	
	n form appearance type									
		ase select Par	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				ng IX - Financial Accounting Th-L						
2	83007	Financial Acc	counting and Audit					A []		
3	83013	Business Eco	onomics VI					A[]		
4	83014	Commerce V	/I					Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	Th-CA[]		
6	83016	Export Marke	eting Paper II				Th-C/	A []		
Conv	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
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	er Preference (Code/N		IMICK NO.		DD Date.		Bank			
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	ie Preference (Code/Na	,		Controller Of Everninetics	-			I		
				controller Of Examination		. d f f th	I le avale.	Place:	Vidyavihar	
decla	ire 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:		
				or day fixed for universit						
		that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
cancelled or rejected. Student's Signature								udent's Signature		
Declaration by Principal/HOD/Chairperson										
respo		ectification of	f the information. H	/ me. The information pr e/she is regular student						
Place) :									
Date	:						_			
								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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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							$\overline{-}$			
	PRN:	Eligi	ibility Status:	Examination for 109789		Division/Section:	Roll No	0.:	H.A. Jadeja	
2	2018016400934577		Eligible							
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: JADEJ	A HARDEEP	ANIRUDHDHASIN	1H		Mother's Name: M	UKUNDBA	(Gender: Male	
Name	e in Vernacular Langua	age:जडेजा हः	रदीप अनिरुद्धसिंह							
Addr	ess: C-5 HIRA COMPC	OUND CHAW	L MAROL VIJAY N	IAGAR ANDHERI E/	AST					
	Mumbai, Taluka: Andh	neri, District: N	/lumbai Suburban,	State: Maharashtra,	PIN: 400059					
	ohone no.:			oile no: 91908280721			il : hardeep@	gmail.co	m	
	: Jun 01, 2000		tegory: Open			Handicap: No				
	ious Latest Examination		m I(Regular-Rev16	<u>,) </u>	Exam Even	it: Nov-2019	Sea	at No: 701	14656 (Status: Pass)	
	n form appearance type									
		ase select Par	per details which y	rou want to appear (l		ssessment,CA - Co	ilege Assessr	ment)		
SN	Paper Code			Paper Nam					AM - AT	
1				ing IX - Financial Acc		Th-U				
2		 		ing X - Cost Account	g X - Cost Accounting					
3 83013 Business Economics VI							Th-U			
4		Commerce V						Th-UA[]		
5			ndirect Taxation Pa	per II			Th-C			
6		Export Marke	eting Paper II				Th-C	:A[]		
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei			College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	k:		
Cent	er Preference (Code/Na	lame):	1							
	ue Preference (Code/Na									
	Director, Board of Exam		Evaluations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres								••••	
decla	are that all statement m gone through the sylla	nade in this ap	oplication are true,	complete and correct	t to the best of m	ny knowledge and be	elief. I	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	ground. I understand t									
cance	elled or rejected.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	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									
	se/term work (if any) ac			-	-		•		•	
Place										
-iace	<i>j.</i>						l			
Data							l			
Date:					College Staff Signature Seal and Signature of			nature of		
				College Stall Signature					D/Chairperson	



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Sta			ibility Status:	Examination form 109790	n No.:	Division/Secti	ion: F	Roll No.:	sakshi		
2	2018016400934585		Eligible								
Instru	uction Medium:		-			Nationality:	India				
				Student's Perso	onal Informat	ion					
Stude	ent's Name: SHELA	R SAKSHI G	ANAPAT			Mother's Nar	me: ZHUMBA	.R	Gender: Female		
Nam	e in Vernacular Langua	ge:शेलार साक्ष	ती गणपत								
Addr	ess: BARAMATI CHAW	/L NSSRC)AD ASALFA VILL/	AGE GHATKOPAR WE	ST						
		a, District: Mu		tate: Maharashtra, PIN:	400084						
	ohone no.:			ile no: 918692929703			Email : saks	hishelar388	8@gmail.com		
	: May 11, 2001		tegory: Open		, ' ' '	Handicap: No	1				
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Ever	t: Nov-2019		Seat No:	7283583 (Status: ATKT)		
	n form appearance type										
		se select Pa	per details which y	ou want to appear (UA	- University /	Assessment,CA	A - College As	ssessment			
SN	Paper Code			Paper Name				Th-UA[]	AM - AT		
1				9							
2				ing X - Cost Accounting	ng X - Cost Accounting						
3 83013 Business Economics VI						Th-UA []					
4		Commerce V						Th-UA[]			
5			direct Taxation Pa					Th-CA[]	TI 0.1.11		
6		Computer sy	stems and Applica	•				Th-UA[];			
	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fe	е	Examina	Examination Fees		
Mark	Statement Fee		Total:								
Payn	nent Details:	mount Rece	ived:	Coll	lege Receipt	No. and Date:					
DD N			MICR No:		DD Date:			Bank:			
Cent	er Preference (Code/Na	ame):	1								
Venu	e Preference (Code/Na	ame):									
To, C	Director, Board of Exam	ination and E	Evaluations / The C	ontroller Of Examinatio	n,			Plac	ce: Vidyavihar		
				nination. I have remitted							
				complete and correct to ibed for the examinatior				Dat	e:		
reque	est for any special conc	ession such	as change in time	or day fixed for universi	ty Examination	on etc. on religi	ious or any				
	ground. I understand t elled or rejected.	hat in the eve	ent of any informati	on being found false or	incorrect, my	candidature is	s liable to be				
canc	clica di rejectea.								Student's Signature		
Decla	aration by Principal/HO	D/Chairperso	on								
respo		ectification of	f the information. H	/ me. The information pr e/she is regular student					dge. I also undertake the endance and practical		
Place	3 :										
Data											



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	109791	II INO	Division/Section:	Roll No.).: 		
2	2018016400934593	Eligible		 			ou vest		
Instru	uction Medium:				Nationality:	India			
			Student's Perso	onal Informati	on				
Stude	ent's Name: CHUDA	ASAMA DIVYESH MAHESH			Mother's Name: UR	MILA	Gender: Male		
Name	e in Vernacular Langua	ge:चुडासम दिव्येश महेश							
Addre	ess: ROOM NO.80, GIC	GAWADI, KAMA LANE, HANSO	OTI MARG GHATKOPA	AR(WEST)					
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	State: Maharashtra, PIN:	: 400086					
	phone no.:		oile no: 917977993048			: divyeshchu	udasama840@gmail.com		
	: Jun 16, 2001	Category: Open		, ' ' ' '	Handicap: No				
	ious Latest Examination	Seat	t No: 7283209 (Status: Fail)						
	n form appearance type								
	er Details: Pleas	se select Paper details which y	ou want to appear (UA	University A	Assessment,CA - Coll	ege Assessm	<u> </u>		
SN Paper Code Paper Name							AM - AT		
						Th-UA			
2		Financial Accounting and Audit	ing X - Cost Accounting	<u> </u>		Th-UA			
							Γh-UA []		
4		Commerce VI				Th-UA			
5 83015 Direct and Indirect Taxation Paper II Th-							A[]		
6	83023 I	Investment Analysis and Portfo	<u> </u>			Th-CA			
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	amination Fees		
Mark	Statement Fee	Total:							
Paym	nent Details:	mount Received:	Col	llege Receipt	No. and Date:				
DD N	lo:	MICR No:		DD Date:		Bank	α		
Cente	er Preference (Code/Na	ame):							
Venu	ue Preference (Code/Na	ame):							
To, D	Director, Board of Exami	ination and Evaluations / The C	Controller Of Examinatio	on,			Place: Vidyavihar		
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true,	complete and correct to	o the best of m	ny knowledge and bel	lief. I	Date:		
reque	est for any special conce	bus and the list of books prescr session such as change in time	or day fixed for universit	ity Examination	on etc. on religious or	any			
		hat in the event of any informati	ion being found false or	r incorrect, my	candidature is liable	to be			
cancelled or rejected. Student's Signature									
Declaration by Principal/HOD/Chairperson									
respo	onsibility of fulfillment/re	nized by the College staff and by ectification of the information. He cording to university rules.							
Place	∍ :								
Date:	:								



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

Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligi	ibility Status:	Examination f 10979	92	Division/Section:	Roll No) .:	Dhonast	
2	2018016400934612		Eligible			l		I	Discharge	
nstru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Information	on				
Stude	ent's Name: BOCHA	ARE DHANSI	HREE BANSIDHAI	R		Mother's Name: M	ANGAL	(Gender: Female	
	e in Vernacular Langua									
Addre	ess: 6/11, NANDA SAV	NANT CHAW	L, RUKMINI NAG	AR, BHANDUP EAS	ST					
<u> </u>	MUMBAI, Taluka: Kurla	a, District: Μι								
	ohone no.:			oile no: 91982078174			il : dhanu24@	gmail.co	om	
_	: Oct 24, 2000		tegory: Open		Physically	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Sea	t No: 729	90662 (Status: Pass)	
Exam form appearance type: Fresher										
Pape		ase select Par	per details which y	ou want to appear (UA - University A	ssessment,CA - Co	Ilege Assessr	ment)		
SN	Paper Code			'	Paper Name				AM - AT	
1				ting IX - Financial Acc		Th-U				
2				ing X - Cost Account	ng X - Cost Accounting					
3 83013 Business Economics VI							Th-U			
4		Commerce V						Th-UA []		
5			ndirect Taxation Pa				Th-C			
6	83020	Computer sy	stems and Applica				Th-U	JA [] ;Th-	-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	eived:	-	College Receipt I	No and Date:				
DD N			MICR No:		DD Date:		Bank	k:		
	er Preference (Code/Na		<u> </u>					-		
	ie Preference (Code/Na									
To, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres									
	are that all statement magene 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	ground. I understand t elled or rejected.	that in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be			
Cano	Allea or rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
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 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.									
Cours	Se/term work (ii arry) ac	Coruing to un	ilversity rules.				,			
Place) :									
Date:										
раке.				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 2021 event.

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	PRN:	Eligi	ibility Status:	Examination forr 109793	m No.:	Division/Section:	Roll No	0.:	Acistisha	
2	2018016400934627		Eligible		.					
nstrı	uction Medium:	-				Nationality:	India			
				Student's Pers	onal Informati	on				
Stude	ent's Name: PANDE	EY AASHISHI	KUMAR KRUPASI	HANKAR		Mother's Name: SA	ADHANA	(Gender: Male	
Name	e in Vernacular Langua	age:आशिषकुम	ार कृपाशंकर पाण्डेय							
Addr	ess: Kranti Society,Am	nbedkar Nagar	r, Parksite,Vikhroli	west						
City:	Mumbai, Taluka: Kurla	a, District: Mur	mbai Suburban, St	tate: Maharashtra, PIN:	400079					
Teler	ohone no.:		Mob	pile no: 919930753498		Emai	l : sakshi200	1suvarna	a@gmail.com	
DOB	: Jul 22, 2001	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	at No: 728	83453 (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	۱ - University A	ssessment,CA - Co	llege Assess	ment)		
SN	Paper Code			Paper Name	!				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accor	ng IX - Financial Accounting The					
2	83007	Financial Acr	counting and Audit	ing X - Cost Accounting	 g		Th-U	JA []		
3 83013 Business Economics VI							Th-U	JA []		
4	83014	Commerce V	/1		7			Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	; <u>A[]</u>		
6	83023	Investment A	nalysis and Portfo	lio Management Paper	r II		Th-C	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	Fees	
Mark	Statement Fee		Total:							
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		Amount Recei	T	Co	Ilege Receipt I	No. and Date:				
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	er Preference (Code/N									
	ie Preference (Code/N									
				Controller Of Examination				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	to the best of m	ny knowledge and be	elief. I	Date:		
reque	est for any special cond	ncession such	as change in time	or day fixed for universi	sity Examinatio	on etc. on religious or	r any			
other canc	ground. I understand elled or rejected.	that in the eve	ent of any informati	ion being found false or	r incorrect, my	candidature is liable	to be			
Student's Signature								udent's Signature		
Decla	aration by Principal/HC	OD/Chairperso	n							
respo	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 surse/term work (if any) according to university rules.									
Place	»: ————————————————————————————————————						_	_		
Date:	ate: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									



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

 $\label{policy density of Summer Session 2021 event.} Application Form for Examination of Summer Session 2021 event.$

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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PRN: Eligibility Status:		Examination for 109794		Division/Section:	Roll No	o.:	Modernan			
;	2018016400934635		Eligible		111111				Month of the second	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: KALAM	IANI PRATIK	SHA SURESH			Mother's Name: VA	AISHALI		Gender: Female	
Nam	e in Vernacular Langua	age:प्रतीक्षा							1	
Addr	ess: 203, shree Krishna	a building, g	ovardhan nagar Lf	3S marg, mulund wes	st Mumbai 4000	180				
<u> </u>	Mumbai, Taluka: Kurla	a, District: Mur								
	phone no.:		I	oile no: 919769087448			il : patukalama	ani@gma	ail.com	
	: Apr 17, 2000		tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83313 (Status: Pass)	
	n form appearance type									
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (U	A - University A	ssessment,CA - Co	llege Assessr	ment)		
SN	Paper Code	<u> </u>		Paper Name				AM - AT		
1	83001	Financial Acc	counting and Audit	ting IX - Financial Acco	ounting	Th-U				
2	83007	Financial Acc	counting and Audit	ting X - Cost Accountin	ng X - Cost Accounting					
3 83013 Business Economics VI							Th-U			
4 83014 Commerce VI								Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C	A[]		
6	83016	Export Marke	eting Paper II		·		Th-C	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ived:	C	ollege Receipt	No and Date:				
DD N			MICR No:	1	DD Date:	10. 4 2 4	Bank	 k:		
	er Preference (Code/Na		1		1					
	ue Preference (Code/Na									
To, C	Director, Board of Exam	nination and F	Evaluations / The C	controller Of Examinati	ion,			Place:	Vidyavihar	
	uest permission to pres								,	
	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 univers	sity Examinatio	on etc. on religious or	r any			
other	r ground. I understand t									
сапь	elled or rejected.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
respo	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	ə:									
Date:	<u> </u>									
				College Staff Signature				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 2021 event.

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PRN: Eligibility Status:				Examination form 109795	n No.:	Division/Section:	Roll No).:	0 0.	
	2018016400934643		Eligible						Danghi	
nstrı	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: SANGH	IVI NISHIT A	JAY			Mother's Name: N	PA	(Gender: Male	
lam	e in Vernacular Langua	ge:निशित अ	जय संघवी							
۸ddr	ess: 605 CHAKRESHW	/ARI BUILDI	NG SARVODAY N	AGAR NAHUR ROAD I	MULUND WE	ST				
City:	MUMBAI, Taluka: Kurla	a, District: Mi	umbai Suburban, S	tate: Maharashtra, PIN:	400080					
ele	ohone no.: 9833457711		Mob	ile no: 918779873100		Emai	I : NISHITSAI	NGHVI1	2@GMAIL.COM	
ОВ	: Jul 03, 2001	Ca	tegory: Open		Physically Handicap: No					
rev	ious Latest Examinatior	n Details: Se	m I(Regular-Rev16)	Exam Event: Nov-2019 Seat No: 7014699 (Status: ATKT)					
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	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting				A[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting			Th-U	A[]		
3	83013	Business Ec	onomics VI			Th-U	A[]			
4	83014	Commerce \	/I			Th-U	Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A []		
6 83016 Export Marketing Paper II Th-CA []										
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
/lark	Statement Fee		Total:							
Pavn	nent Details:	mount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N			MICR No:	<u> </u>	DD Date:		Bank			
Cent	er Preference (Code/Na	ame):					<u> </u>			
	ie Preference (Code/Na									
	`		Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted				D-4	·	
				complete and correct to bed for the examination				Date:		
equ	est for any special conc	ession such	as change in time	or day fixed for universi	ty Examination	on etc. on religious o	r any			
	r ground. I understand ti elled or rejected.	hat in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
Student's Signature									udent's Signature	
Declaration by Principal/HOD/Chairperson										
	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									
	onsibility of fulfillment/re se/term work (if any) ac			e/she is regular student	of this Colle	ge and has complete	d the required	d attenda	ance and practical	
Jours	Scrienii work (ii ariy) ac		iivorsity ruics.						,	
Place	ā.									
ate										
out.				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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PRN: Eligibility Status:			bility Status:	Examination for 109796	m No.:	Division/Section:	Roll No).:	Majuri	
	2018016400934651		Eligible						1 asus1	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: KAMAL	.IYA MAYURI	NARESH			Mother's Name: M	ANJULA	(Gender: Female	
Nam	e in Vernacular Langua	ige:કામલિયા ય	મયુરી નરેશ							
Addr	ess: 1st wadi 90 feet ro	ad Dharavi K	umbharwada							
City:	Mumbai, Taluka: Mum	bai, District: N	/lumbai City, State	: Maharashtra, PIN: 40	0017					
Tele	phone no.:		Mob	ile no: 918291362199		Emai	l : mayurikam	aliya@g	mail.com	
DOB	: May 29, 2001	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33314 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape	er Details: Plea	ise select Par	oer details which y	ou want to appear (UA	- University A	ssessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ng IX - Financial Accounting				A[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	ng X - Cost Accounting			A[]		
3		Business Eco	onomics VI					A []		
4	83014	Commerce V	Ί				Th-U			
5	5 83015 Direct and Indirect Taxation Paper II Th-CA []									
6	83016	Export Marke	ting Paper II				Th-C	A []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	mount Recei	ved:	Co	llege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	C:		
Cent	er Preference (Code/N	ame):								
Venu	ue Preference (Code/Na	ame):								
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examination	on,			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 correct t	o the best of n	ny knowledge and be	elief. I	Date:		
	est for any special cond									
	r ground. I understand t	hat in the eve	ent of any informat	on being found false o	r incorrect, my	candidature is liable	e to be			
canc	ancelled or rejected. Student's Signature									
Decl	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	Date: College Staff Signature Seal and Signature of Principal/HOD/Chairperson									



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	PRN:	Eligibility Status:	Examination form 109797	n No.:	Division/Section:	Roll No	.:	Arban cret	
;	2018016400934666	Eligible		III				N. She	
nstrı	uction Medium:	•			Nationality:	India			
			Student's Pers	onal Informati	on				
Stud	ent's Name: SHAIKI	H ARBAZ MANZOOR			Mother's Name: Al	SHA	(Gender: Male	
Nam	e in Vernacular Langua	ige:शेख अरबाज मांझ्र							
Addr	ess: Plot no 10, Room	no 748, Lotus colony, Shivaji na	gar, Govandi (W), Mun	nbai					
City:	Mumbai, Taluka: Kurla	, District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400043					
Tele	phone no.:	Mob	ile no: 918779630644		Emai	l : anjumshaik	hmanzo	or@gmail.com	
DOB	: Mar 18, 2001	Category: Open		Physically	Handicap: No				
Prev	ous Latest Examination	n Details: Sem II(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 719	90256 (Status: Pass)	
Exan	n form appearance type	e: Fresher							
Pape	r Details: Plea	ise select Paper details which y	ou want to appear (UA	- University A	ssessment,CA - Co	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001	Financial Accounting and Audit	ing IX - Financial Accοι	unting	Th-UA	٩[]			
2	83007	Financial Accounting and Audit	ing X - Cost Accounting	ng X - Cost Accounting			٩[]		
3	83013	Business Economics VI				Th-U	٩[]		
4	83014	Commerce VI					٩[]		
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA	۹[]		
6	83016	Export Marketing Paper II				Th-CA	۹[]		
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Davr	nent Details:	Amount Received:	Co	llege Receipt I	No. and Date:				
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	er Preference (Code/Na			DD Date.		Dank	•		
	e Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·							
	,	ination and Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar	
req	uest permission to pres	ent myself for the ensuing exan	nination. I have remitted	d the prescribe	ed fee for the same.	l hereby		viayaviila.	
		ade in this application are true, bus and the list of books prescr					Date:		
		ession such as change in time							
othe	ground. I understand t	hat in the event of any informati							
cancelled or rejected. Student's Signature								udent's Signature	
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								
		ectification of the information. Haccording to university rules.	e/she is regular studen	t of this Colleg	e and has complete	d the required	d attenda	ance and practical	
cour	serterm work (ii arry) ac	cording to driiversity rules.							
Place) :								
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Date									
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			Conogo otan oignataro			Principal/HOD/Chairperson			



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PRN: Eligibility Status:			bility Status:	Examination for 109798		Division/Section:	Ro	II No.:	12	
:	2018016400934674		Eligible						RE. Radiil	
nstru	uction Medium:					Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stude	ent's Name: PATIL	PRANALI CH	IANDRAKANT			Mother's Name:	VAISHALI	(Gender: Female	
Nam	e in Vernacular Langua	age:पाटील प्रण	गाली चंद्रकांत							
Addr	ess: ROOM NO.48, Ek	CTA MITRA M	IANDAL, BHIM NA	GAR,						
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	tate: Maharashtra, P	IN: 400086					
Telep	ohone no.:		Mob	oile no: 91750688265			nail : prpatil(070@gmail.c	com	
	: Jun 01, 2001		tegory: Open	_	Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat No: 728	83723 (Status: ATKT)	
	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (L	JA - University A	Assessment,CA - (College Ass	essment)		
SN	Paper Code			Paper Nam	Paper Name				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	ounting	Т	h-UA[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounti	ng X - Cost Accounting			h-UA[]		
3 83013 Business Economics VI								Th-UA[]		
4 83014 Commerce VI							Т	Th-UA []		
5	83015	Direct and In	direct Taxation Pa	per II			Т	h-CA[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Ţ	h-UA [] ;Th-	-CA[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee		Examination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ived:	C	College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		le le	Bank:		
	er Preference (Code/N	lame):	1		1					
	ie Preference (Code/N									
Γο, C	Director, Board of Exam	nination and E		ontroller Of Examina	tion,			Place:	Vidyavihar	
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	are that all statement many gone through the sylla							Date:		
	est for any special con									
other	ground. I understand									
cancelled or rejected. Student's Signatu							udent's Signature			
Decla	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 stude	ent of this Collec	ge and has comple	eted the req	uired attenda	ance and practical	
court	——————————————————————————————————————									
Place	ā.									
	<i></i>									
Date:										
Jul.0.	,			College Staff Signature Seal and Signature			nature of			
								incipal/HOD/Chairperson		



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Application Form for Examination of Summer Session 2021 event.

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	109799	II INO	Division/Section:	Roll No		
:	2018016400934682	Eligible					Robist	
Instru	uction Medium:				Nationality:	India		
			Student's Perso	onal Informati	on			
Stud	ent's Name: MANDA	VKAR ROHIT RAJU			Mother's Name: SU	VARANA	Gender: Male	
Nam	e in Vernacular Langua	ge:रोहित						
Addr	ess: SIDDHESWAR TA	LAV ANNA MADRASI CHAWL	. CADBURY COMPAN	Y THANE WE	ST			
City:	THANE, Taluka: Thane	e, District: Thane, State: Mahara	ashtra, PIN: 400601					
Telep	ohone no.:	Mob	ile no: 919167679603		Email	: ROHITMAD	DAVKAR123@GMAIL.COM	
DOB	: Apr 19, 2000	Category: Open		Physically	Handicap: No			
Previ	ious Latest Examinatior	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 7283701 (Status: ATKT)	
Exam form appearance type: Fresher								
Pape	er Details: Plea	ege Assessn	nent)					
SN	Paper Code		Paper Name				AM - AT	
1	83001	Financial Accounting and Audit	ing IX - Financial Accou	ınting		Th-U	A[]	
2	83007	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	A[]	
3	83013	Business Economics VI				Th-U	A[]	
4	83014	Commerce VI				Th-U	A[]	
5	83015	Direct and Indirect Taxation Pa	per II			Th-C/	A[]	
6	83020	Computer systems and Applica	tions Paper II			Th-U	A [] ;Th-CA []	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination Fees	
Mark	Statement Fee	Total:						
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	er Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·						-
	e Preference (Code/Na						T	1
		ination and Evaluations / The C					Place: Vidyavihar	
decla	are that all statement ma	ent myself for the ensuing exan ade in this application are true, bus and the list of books prescr	complete and correct to	the best of n	ny knowledge and be	lief. I	Date:	
reque other	est for any special conc ground. I understand t	ession such as change in time hat in the event of any informat	or day fixed for universit	ty Examination	on etc. on religious or	any		
cancelled or rejected.							Student's Signature	
Declaration by Principal/HOD/Chairperson								
respo	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H cording to university rules.						
Place	e:							
Date	:							



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Examination form No.:

Disciple 16



	PRN:	Eligi [/]	ibility Status:	109800	II INU	Division/Section:	Roll No).:	Dealre			
20180	016400934697		Eligible		.l III				Asalre			
Instruction	Medium:					Nationality:	India					
				Student's Perso	onal Informati	ion						
Student's I	Name: SALVE	AJINKYA RA	AMESH			Mother's Name: S	EEMA	G	ender: Male			
Name in V	ernacular Langua	ige:साळवे अि	जेंक्य रमेश सीमा									
				IAMWAR NAGAR 1 VIKI		-						
City: MUM	IBAI, Taluka: Kurla	a, District: Mu		State: Maharashtra, PIN:	: 400083							
Telephone				oile no: 918454067415		Ema	il : ajinkya.salv	ve25@gm	nail.com			
DOB: Dec			tegory: Reserved (, ,		Handicap: No						
			m III(Regular-Rev1	ı 6)	Exam Even	nt: Nov-2019	Seat	t No: 7283	3526 (Status: ATKT)			
	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				ting IX - Financial Accou			Th-U					
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounting	J		Th-U	A[]				
3	83013	Business Eco	onomics VI			Th-UA	A[]					
4	83014	Commerce V	/1			Th-U	Th-UA[]					
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C	A[]				
6	83016	Export Marke	eting Paper II				Th-CA	A []				
Convocation	on Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination F	-ees			
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	eference (Code/Na											
	•			Controller Of Examination	on.			Place:	Vidvovibor			
,	•			nination. I have remitted	•	ed fee for the same.	I hereby	Flace.	Vidyavihar			
declare the	at all statement ma	ade in this ap	pplication are true,	complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:				
				ribed for the examination or day fixed for universit								
other grou	ind. I understand t			tion being found false or								
cancelled	or rejected.		-	-				Stu	dent's Signature			
Declaratio	n by Principal/HO	D/Chairners	<u></u>					0	dent 3 dignatare			
		-		y me. The information pr	winted in the f	orm is correct to the	hast of my kn	owledne	Lalso undertake the			
				le/she is regular student								
course/ter	m work (if any) ac	cording to un	iversity rules.	-		•			•			
Place:												
				-								
Date:				0.1101	" O'		01	. 0:				
				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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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:	Eligibility Status:	Examination form 109801	n No.: Di	ivision/Section:	Roll No.:		Histoli			
:	2018016400934701	Provisional						Lastace			
Instru	uction Medium:	•		Na	ationality:	India	•				
	Student's Personal Information										
Stud	ent's Name: LODAY	ARTIBEN	C	Gender: Female							
Nam	e in Vernacular Langua	je:LODAYA MIRALI KAMLES	HBHAI	•			•				
Addr	ess: ROOM NO.304, NE	W HARKU NIWAS KARVE R	D, NEAR GOKUL BANG	GLOW, MHATRE	E WADI, DOMBIVL	.l					
City:	DOMBIVLI, Taluka: Mu	mbai, District: Mumbai City, St	ate: Maharashtra, PIN: 4	121202							
Tele	ohone no.:	Mot	ile no: 919879226235		Email	: lodayamirali	7@gma	ail.com			
DOB	: Mar 03, 1999	Category: Open		Physically Ha	andicap: No						
		Details: Sem III(Regular-Rev	6)	Exam Event: N	Nov-2019	Seat I	No: 728	33379 (Status: ATKT)			
	n form appearance type										
	er Details: Pleas	se select Paper details which y	ou want to appear (UA	- University Ass	sessment,CA - Coll	ege Assessme	ent)				
SN	Paper Code		Paper Name					AM - AT			
1		inancial Accounting and Audit				Th-UA					
2		Financial Accounting and Audit	ing X - Cost Accounting			Th-UA	[]				
3		Business Economics VI				Th-UA					
4		Commerce VI				Th-UA					
5 83015 Direct and Indirect Taxation Paper II Th-CA []											
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []											
	ocation Fee	Exam Form Late	Fee	Exam Form Super Late Fee		Exam	ination	Fees			
Mark	Statement Fee	Total:									
Payn	nent Details:	mount Received:	Col	lege Receipt No	o. and Date:						
DD N	lo:	MICR No:		DD Date:			Bank:				
Cent	er Preference (Code/Na	me):									
Venu	ie Preference (Code/Na	me):									
To, [Director, Board of Exami	nation and Evaluations / The C	Controller Of Examinatio	n,		ı	Place:	Vidyavihar			
		ent myself for the ensuing exar					Date:				
		ide in this application are true, ous and the list of books prescr					Date.				
requ	est for any special conce	ession such as change in time	or day fixed for universi	ty Examination e	etc. on religious or	any					
	r ground. I understand tr elled or rejected.	at in the event of any informat	ion being found false or	incorrect, my ca	andidature is liable	to be					
oano	onou or rojootou.						Stı	udent's Signature			
Deck	aration by Principal/HOI	D/Chairperson									
		zed by the College staff and by									
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.							ince and practical				
Place	e :										
			_								
Date	:										
			College Sta	aff Signature				ature 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 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	109802	II NO	Division/Section:	Roll No	<u>Sw</u>	213			
:	2018016400934724	724 Eligible			30	41					
Instruction Medium: Nationality: India											
	Student's Personal Information										
Stude	ent's Name: CHINCI	HALKAR SWATI CHANDRAKA	NT		Mother's Name: Ch	IANDANA	Gender: Femal	е			
Nam	Name in Vernacular Language:चिंचाळकर स्वाती चंद्रकांत										
Address: LALBATTI HANUMAN TEKADI ASALPHA VILLAGE GHATKOPAR WEST											
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400084											
Telep	ohone no.:	Mob	ile no: 917208024661		Email	: swatichinch	alkar4@gmail.com				
	: Oct 13, 2000	Category: Reserved (Physically	Handicap: No						
Previ	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 7283202 (Status:	Pass)			
Exan	n form appearance type										
Pape	r Details: Plea	se select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessn	nent)				
SN	Paper Code		Paper Name				AM - AT				
1	83001	Financial Accounting and Audit	ing IX - Financial Accou	ınting		Th-U/	\[]				
2	83007	Financial Accounting and Audit	ing X - Cost Accounting			Th-U/					
3	83013	Business Economics VI	A[]								
4	83014 Commerce VI Th-U										
5	83015	Direct and Indirect Taxation Pa	per II			Th-C/	CA[]				
6	83016	Export Marketing Paper II				Th-C/	\[]				
Conv	rocation Fee	Exam Form Late	Fee	Exam Form Super Late Fee			Examination Fees				
Mark	Statement Fee	Total:									
Pavn	nent Details:	mount Received:	Col	leae Receipt	No. and Date:						
DD N		MICR No:		DD Date: Bank							
Cent	er Preference (Code/Na										
	ie Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·									
	`	ination and Evaluations / The C	ontroller Of Examinatio	n,			Place: Vidyavihar				
l requ decla	uest permission to presore that all statement ma	ent myself for the ensuing exan ade in this application are true,	nination. I have remitted complete and correct to	I the prescribe the best of n	ny knowledge and be	lief. I	Date:				
reque other	est for any special conc ground. I understand t	bus and the list of books prescr ession such as change in time hat in the event of any informati	or day fixed for universi	ty Examination	on etc. on religious or	any					
cancelled or rejected. Student's Signature of the student of the s								ure			
Decla	aration by Principal/HO	D/Chairperson									
respo	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H cording to university rules.									
Place	e:										
Date	:										



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

Application Form for Examination of Summer Session 2021 event.

Examination form No.:

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligib	bility Status:	Examination form 109803	Examination form No.: 109803		Roll No).:	Ques.		
:	2018016400934732		Eligible								
Instruction Medium: Nationality: India						India					
	Student's Personal Information										
Stud	ent's Name: RAY PF	RIYA VINAY				Mother's Name: VI	MAL	G	ender: Female		
Nam	Name in Vernacular Language:राय प्रिया विनय										
Address: GORKHA CHAWL, DARGAH ROAD, JHA NIWAS AMAR NAGAR, MULUND COLONY MULUND WEST											
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400082											
Telephone no.: Mobile no: 917506594370 Email : ray.vinay1971@gmail								ail.com			
	: Nov 22, 2000		egory: Open		Physically	Handicap: No					
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Ever	t: Nov-2019	Sea	t No: 728	3517 (Status: Pass)		
Exan	n form appearance type	: Fresher									
	er Details: Plea	se select Pap	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				ing IX - Financial Accou			Th-U				
2				ing X - Cost Accounting	l			Γh-UA []			
3									h-UA []		
4 83014 Commerce VI Th-L								Th-UA []			
5			direct Taxation Par					n-CA[]			
6	83023	Investment A		lio Management Paper			Th-C	A []			
	ocation Fee		Exam Form Late I	Fee	ee Exam Form Super Late		Examination Fees		Fees		
Mark	Statement Fee		Total:								
Davn	nent Details: A	mount Recei	wed:	Col	lege Receipt	No. and Date:					
DD N			MICR No:	Col	College Receipt No. and Date: DD Date:			Bank:			
	er Preference (Code/Na		WHOTE TWO.		DD Date.		Barn	·-			
	ie Preference (Code/Na										
	`		valuations / The C	controller Of Examinatio	n			Diago	Video dhea		
	-			nination. I have remitted	•	ed fee for the same	l herehv	Place:	Vidyavihar		
decla	are that all statement ma	ade in this ap	plication are true,	complete and correct to ibed for the examination	the best of r	ny knowledge and be	elief. I	Date:			
reque	est for any special conc	ession such a	as change in time o	or day fixed for universi	ty Examination	on etc. on religious of	any				
other	ground. I understand the	nat in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be				
cancelled or rejected. Student's Signature							dent's Signature				
Decla	aration by Principal/HO	D/Chairperso	'n								
respo		ectification of	the information. He	/ me. The information p e/she is regular student							
Place	e:										
Date:											



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

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility	y Status:	Examination forr 109804	n No.:	Division/Section:	Roll No.	.:	See /	
2	2018016400934755	Eligit	ible		III				(Se	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Student's Name: GUPTA JYOTI SURESH Mother's Name: VIMLA Gender:										
	Name in Vernacular Language:गुप्ता ज्योती सुरेश									
	Address: r.no 10 namdev niwas bldg near kamath tower juni dombivli road dom (w)									
City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202										
	phone no.:			ile no: 919664812324	ı		l : prashantgu	pta753@	yahoo.com	
	3: Dec 08, 2000		ory: Open			Handicap: No				
Previ	ious Latest Examination	1 Details: Sem III((Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33268 (Status: ATKT)	
	n form appearance type									
Pape	er Details: Plea	se select Paper d	details which yo	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1	83001 I	Financial Account	nting and Auditi	ng IX - Financial Accoι	unting		Th-UA	۱ [
2	83007 I	Financial Account	nting and Auditi	ng X - Cost Accounting]		Th-UA	Th-UA []		
3	83013 I	Business Econom	mics VI				Th-UA	⁻ h-UA []		
4	83014	Commerce VI					Th-UA	۱[]		
5	83015 I	Direct and Indirect	ct Taxation Par	per II			Th-CA	-CA[]		
6	83016 I	Export Marketing	Paper II				Th-CA	۱] ۱		
Conv	vocation Fee	Exa	am Form Late F	-ee	Exam Form	Super Late Fee	Exam	nination	Fees	
Mark	Statement Fee	Tota	tal:							
					•					
_		Amount Received:		Col		No. and Date:				
DD N			CR No:		DD Date: Ba			Bank:		
	ter Preference (Code/Na									
_	ue Preference (Code/Na	•								
	Director, Board of Exami							Place:	Vidyavihar	
decla	uest permission to prese are that all statement ma gone through the syllat	ade in this applica	ation are true, o	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:		
reque other	est for any special conc r ground. I understand th	ession such as ch	change in time o	or day fixed for universi	ity Examinatio	on etc. on religious or	any			
	elled or rejected.							Stu	udent's Signature	
Decla	aration by Principal/HOI	D/Chairperson								
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) acc	ectification of the in	information. He							
Place	ə: 									
Date:	ate:									



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

 $\label{thm:eq:continuous} \mbox{Application Form for Examination of Summer Session 2021 event.}$

 $B. Com. (with\ Credits) - Regular - Rev16 - T.Y.\ B. Com. - Sem\ VI\ [2C00146]$

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	PRN:	Eligibility Status:	Examination form 109805		Division/Section:	Roll No.	.:	meusia			
	2018016400934763	Eligible									
nstrı	uction Medium:	•			Nationality:	India					
	Student's Personal Information										
Stud	ent's Name: MEHTA	DARSHAN KETAN			Mother's Name: PA	RITA	(Gender: Male			
Name in Vernacular Language:Mehta darshan ketan											
Addr	Address: 301, Ganesh Krupa Zaver Road Mulund West Mulund West										
City:	Mulund, Taluka: Kurla,	District: Mumbai Suburban, Sta	ate: Maharashtra, PIN: 4	08000							
ГеІеј	ohone no.: 25670861	Mot	ile no: 918879845002		Email	: mehtadarsh	nan319@	@gmail.com			
ООВ	: Mar 07, 2000	Category: Open		Physically	Handicap: No						
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33401 (Status: ATKT)			
Exan	n form appearance type	e: Fresher									
Pape	er Details: Plea	se select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Coll	ege Assessm	nent)				
SN	Paper Code		Paper Name					AM - AT			
1	83001	Financial Accounting and Audit	ing IX - Financial Accou	nting		Th-UA	۹[]				
2	83007	Financial Accounting and Audit	ing X - Cost Accounting			Th-UA	۹[]				
3	83013	Business Economics VI				Th-UA	Th-UA[]				
						Th-UA	Th-UA []				
5 83015 Direct and Indirect Taxation Paper II Th-							۹[]				
6 83016 Export Marketing Paper II Th-CA []							۹[]				
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees							Fees				
Mark	Statement Fee	Total:									
20vm	nent Details:	mount Received:	Coll	ogo Possint	No. and Date:						
DD N		MICR No:		DD Date:	No. and Date.	Bank					
	er Preference (Code/Na			DD Date.		Dalik.	•				
	ie Preference (Code/Na										
	,	, , , , , , , , , , , , , , , , , , ,	Controller Of Eversinetic								
		ination and Evaluations / The C			ad fac for the come. I	harabu	Place:	Vidyavihar			
		ent myself for the ensuing exar ade in this application are true,					Date:				
		bus and the list of books prescr									
eque	est for any special cond r around. I understand t	ession such as change in time hat in the event of any informat	or day fixed for universit on being found false or	y Examinatio incorrect. mv	n etc. on religious or candidature is liable	any to be					
	elled or rejected.	······································	and a sung reason and a sung a	,			٥.				
							St	udent's Signature			
	aration by Principal/HO	-	T								
i his 'esp	form is carefully scrutin	ized by the College staff and by ectification of the information. H	/ me. I ne information pi e/she is regular student	of this Collec	orm is correct to the t se and has completed	est of my kno d the required	owledge Lattenda	e. I also undertake the ance and practical			
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.							F				
Place	e:										
Date	:										
			College Sta	College Staff Signature			Seal and Signature of				



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

Application Form for Examination of Summer Session 2021 event.

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	PRN:	Eligi	bility Status:	Examination for 109806		Division/Section:	Roll No).:	ohin	
	2018016400934771		Eligible						yashin	
Instru	uction Medium:	-				Nationality:	India			
Student's Personal Information										
Stud	ent's Name: VISARIA	A YASHVI M	UKESH			Mother's Name: Bl	HAVNA	(Gender: Female	
Nam	e in Vernacular Langua	ge:VISARIA	YASHVI MUKESH	1						
Addr	ess: B-108, Bulphoe CH	IS, Plot-27,	Sector-9A Gurudw	ara Road, Vashi, Nav	vi Mumbai					
City:	Navi Mumbai, Taluka: T	Thane, Distri	ct: Thane, State: N	1aharashtra, PIN: 400	0703					
Tele	ohone no.: 27654393		Mot	oile no: 91986915749	3	Emai	il : yashvi.visa	ria27@g	gmail.com	
DOB	: Nov 27, 2000	Ca	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	Details: Se	m III(Regular-Rev	16)	Exam Even	t: Nov-2019	Sea	t No: 728	33768 (Status: Pass)	
Exan	n form appearance type	: Fresher								
Pape	r Details: Pleas	se select Pa	per details which y	ou want to appear (l	JA - University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Nam	пе				AM - AT	
1	83001 F	inancial Ac	counting and Audit	ing IX - Financial Acc	counting		Th-U	A []		
2	83007 F	inancial Ac	counting and Audit	ing X - Cost Accounti	ing		Th-U	A []		
3	83013 E	Business Ec	onomics VI				Th-U	Γh-UA []		
4	83014	Commerce \	/I				Th-U	「h-UA []		
5 83015 Direct and Indirect Taxation Paper II Th-C/							A []			
6 83020 Computer systems and Applications Paper II							Th-U	A [] ;Th-	CA[]	
Conv	rocation Fee		Exam Form Late	Fee	e Exam Form Super Late Fee			Examination Fees		
Mark	Statement Fee		Total:							
			•		•		•			
		mount Rece	ived:	C	College Receipt	No. and Date:				
DD N			MICR No:		DD Date:			Bank:		
	er Preference (Code/Na									
	e Preference (Code/Na									
	irector, Board of Exami							Place:	Vidyavihar	
decla	uest permission to prese are that all statement ma gone through the syllat	ade in this ap	oplication are true,	complete and correct	t to the best of n	ny knowledge and be	elief. I	Date:		
requ	est for any special conce	ession such	as change in time	or day fixed for unive	rsity Examination	on etc. on religious o	r any			
	ground. I understand the elled or rejected.	nat in the eve	ent of any informat	ion being found false	or incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							St	udent's Signature	
Deck	aration by Principal/HOI	D/Chairperso	on							
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.										
Place:										
D-:										
Date				College	Staff Signature		Seal	and Sign	nature of	
				Conlogo	College Stall 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 2021 event.

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	PRN:	Eligil	bility Status:	Examination for 109807	m No.:	Division/Section:	Roll N	0.:	Thruto:	
	2018016400934786		Eligible							
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: DUBRI	YA SHRUTI N	NANJI			Mother's Name: M	UKTA	C	Gender: Female	
Nam	Name in Vernacular Language:डुबरीया श्रुती NANJI									
Address: 27/7 MAHAVIR KUTIR , VALLABHBAUG LANE , GHATKOPAR EAST , MUMBAI PANTNAGAR , MAHARASTRA,400075										
City:	MUMBAI, Taluka: Mur	nbai, District:	Mumbai City, State	e: Maharashtra, PIN: 4	00075					
Tele	ohone no.:		Mob	ile no: 917021728986		Emai	l : dubriyash	ruti@gma	il.com	
DOB	: Sep 13, 2000	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Ser	n I(Regular-Rev16)	Exam Even	t: Nov-2019	Sea	at No: 701	4671 (Status: ATKT)	
	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	oer details which y	ou want to appear (U	A - University A	Assessment,CA - Co	lege Assess	sment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001			ing IX - Financial Acco			Th-U	JA []		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountin	g		Th-U	JA []		
3	83013	Business Eco					Th-U	Th-UA[]		
4	83014 Commerce VI Th-UA []									
5	5 83015 Direct and Indirect Taxation Paper II Th-CA []									
6	83023	Investment A	nalysis and Portfo	lio Management Pape	·		Th-C	CA []		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	xamination Fees		
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ved:	Co	llege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Ban	Bank:		
Cent	er Preference (Code/N	ame):			I					
Venu	ie Preference (Code/N	ame):								
To, C	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examinati	on,			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 correct t	o the best of n	ny knowledge and be	elief. I	Date:	,	
	est for any special cond ground. I understand									
	elled or rejected.	andt iii tiic cvc	in or any imormat	on being lound raise o	i ilicollect, iliy	candidature is liable	, to be			
								Sti	udent's Signature	
	aration by Principal/HC	=		T 1						
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	e:			_						
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S. K. Somaiya College of Arts, Science and Commerce (540)

Application Form for Examination of Summer Session 2021 event.

B.Com.(with Credits)-Regular-Rev16-T.Y. B.Com.-Sem VI [2C00146]

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	PRN:	Eligibility Status:	Examination for 109808		Division/Section:	Roll No.	.:	Gavey			
2	2018016400934813	Eligible						Gavey			
Instruction Medium: Nationality: India						India					
	Student's Personal Information										
Stude	ent's Name: PAWAR	GAURI SHAHAJI			Mother's Name: JA	MUNA	(Gender: Female			
	Name in Vernacular Language:पवार गौरी शहाजी										
Addre	Address: BLDG NO 22/H ROOM NO.406 SADGURU KRUPA CHS SANGHARSH NAGAR CHANDIVALI FARM ROAD ANDHERI EAST MUMBAI -72										
		, District: Mumbai Suburban, S	State: Maharashtra, PI	N: 400072							
	phone no.:	Mol	bile no: 918104329391		Emai	l : gp41199@g	gmail.co	m			
	: Apr 22, 2001	Category: Open		Physically	Handicap: No						
Previ	ious Latest Examination	Details: Sem III(Regular-Rev	16)	Exam Event	t: Nov-2019	Seat	: No: 728	83484 (Status: Pass)			
	n form appearance type:	Fresher									
Pape	er Details: Pleas	se select Paper details which y	ou want to appear (U/	A - University A	Assessment,CA - Co	lege Assessm	nent)				
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2	83007 F	Financial Accounting and Audit	ting X - Cost Accounting	ng		Th-UA	4[]				
3	83013 B	Business Economics VI				Th-UA	۹[]				
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5	83015	Direct and Indirect Taxation Pa	iper II			Th-CA	۹[]				
6	83020 C	Computer systems and Applica	ations Paper II			Th-UA	A [] ;Th-	·CA []			
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees			
Mark	Statement Fee	Total:									
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Decla	aration by Principal/HOD	D/Chairperson									
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