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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		Division/Section:	Roll No	ı.:	Priyanka
	2018016400937162	Р	rovisional						1 8 19 attria
Instr	uction Medium:					Nationality:	India		
				Student's Po	ersonal Informati	on			
Stud	ent's Name: GOUS	WAMI PRIYA	NKABEN MANSU	KHGIRI		Mother's Name: JA	ASODA	(	Gender: Female
Nam	e in Vernacular Langua	age:गौसमी प्रि	यांकाबेन मांसुखगिरी						
Addr	ess: 3 WADI, OPP SIT	LA TEMPLE,	CID OFFICE, DHA	ARAVI, MUMBAI					
City:	MUMBAI, Taluka: Mur	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN	: 400017				
Tele	phone no.:		Mob	ile no: 91889831013	34	Ema	il : mansukhgo	owsami7	'8@gmail.com
DOB	: Jul 07, 2000	Cat	egory: Open		Physically Handicap: No				
Prev	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83265 (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	llege Assessn	nent)	
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	ng X - Cost Accounting			Th-U	A[]	
3	83013	Business Eco	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 83029 Elements of Operational Resear				rch Paper II			Th-C/	A [ ]	
Convocation Fee Exam Form Late F			Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:						
Pavr	nent Details:	Amount Recei	ived:	Ţ	College Receipt	No. and Date:			
DD N			MICR No:		DD Date:			:	
Cent	er Preference (Code/N	lame):	I .		I				
Venu	ue Preference (Code/N	ame):							
To, [	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar
	uest permission to pres							D-4	·
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requ	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examination	on etc. on religious o	r any		
	r 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						
	form is carefully scruting								
	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.								
				<u> </u>					
Plac	e:								
				_					
Date:									
				College	Staff Signature		Seal and Signature of Principal/HOD/Chairperson		
							Princi	ıpaı/HUL	J/Gnairperson



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Examination form No.:

Disciple 16



	PRN:	Eligib	oility Status:	110010	I INU	Division/Section:	Roll N	lo.:	N-A Jumbare	
	2018016400937177	E	Eligible						umbale	
Instr	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: <b>DUMB</b> I	RE NIKITA AV	INASH			Mother's Name:	SUNITA		Gender: Female	
Nam	e in Vernacular Langua	age:डुंबरे निकित	ना अविनाश							
Addr	ess: CHAWL NO 6 RO	OM NO 9 JOK	(IM COMPOUND	MAHARASHTRA NAGA	AR BHANDU	P WEST				
City:	MUMBAI, Taluka: Kurl	a, District: Mur	mbai Suburban, S	tate: Maharashtra, PIN:	400078					
Tele	ohone no.:		Mob	ile no: 918828152705		Er	nail : nikitadum	bre23@g	ımail.com	
DOB	: Feb 03, 2001	Cate	egory: Open		Physically	Handicap: No				
	ious Latest Examinatio		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Se	at No: 72	83237 (Status: ATKT)	
	n form appearance type									
Pape	er Details: Plea	ase select Pap	er details which y	ou want to appear ( UA	- University A	Assessment,CA -	College Assess	sment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acco	ounting and Audit	ng IX - Financial Accou	ınting	Th-	UA[]			
2	83007	Financial Acco	ounting and Audit	ng X - Cost Accounting		Th-	UA []			
3	83013	Business Eco	nomics VI					UA []		
4	83014	Commerce VI	<u> </u>					Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II							Th-	CA[]		
6	83016	ting Paper II				Th-	CA[]			
Conv	Convocation Fee Exam Form Late			Fee	Exam Form	Super Late Fee	Ex	aminatior	n Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Receiv	ved:	Coll	lege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bar	nk:		
Cent	er Preference (Code/N	ame):		l						
	ie Preference (Code/N									
To, [	Director, Board of Exam	nination and Ev	valuations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted						
				complete and correct to bed for the examination				Date:		
				or day fixed for universi						
othe	ground. I understand	that in the ever	nt of any informati	on being found false or	incorrect, my	candidature is lia	ble to be			
canc	elled or rejected.							St	tudent's Signature	
Decl	aration by Principal/HC	D/Chairpersor	n					_		
This	form is carefully scrutir	nized by the Co	ollege staff and by	me. The information p	rinted in the f	orm is correct to the	ne best of my k	nowledge	e. I also undertake the	
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular student	of this Colle	ge and has compl	eted the requir	ed attend	ance and practical	
Cour	se/term work (ii arry) at	cording to uni	versity rules.							
Place	٥٠									
. 100	<b>J</b> .			_						
Date:										
Date	ate:			College Staff Signature		Seal and Signature of				
				College Stall Signature			Principal/HOD/Chairperson			



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	PRN:	Eligi	ibility Status:	Examination 11001		Division/Section:	Roll No.	).:	202 10	
2	2018016400937185		Eligible						Rarande	
Instru	uction Medium:					Nationality:	India			
				Student's P	Personal Informati	on				
Stude	ent's Name: KARAN	IDE MRUNAI	LI RAJENDRA			Mother's Name: VA	AISHALI		Gender: Female	
Name	e in Vernacular Langua	age:कारंडे मृण	ाली_राजेंद्र							
	ess: R.NO.503, BLDG									
	MUMBAI, Taluka: Kurla	a, District: Μι	umbai Suburban, S	state: Maharashtra,	PIN: 400074					
	ohone no.:			oile no: 9190828534		-	il : rajendra547	71@gm	ail.com	
	: Nov 08, 2000		tegory: Reserved (	-	<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83318 (Status: ATKT)	
Exam form appearance type: Fresher  Paper 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 - Co	ilege Assessm	nent)	=	
SN	Paper Code	<del> </del>		· · · · · · · · · · · · · · · · · · ·	Paper Name				AM - AT	
1					ng IX - Financial Accounting					
2				ting X - Cost Accoun	iting		Th-U/			
3		Business Eco Commerce V						Th-UA [] Th-UA []		
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Payn	nent Details:	Amount Recei	ived:		College Receipt I	No. and Date:				
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Cent	er Preference (Code/Na	lame):								
Venu	ie Preference (Code/Na	ame):								
To, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examin	nation,			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 corre	ect to the best of m	ny knowledge and be	elief. I	Date:		
	est for any special conc									
	ground. I understand t	that in the eve	ent of any informati	on being found fals	e or incorrect, my	candidature is liable	e to be			
cance	elled or rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	rectification of	f the information. 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 knowd the required	owledge d attenda	e. I also undertake the ance and practical	
Place	<b>)</b> :									
Date:				College	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 N 110012	10.:	Division/Section:	Roll No.	.:	1-1-1	
	2018016400937193	Eligible						agrikto)	
nstr	uction Medium:	•			Nationality:	India	•		
			Student's Persona	al Informati	on				
Stud	lent's Name: PATEL	YUKTI RAMESH			Mother's Name: KA	LPANA	Ge	nder: Female	
Nam	ne in Vernacular Langua	ge:पटेल युक्ती रमेश							
Addı	ress: A-10/112 R.N. GAI	NDHI VIDYAVIHAR EAST O.N.	G.C. COLONY						
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	tate: Maharashtra, PIN: 40	00077					
Tele	phone no.:		ile no: 917045044049	no: 917045044049					
	3: May 10, 2001	Category: Open			Handicap: No	T			
		Details: Sem III(Regular-Rev1	6) E	Exam Even	t: Nov-2019	Seat	: No: 72834	478 (Status: ATKT)	
	n form appearance type								
		se select Paper details which y	ou want to appear ( UA - U	Jniversity A	ssessment,CA - Col	lege Assessm			
SN	Paper Code		Paper Name					AM - AT	
1		Financial Accounting and Audit		ng		Th-U/			
2		Financial Accounting and Audit	ing X - Cost Accounting		Th-U/				
3		Business Economics VI			Th-UA				
4		Commerce VI				Th-UA[]			
5		Direct and Indirect Taxation Pa	per II			Th-C/	A [ ]		
6	83016	Export Marketing Paper II				Th-C/	٩[]		
Con	vocation Fee	Exam Form Late	Fee Ex	ee Exam Form Super Late Fee			mination Fe	ees	
Marl	Statement Fee	Total:							
Pavi	ment Details:	mount Received:	Colleg	e Receipt	No. and Date:				
1 DC		MICR No:	DE	DD Date: Bar			:		
Cent	ter Preference (Code/Na	ame):	<u>'</u>			l			
√eni	ue Preference (Code/Na	ime):							
Γο, I	Director, Board of Exam	ination and Evaluations / The C	controller Of Examination,				Place:	Vidyavihar	
		ent myself for the ensuing exan					Date:		
		ade in this application are true, ous and the list of books prescr					Date.		
equ	est for any special conc	ession such as change in time	or day fixed for university E	Examinatio	n etc. on religious or	any			
	r ground. I understand tl celled or rejected.	hat in the event of any informat	on being found false or inc	correct, my	candidature is liable	to be			
June	ched of rejected.						Stud	ent's Signature	
Decl	aration by Principal/HO	D/Chairperson							
		ized by the College staff and by							
	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.								
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Date	ş•								
- 4.0	<del>.</del>		College Staff Signature		Seal and Signature of				
			5 5			Principal/HOD/Chairperson			



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PRN:	Eligibility Status:	Examination form 110013	า No.:	Division/Section:	Roll No.:	.:	~ . h.	
2018016400937204	Eligible		III				Lujeli.	
nstruction Medium:	-			Nationality:	India	-		
	-	Student's Perso	onal Informati	on				
Student's Name: BEHERA	ANJALI SHATRUGHAN			Mother's Name: MA	ALTI	C	Gender: Female	
lame in Vernacular Language	e: बेहरा अंजली शत्रुघ्न							
Address: R.NO.3 VIKAS NIWA	AS, SAMADHAN CHAWL.SAI	FEDPUL,SAKINAKA K	RISHNA NAC	àAR				
City: MUMBAI, Taluka: Mumba	oai, District: Mumbai City, State	e: Maharashtra, PIN: 40	0072					
elephone no.:	Mob	nile no: 919702154184	<u> </u>	Email	l : anjalibehera	a87@gn	nail.com	
OOB: Jul 08, 2000	Category: Open		Physically	Handicap: No				
Previous Latest Examination Γ	Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33163 (Status: Pass)	
xam form appearance type: F	Fresher							
Paper Details: Please	e select Paper 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 Fi	inancial Accounting and Audit	ing IX - Financial Accou	inting		Th-UA	۱]		
2 83007 Fi	inancial Accounting and Audit	ing X - Cost Accounting	g X - Cost Accounting			A[]		
3 83013 Bu	usiness Economics VI				Th-UA	۱]		
4 83014 Co	ommerce VI					Th-UA[]		
5 83015 Di	irect and Indirect Taxation Pa	per II	er II			4[]		
6 83016 Ex	xport Marketing Paper II				Th-CA	A[]		
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exam	mination	Fees	
Mark Statement Fee	Total:							
<u>,                                      </u>	nount Received:	<u> </u>		No. and Date:				
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Center Preference (Code/Nam	· · · · · · · · · · · · · · · · · · ·							
/enue Preference (Code/Nam	,							
	nation and Evaluations / The C					Place:	Vidyavihar	
leclare that all statement mad	nt myself for the ensuing exan de in this application are true, us and the list of books prescri	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:		
equest for any special conces	ssion such as change in time	or day fixed for universit	ty Examinatio	on etc. on religious or	any			
other ground. I understand that cancelled or rejected.	at in the event of any informati	on being found talse or	incorrect, my	candidature is liable	to be	l		
						Stı	udent's Signature	
Declaration by Principal/HOD/	/Chairperson							
	zed by the College staff and by stification of the information. Hording to university rules.							
Place:								
Date:		College Sta	College Staff Signature			Seal and Signature of Principal/HOD/Chairpe		



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	PRN:	Eligi	ibility Status:	Examination for 110014		Division/Section:	Roll No.:	.:	Chate	
_2	2018016400937212	l	Eligible				l			
nstru	uction Medium:					Nationality:	India			
				Student's Pers	sonal Informati	ion				
tude	ent's Name: MANDA	ALIYA SHWE	TA NANDLAL			Mother's Name: HA	ARSHA	G	Gender: Female	
lame	e in Vernacular Langua	ige:मांडलिया	श्वेता नंदलाल							
ddre	ess: Room no 2 wadia e	estate samar	th chawl bail bazar	kurla west						
	Mumbai, Taluka: Mumb	bai, District: N								
	ohone no.:			oile no: 917021678181	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	: Mar 22, 2001		tegory: Open		Physically Handicap: No					
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	No: 728	33390 (Status: Pass)	
	n form appearance type									
		ise select Par	per details which y	ou want to appear ( UA		Assessment,CA - Col	lege Assessm	ient)		
SN	Paper Code			Paper Name				AM - AT		
1			<u>-</u>	ing IX - Financial Acco	<u>-</u>	Th-UA				
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3		Business Eco						Th-UA []		
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5 83015 Direct and Indirect Taxation Paper II							Th-CA			
6		Investment A	1	lio Management Paper			Th-CA			
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	er Preference (Code/Na		IVII OTT THE							
	ue Preference (Code/Na									
	Director, Board of Exami			ontroller Of Examinati	ion.		$\overline{}$	Place:	Vidyavihar	
	uest permission to prese					ed fee for the same.		Piace.	Viuyaviiiai	
Iecla	are that all statement ma	ade 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 syllatest for any special conce									
ther	ground. I understand the							l		
ance	elled or rejected.							Stı	udent's Signature	
)ecla	aration by Principal/HOI	D/Chairpersc	on							
espo	form is carefully scrutini onsibility of fulfillment/re se/term work (if any) acc	ectification of	f the information. He							
Place	<b>:</b>									
Date:				College S	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:	Eligibility Status:	110015	NO	Division/Section:	Roll No	.:	Faiyaz	
:	2018016400937227	Eligible							
Instru	uction Medium:				Nationality:	India			
			Student's Persona	al Informati	on				
Stud	ent's Name: KHAN F	FAIYAZ AHMED MOHAMMED	HASAN		Mother's Name: ISI	HRAT	G	ender: Male	
Nam	e in Vernacular Langua	ge:खान फैयाज अहमद मोहम्मद	हसन						
Addr	ess: PRATHIBHA NIWA	AS CHAWL NO.2 ROOM NO.D	/21 KAJUPADA PIPELINE	SAKINAK	A MUMBAI MAHAR	ASHTRA - 40	0072		
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	State: Maharashtra, PIN: 40	00072					
Telep	ohone no.:	Mob	ile no: 918108021517		Email	: KHANFAIY	AZAHME	D01@GMAIL.COM	
DOB	: Feb 27, 2001	Category: Open		Physically Handicap: No					
Previ	ious Latest Examinatior	n Details: Sem III(Regular-Rev1	6) E	Exam Even	t: Nov-2019	Seat	ն No: 7283	3342 (Status: ATKT)	
Exam form appearance type: Fresher									
Pape	er Details: Plea	se select Paper details which y	ou want to appear ( UA - L	Jniversity A	ssessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001	Financial Accounting and Audit	ng IX - Financial Accounting Th				A []		
2	83007	Financial Accounting and Audit	ng X - Cost Accounting			Th-U	A [ ]		
3	83013	Business Economics VI				Th-U	Th-UA[]		
4	83014	Commerce VI				Th-U	A [ ]		
5	5 83015 Direct and Indirect Taxation Paper II						A[]		
6	83023	Investment Analysis and Portfo	lio Management Paper II			Th-C/	A [ ]		
Conv	ocation Fee	Exam Form Late	Fee E:	ee Exam Form Super Late Fee			mination F	ees	
Mark	Statement Fee	Total:							
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	er Preference (Code/Na	•							
	e Preference (Code/Na	,							
		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, ous and the list of books prescr	complete and correct to th	ne best of m	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 informati	or day fixed for university I	Examinatio	n etc. on religious or	any			
cancelled or rejected.								dent's Signature	
	aration by Principal/HO	<del>-</del>							
respo	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



http://mum.digitaluniversity.ac/

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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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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	Examination form 110016	1 No.:	Division/Section:	Roll No	<b>)</b> .:	H.A.Ruare.
:	2018016400937235		Eligible						HITTES
Instru	uction Medium:	•	-			Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: PUJAR	E HARSHAD	A ARJUN			Mother's Name: A	ANURADHA	G	ender: Female
Nam	e in Vernacular Langua	ge:पुजारे हर्षट	ा अर्जुन						
Addr	ess: R. NO.7,PJ CHAW	/L MUNSHIM	IAHAL,PRATAP N	GR ROAD BHANDUP V	VEST MUME	3AI 400078			
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, PIN:	400078				
	phone no.:		Mob	ile no: 918291678147		Ema	ail : pujarehars	hada9@g	gmail.com
DOB	: Dec 15, 2000	Ca	tegory: Open		<del>, , , ,</del>	Handicap: No			
	ous Latest Examination		m III(Regular-Rev1	6)	3492 (Status: Pass)				
	n form appearance type								
		se 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				ing IX - Financial Accou		Th-U			
2				ing X - Cost Accounting		Th-U			
3		Business Ec					Th-UA [] Th-UA []		
4			nor II						
5 83015 Direct and Indirect Taxation Paper II 6 83023 Investment Analysis and Portfolio Manager					<u> </u>		Th-C		
_	ocation Fee	investment F	Exam Form Late I			Super Late Fee	Th-C	mination	Food
	Statement Fee		Total:	ree		Super Late Fee	Exa	IIIIIauoii	rees
IVIGIR	Oldicinent i ee		Total.						
Payn	nent Details:	mount Rece	ived:	Coll	ege Receipt	No. and Date:			
DD N	lo:		MICR No:		DD Date:		Banl	<b>K</b> :	
Cent	er Preference (Code/Na	ame):							
Venu	e Preference (Code/Na	ame):							
To, D	irector, Board of Exam	ination and E	Evaluations / The C	ontroller Of Examination	n,			Place:	Vidyavihar
decla	ire that all statement ma	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examination	the best of n	ny knowledge and l	belief. I	Date:	
reque	est for any special conc	ession such	as change in time	or day fixed for universit	ty Examination	on etc. on religious	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 liab	le to be		
000								Stu	dent's Signature
This respo		ized by the ( ectification of	College staff and by the information. He	r me. The information pre/she is regular student					
Place	e: 								
Data									

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	bility Status:	Examination f		Division/Section:	Roll No.	:	
2	2018016400937243		Eligible						- Howas
nstru	ction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: PAWA	R MRUNMAI	SANJAY			Mother's Name: SI	NEHAL	(	Gender: Female
Name	e in Vernacular Langu	age:पवार मृण	मयी संजय						
Addre	ess: ROOM NO 2 TH	AKRUDDIN C	HAWL PRATAP N	AGAR ROAD MUNS	I MAHAL BHAN	DUP WEST			
City:	MUMBAI, Taluka: Kur	la, District: Μι	umbai Suburban, S	tate: Maharashtra, F	PIN: 400078				
Telep	hone no.:		Mob	ile no: 91865252681	4	Emai	l : mrunmaipa	war02@	gmail.com
OOB:	Feb 21, 2001	Ca							
⊃revi	ous Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33486 (Status: Pass)
Exam form appearance type: Fresher									
Pape	r <b>Details:</b> Plea	ase select Pa	per details which y	ou want to appear ( l	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				۹[]	
2	83007	Financial Ac	counting and Audit	ing X - Cost Account	ng X - Cost Accounting			۹[]	
3	83013	Business Ec	onomics VI				Th-UA	۹[]	
4	83014	Commerce \	/I				Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	A[]	
6	83020	Computer sy	stems and Applica	tions Paper II			Th-UA	۲[];Th-	CA[]
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees
Mark	Statement Fee		Total:						
				T					
		Amount Rece			College Receipt	No. and Date:	- In .		
DD N			MICR No:		DD Date:		Bank	:	
	er Preference (Code/N								
	e Preference (Code/N								
	irector, Board of Exan							Place:	Vidyavihar
decla	est permission to prest re that all statement man gone through the sylla	nade in this ap	oplication are true,	complete and correc	t to the best of m	ny knowledge and be	elief. I	Date:	
eque	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		
other	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		
Janice	elled of rejected.							St	udent's Signature
Decla	ration by Principal/HC	DD/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 nurse/term work (if any) according to university rules.								
Place	:								
2.1.									
Date:				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)

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	PRN:	Eligi	ibility Status:	Examination for 110018		Division/Section:	Roll No	).:		
7	2018016400937251		Eligible					ļ	Vinek	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: MORE	VIVEK VIJAY	7			Mother's Name: VI	DYA		Gender: Male	
Nam	e in Vernacular Langua	age:विवेक विज	जय मोरे							
Addr	ess: 2/11,Gabriel Gom	es chawl Neh	ıru Nagar,kanjur M	arg(E) Mumbai-4000	)42					
	Mumbai, Taluka: Kurla	a, District: Mur	mbai Suburban, St	ate: Maharashtra, Pl	IN: 400042					
	phone no.:		Mot	oile no: 91829157062	20	Emai	il : vivekmore0	)104@g	mail.com	
OOB	: Apr 01, 2000	Cat	tegory: Open		Physically	Handicap: No				
									83419 (Status: ATKT)	
Exam form appearance type: Fresher										
Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Asses										
SN	Paper Code	<u> </u>		Paper Name					AM - AT	
1		1		ng IX - Financial Accounting				A[]		
2	83007	<del> </del>		ing X - Cost Account	ng X - Cost Accounting			A[]		
3	83013	Business Eco					Th-U			
4		Commerce V						Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C/	A[]		
6	83023	Investment A	_	lio Management Pap	oer 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			College Receipt	No. and Date:				
DD N			MICR No:		DD Date:	10. 4 2 4	Bank			
	er Preference (Code/N		1							
	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 remit	tted the prescribe			<u>_</u>	Tray a viriai	
	are that all statement m							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	D/Chairperso	on							
respo	form is carefully scrutir onsibility of fulfillment/re se/term work (if any) ac	rectification of	f the information. H							
				<u> </u>						
Place:						l				
Data:						!	1			
Date:	•			College Staff Signature		Seal	and Sign	nature of		
				Conce	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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'e-Suvidha' account on

Seal and Signature of Principal/HOD/Chairperson



	PRN:	Eligibility Status:	Examination form 110019		Division/Section:	Roll No.	.:	Thomas
	2018016400937266	Eligible						
Instru	uction Medium:				Nationality:	India	-	
			Student's Pers	onal Informat	ion			
Stud	ent's Name: THAKK	AR AMIT MAHENDRA			Mother's Name: HE	MA	G	Gender: Male
Nam	e in Vernacular Langua	ge:ठक्कर अमित महेन्द्र						
Addr	ess: Room no 1, Niraj A	pt.gr. Floor, Ratanbai Compou	ınd, Shivaji Nagar, Waç	gle Estate, Th	ane (w)			
City:	thane, Taluka: Thane, [	District: Thane, State: Maharas	htra, PIN: 400604					
Telep	phone no.:	Mot	oile no: 918433617572		Email	: amitthakkar	:5678@g	gmail.com
DOB	: Nov 11, 2000	Category: Open		Physically	Handicap: No			
		n Details: Sem III(Regular-Rev1	16)	Exam Ever	t: Nov-2019	Seat	No: 728	3624 (Status: Fail)
Exan	n form appearance type	: Fresher						
Pape	er Details: Pleas	se select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code		Paper Name					AM - AT
1	83001 F	Financial Accounting and Audit	ting IX - Financial Accou	unting		Th-UA	A[]	
2	83007 F	Financial Accounting and Audit	ting X - Cost Accounting	9		Th-UA	A[]	
3	83013 E	Business Economics VI				Th-UA	A[]	
4	83014	Commerce VI				Th-UA	A[]	
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA	۹[]	
6	83016 E	Export Marketing Paper II				Th-CA	۹[]	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees
Mark	Statement Fee	Total:						
_	.=							
		mount Received:	Co		No. and Date:	ls .		
DD N		MICR No:		DD Date:		Bank:	-	
	er Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·						
	ue Preference (Code/Na	<u> </u>						
		ination and Evaluations / The C					Place:	Vidyavihar
decla	are that all statement ma	ent myself for the ensuing exar ade in this application are true, ous and the list of books prescr	complete and correct to	o the best of n	ny knowledge and be	lief. I	Date:	
reque other	est for any special conc r ground. I understand th	ession such as change in time nat in the event of any informat	or day fixed for univers	ity Examination	on etc. on religious or	any		
	elled or rejected.						Stu	udent's Signature
Decla	aration by Principal/HOI	D/Chairperson						
respo	onsibility of fulfillment/re	ized by the College staff and be ectification of the information. H cording to university rules.						
Place	e:							
Date	:							

College Staff Signature



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Examination form No.:

Disciple 16



	PRN:	Eligibility Status:	110020	Division/S	Section:	Roll No.:	Dhow	19
	2018016400937274	Eligible		III			2 nu	_
Instr	uction Medium:			Nationalit	ty:	India	•	
			Student's Perso	nal Information				
Stud	ent's Name: LUKKA	DHRUV KISHOR		Mother's	s Name: PC	OOJA	Gender: Male	
Nam	e in Vernacular Langua	age:धुव किशोर लुक्का						
Addr	ess: vishwa shanti 13 A	A PARSIWADI KOPRI KOLONY	THANE EAST					
City:	THANE EAST, Taluka:	: Thane, District: Thane, State: M	Maharashtra, PIN: 40060	03				
Tele	phone no.:	Mobi	ile no: 917718044727		Email	l : lukkadhruv5	51000@gmail.com	
DOB	: Oct 05, 2000	Category: Open		Physically Handicap	o: No			
		n Details: Sem III(Regular-Rev16	6)	Exam Event: Nov-201	19	Seat	No: 7283381 (Status: ATKT)	
	n form appearance type							
		ase select Paper details which yo		- University Assessmer	nt,CA - Col	lege Assessm		
SN	Paper Code		Paper Name			AM - AT		
1		Financial Accounting and Auditin		nting	Th-UA			
2	83007	Financial Accounting and Auditin	ng X - Cost Accounting		Th-UA	••		
3	83013	Business Economics VI			Th-UA	••		
4	83014	Commerce VI			Th-UA	Th-UA[]		
5	83015	Direct and Indirect Taxation Pap	oer II			Th-CA	\[]	
6	83020	Computer systems and Applicat	tions Paper II			Th-UA	([];Th-CA[]	
Conv	ocation Fee	Exam Form Late F	Fee	ee Exam Form Super Late Fee			nination Fees	
Mark	Statement Fee	Total:						
Pavr	nent Details:	Amount Received:	Coll	ege Receipt No. and D	)ate:			
DD 1		MICR No:	<u> </u>	DD Date:	ato.	Bank:		
	er Preference (Code/Na							
	ue Preference (Code/Na							
	`	nination and Evaluations / The Co	ontroller Of Examination	n,			Place: Vidyavihar	
		sent myself for the ensuing exam					_	
		nade in this application are true, on the books prescrib				,,,,,,,	Date:	
requ	est for any special cond	cession such as change in time o	or day fixed for universit	ty Examination etc. on r	religious or	any		
		that in the event of any information	on being found false or	incorrect, my candidati	ure is liable	to be		
canc	elled or rejected.						Student's Signature	
Decl	aration by Principal/HO	D/Chairperson						
resp	onsibility of fulfillment/re	nized by the College staff and by ectification of the information. He						
cour	se/term work (if any) ac	ccording to university rules.						
Plac	e:							
Dot-								
Date			College Staff Signature			Seal and Signature of		
			Conege Stan Oighatare				pal/HOD/Chairperson	



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	PRN:	Eligibility Status:	Examination forr 110021	n No.:	Division/Section:	Roll No	.:	5		
	2018016400937282	Eligible		III				Frence		
nstrı	uction Medium:	•			Nationality:	India				
			Student's Pers	onal Informati	on					
Stud	ent's Name: RAORA	NE PURVA VISHWAS			Mother's Name: SA	YALI	(	Gender: Female		
Nam	e in Vernacular Langua	ıge:रावराणे पूर्वा विश्वास								
٩ddr	ess: E59 NANDADEEF	CHS DEONAR MUNICIPAL (	OLONY GOVANDI 43							
City:	MUMBAI, Taluka: Mun	nbai, District: Mumbai City, State	e: Maharashtra, PIN: 40	00043						
Tele	ohone no.:	Mob	ile no: 918898811186		Emai	l : raoranepur	va695@	gmail.com		
DOB	: Sep 27, 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	33506 (Status: Pass)		
Exan	n form appearance type	e: 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	unting	Th-UA	A[]				
2	83007	Financial Accounting and Audit	ing X - Cost Accounting	)		Th-UA	A[]			
3	83013	Business Economics VI				Th-UA	Th-UA[]			
4	83014	Commerce VI	Th-UA []							
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA	A[]			
6 83029 Elements of Operational Research 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:	Amount Received:	Col	llege Receipt I	No. and Date:					
DD N		MICR No:	100.	DD Date:	to. and Bato.	Bank	<u> </u>			
	er Preference (Code/N			22 2410.			•			
	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·								
Го, С	Director, Board of Exam	ination and Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar		
		ent myself for the ensuing exan					l_	.,.		
		ade in this application are true, bus and the list of books prescr					Date:			
		cession such as change in time								
		that in the event of any informati	on being found false or	incorrect, my	candidature is liable	to be				
canc	elled or rejected.						Sti	udent's Signature		
Deck	aration by Principal/HO	D/Chairperson								
		nized by the College staff and by								
	ponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical rse/term work (if any) according to university rules.									
- COUIT	Softerni Work (ii driy) de	eorang to aniversity raics.								
Place	e:									
			_							
Date	<u>.</u>									
College Staff Signature So								nature of		
			C C			Principal/HOD/Chairperson				



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	PRN: Eligibility Status:			Examination for 110022		Division/Section:	Roll No	0.:	Dode	
:	2018016400937297		Eligible						29	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: APAKE	E MANSI SUR	₹ESH			Mother's Name: N	ITA	(	Gender: Female	
Nam	e in Vernacular Langua	age:आपके म	ानसी सुरेश						1	
	ess: mahatma jotiba pl									
<u> </u>	MUMBAI, Taluka: Kurl	la, District: Μι								
	phone no.:			oile no: 91987023350		-	il : mapake32	21@gmai	l.com	
	: May 03, 2001		tegory: Open		<del></del>	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283145 (St										
	Apper 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 - Co	Ilege Assess	ment)		
SN	Paper Code	<u> </u>		Paper Nam					AM - AT	
1	83001		<u>~</u>	ting IX - Financial Acc	<u>-</u>		Th-U	.,		
2	83007	+		ting X - Cost Accounti	ing			JA []		
3	83013	Business Eco				Th-UA []				
4	83014	Commerce V	***					JA []		
5	83015	+	ndirect Taxation Pa					CA []		
								JA [ ] ;Th-		
	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 I	No. and Date:				
DD N	lo:		MICR No:	·	DD Date:		Ban	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 are that all statement m							Date:	-	
have	gone through the sylla	abus and the li	list of books prescr	ibed for the examinat	tion for which I a	m appearing. I shall	not	├		
	est for any special cond r ground. I understand									
canc	elled or rejected.	ulatin alo a l	on any money	on boning realizations	01 1110011 001, 111,	ouridiadia. 5 io ii.e	, 10 50			
- al	:							<b>ડા</b>	tudent's Signature	
	aration by Principal/HC	-		Ti - i-fatio	راء مطف ما الحديث ال	the the	· · · · · · · · · · · · · · · · · · ·	ممامد	to the standards	
respo	form is carefully scruting onsibility of fulfillment/r	rectification of	f the information. H							
	se/term work (if any) a					,		-		
Place	<b>)</b> :									
				-						
Date	:			O.H.	O: #O:		01			
				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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	PRN:	Eligibility Status:	Examination for 110023	m No.:	Division/Section:	Roll No.	Suraj		
	2018016400937301	Eligible					Qu = 5		
Instr	uction Medium:		•	١	lationality:	India	·		
			Student's Pers	sonal Information	n				
Stud	ent's Name: PATEL	SURAJ MAHESH			Mother's Name: LA	XMI	Gender: Male		
Nam	e in Vernacular Langua	ge:पटेल सुरज महेश							
Addr	ess: ROOM.NO 8CHA\	VL NO. 3 SHIVKRUPA CO-C	P SOCIETY BEHIND C	HITRANJAN D (	COLONY PIPE LIN	E RAJAWADI			
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban	State: Maharashtra, PIN	N: 400077					
Tele	ohone no.:	M	obile no: 919619647417	no: 919619647417					
DOB	: Sep 30, 2000	Category: Open		Physically Handicap: No					
Prev	ious Latest Examinatior	n Details: Sem III(Regular-Re	v16)	Exam Event:	Nov-2019	Seat	No: 7283477 (Status: Pass)		
Exar	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Paper details which	you want to appear ( UA	A - University As	sessment,CA - Col	lege Assessm	nent)		
SN	Paper Code		Paper Name	•			AM - AT		
1	83001	Financial Accounting and Au	diting IX - Financial Acco	unting		Th-UA	<b>\</b> []		
2	83007	Financial Accounting and Au	diting X - Cost Accountin	g		Th-UA	A[]	_	
3	83013	Business Economics VI				Th-UA	Th-UA[]		
4	83014	Commerce VI				Th-UA	A[]		
5	83015	Direct and Indirect Taxation	Paper II			Th-CA	A[]		
6	83029	Elements of Operational Res	earch Paper II			Th-CA	A[]		
Conv	ocation Fee	Exam Form La	e Fee	Exam Form S	uper Late Fee	Exan	nination Fees		
Mark	Statement Fee	Total:							
								_	
		mount Received:	Co	llege Receipt N	o. and Date:			_	
DD N		MICR No:		DD Date:		Bank		_	
	er Preference (Code/Na							_	
	ie Preference (Code/Na	<u> </u>						_	
		ination and Evaluations / The					Place: <b>Vidyavihar</b>		
decla	are that all statement ma	ent myself for the ensuing ex ade in this application are tru bus and the list of books pres	e, complete and correct t	to the best of my	knowledge and be	lief. I	Date:		
		ession such as change in time						٦	
		hat in the event of any inform	ation being found false o	r incorrect, my o	candidature is liable	to be			
canc	elled or rejected.						Student's Signature		
Decl	aration by Principal/HO	D/Chairperson						_	
resp	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical ourse/term work (if any) according to university rules.								
Place	e:								
Date	:		College S	taff Signature			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:	Eligibility Status:	110024	I INO	Division/Section:	Roll No	.:	Thodekan		
	2018016400937316	Eligible								
Instr	uction Medium:				Nationality:	India	•			
			Student's Perso	nal Information	on					
Stud	ent's Name: GHODI	EKAR POOJA RAMESH			Mother's Name: J	YOTI	Ge	ender: Female		
Nam	e in Vernacular Langua	ıge:घोडेकर पूजा रमेश								
Addr	ess: sai baba mandir a	amar jyot shankar gruh nirman sa	ansth azad nagar							
City:	mumbai, Taluka: Kurla	, District: Mumbai Suburban, Sta	ate: Maharashtra, PIN: 4	400086						
Tele	ohone no.:	Mobi	le no: 917039384205					poojaghodekar19@gmail.com		
DOB	: Oct 19, 2000	Category: Reserved (C	OBC)	C) Physically Handicap: No						
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev16	6)	Exam Event	: Nov-2019	Seat	: No: 7283	252 (Status: ATKT)		
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Paper details which yo	ou want to appear ( UA	- University A	ssessment,CA - Co	ollege Assessn	nent)			
SN	Paper Code		Paper Name					AM - AT		
1	83001	Financial Accounting and Auditi	ng IX - Financial Accou	nting		Th-U	۹[]			
2	83007	Financial Accounting and Audition	ng X - Cost Accounting			Th-U/	۹[]			
3	83013	Business Economics VI			Th-UA [					
4	83014	Commerce VI				Th-U/	۹[]			
5	83015	Direct and Indirect Taxation Pap	er II			Th-C/	۹[]			
6	83023	Investment Analysis and Portfol	io Management Paper I	II		Th-C/	۹[]			
Conv	ocation Fee	Exam Form Late F	ee	Exam Form S	Super Late Fee	Exar	mination F	ees		
Mark	Statement Fee	Total:								
Dove	nont Detailer	Amount Doggived	Call	aga Dagaint N	le and Date:					
DD N		Amount Received:		ege Receipt N	io. and Date:	Donle				
	er Preference (Code/N	MICR No:		DD Date:		Bank	•			
	ue Preference (Code/Na	,	entroller Of Everninetic				I			
		nination and Evaluations / The Co sent myself for the ensuing exam			d foo for the same	Lhoroby	Place:	Vidyavihar		
decla	are that all statement m	ade in this application are true, o	complete and correct to	the best of m	y knowledge and b	elief. I	Date:			
		bus and the list of books prescribession such as change in time of								
othe	ground. I understand t	that in the event of any information								
canc	elled or rejected.						Stud	lent's Signature		
Decl	aration by Principal/HO	D/Chairperson								
resp	onsibility of fulfillment/re	nized by the College staff and by ectification of the information. He cording to university rules.								
Place	e:									
_			]							
Date	:		College Sta	aff Signature		Spale	and Signa	ture of		
			Principal/HOD/Chairperson							



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	PRN:	Eligi	ibility Status:	Examination fo 110025	5	Division/Section:	Roll No	).:	Quehita	
	2018016400937324		Eligible				l		- Suc	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: BHALE	EKAR SUCHIT	TA SANJAY			Mother's Name: SA	ANJIVANI		Gender: Female	
	e in Vernacular Langua		<u> </u>							
	ess: 604 narayan tarun	<u> </u>								
<u> </u>	mumbai, Taluka: Kurla	a, District: Mur								
	phone no.:			oile no: 918879316795			il : SUCHITAB	3200@G	MAIL.COM	
	: Mar 10, 2000		tegory: Reserved (		<del></del>	Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83167 (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			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 Accountir	ng		Th-UA			
3	83013	Business Eco					Th-U			
4	83014	Commerce V					Th-UA			
5	83015	+	ndirect Taxation Pa	•			Th-CA			
6	83023	Investment A	_	olio Management Pape			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	eived:	C	College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	<u></u>		
	er Preference (Code/N									
	ue Preference (Code/Na							-		
	Director, Board of Exam		Evaluations / The C	Controller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres							L	*\a_ <b>,</b> a · · · · a ·	
	are that all statement mage gone through the sylla							Date:		
reque	est for any special cond	cession such	as change in time	or day fixed for univer-	rsity Examinatio	on etc. on religious or	r any			
other	r ground. I understand t									
cance	elled or rejected.							St	tudent's Signature	
Deck	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 surse/term work (if any) according to university rules.									
—							<u> </u>			
Place	<b>э</b> :						İ			
—				_			I			
Date:	:				- "0"		ı			
				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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Student's Personal Information  Student's Name: BHANUSHALI RAJ DEEPAK Mother's Name: BHAVNA Ge Name in Vernacular Language:आनुशाली राज दीपक  Address: Room no.8, govind smruti buid, sakharam complex,kopar cross road,dombivli(west)  City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202  Felephone no.: Mobile no: 919619661011 Email: rajbhanushali067@gr  DOB: Oct 27, 2000 Category: Open Physically Handicap: No  Previous Latest Examination Details: Sem I(Regular-Rev16) Exam Event: Nov-2019 Seat No: 70146  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  1 83001 Financial Accounting and Auditing IX - Financial Accounting  3 83013 Business Economics VI Th-UA []	and willer							
Student's Personal Information Student's Name: BHANUSHALI RAJ DEEPAK Name in Vernacular Language:भानुशाली राज दीपक Address: Room no.8, govind smruti buid, sakharam complex,kopar cross road,dombivli(west) City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202 Telephone no.: Mobile no: 919619661011 Email: rajbhanushali067@gr DOB: Oct 27, 2000 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem I(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7014 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 1 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA[] 3 83013 Business Economics VI Th-UA[]	Monder							
BHANUSHALI RAJ DEEPAK Name in Vernacular Language:भानुशाली राज दीपक Address: Room no.8, govind smruti buid, sakharam complex,kopar cross road,dombivli(west) City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202 Telephone no.: DOB: Oct 27, 2000 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem I(Regular-Rev16) 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 1 83001 Financial Accounting and Auditing IX - Financial Accounting Th-UA[] 3 83013 Business Economics VI  Mother's Name: BHAVNA  Ge  Mother's Name: BHAVNA  Financial Acrounting types  Fall Value  Financial Accounting and Auditing IX - Financial Accounting Th-UA[]  Th-UA[]								
Name in Vernacular Language:भानुशाली राज दीपक Address: Room no.8, govind smruti buid, sakharam complex,kopar cross road,dombivli(west) City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202 Telephone no.:   Mobile no: 919619661011   Email: rajbhanushali067@gr DOB: Oct 27, 2000   Category: Open   Physically Handicap: No Previous Latest Examination Details: Sem I(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7014 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   1 83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA [] 2 83007   Financial Accounting and Auditing X - Cost Accounting   Th-UA [] 3 83013   Business Economics VI   Th-UA []								
Address: Room no.8, govind smruti buid, sakharam complex,kopar cross road,dombivli(west)  City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202  Telephone no.:  Mobile no: 919619661011  Email : rajbhanushali067@gr  ODB: Oct 27, 2000  Category: Open  Physically Handicap: No  Previous Latest Examination Details: Sem I(Regular-Rev16)  Exam Event: Nov-2019  Seat No: 7014  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  1 83001  Financial Accounting and Auditing IX - Financial Accounting  Th-UA []  2 83007  Financial Accounting and Auditing X - Cost Accounting  Th-UA []  3 83013  Business Economics VI	ender: Male							
City: dombivli, Taluka: Kalyan, District: Thane, State: Maharashtra, PIN: 421202  Telephone no.:    Mobile no: 919619661011   Email: rajbhanushali067@gr   Common								
Mobile no: 919619661011   Email: rajbhanushali067@gr   COB: Oct 27, 2000   Category: Open   Physically Handicap: No   Previous Latest Examination Details: Sem I(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 70146   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   Th-UA []   1   83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []   2   83007   Financial Accounting and Auditing X - Cost Accounting   Th-UA []   3   83013   Business Economics VI   Th-UA []								
Category: Open Physically Handicap: No Previous Latest Examination Details: Sem I(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7014 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  1 83001 Financial Accounting and Auditing IX - Financial Accounting  Th-UA []  2 83007 Financial Accounting and Auditing X - Cost Accounting  Th-UA []  3 83013 Business Economics VI								
Previous Latest Examination Details: Sem I(Regular-Rev16)  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  1 83001 Financial Accounting and Auditing IX - Financial Accounting  Th-UA []  2 83007 Financial Accounting and Auditing X - Cost Accounting  Th-UA []  3 83013 Business Economics VI	gmail.com							
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  1 83001 Financial Accounting and Auditing IX - Financial Accounting  Th-UA []  2 83007 Financial Accounting and Auditing X - Cost Accounting  Th-UA []  3 83013 Business Economics VI								
Paper Details:     Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )       SN     Paper Code     Paper Name       1     83001     Financial Accounting and Auditing IX - Financial Accounting     Th-UA []       2     83007     Financial Accounting and Auditing X - Cost Accounting     Th-UA []       3     83013     Business Economics VI     Th-UA []	4644 (Status: ATKT)							
SN     Paper Code     Paper Name       1     83001     Financial Accounting and Auditing IX - Financial Accounting     Th-UA []       2     83007     Financial Accounting and Auditing X - Cost Accounting     Th-UA []       3     83013     Business Economics VI     Th-UA []								
1 83001 Financial Accounting and Auditing IX - Financial Accounting 2 83007 Financial Accounting and Auditing X - Cost Accounting 3 83013 Business Economics VI Th-UA []								
2 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA [] 3 83013 Business Economics VI Th-UA []	AM - AT							
3 83013 Business Economics VI Th-UA []								
4 00044 0 10 10								
4 83014 Commerce VI Th-UA []								
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 Super Late Fee Examination Fe	Fees							
Mark Statement Fee Total:								
December 1 Description   Assessment Description   College Descript No. and Description								
Payment Details: Amount Received: College Receipt No. and Date:  DD No: MICR No: DD Date: Bank:								
Center Preference (Code/Name):								
Venue Preference (Code/Name):								
	Vidyavihar							
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. Stud	dent'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 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:								
	Seal and Signature of Principal/HOD/Chairperson							



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	PRN: Eligibility Status:		bility Status:	Examination 11002		Division/Section:	Roll No	).:	Jinal	
	2018016400937347		Eligible							
Instr	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: PATEL	. JINAL MAHE	ESH			Mother's Name: JA	YSHREE	(	Gender: Female	
Nam	e in Vernacular Langua	age:JINAL								
Addr	ess: NEAR SAIBABA N	JANDIR, 574	12,GOPAL CHAW	L, RIFLE RANGE.						
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	state: Maharashtra, I	PIN: 400086					
Tele	phone no.:		Mot	oile no: 9170396059	40	Emai	l : patelsumit9	9702566	410@gmail.com	
DOB	3: Jan 09, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Ser	n III(Regular-Rev1	·6)	Exam Even	t: Nov-2019	Seat	t No: 728	33720 (Status: Pass)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	lege Assessn	nent)		
SN	Paper Code			Paper Na	me				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 Accoun	iting		Th-U	A [ ]		
3	83013	Business Eco	onomics VI				Th-U	A [ ]		
4	83014	Commerce V	<b>1</b>				Th-U	Th-UA [ ]		
5	83015	Direct and Inc	direct Taxation Pa	per II			Th-C	A [ ]		
6	83016	Export Marke	eting Paper II				Th-C	A [ ]		
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Exam Form Super Late Fee Exam Form Super Late Fee							Exar	mination	Fees	
Mark	Statement Fee		Total:							
		Amount Recei	1		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	Ε.		
	ter Preference (Code/Na									
	ue Preference (Code/Na	<u> </u>								
	Director, Board of Exam							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 corre	ct to the best of m	ny knowledge and be	elief. I	Date:		
requ	est for any special cond	cession such a	as change in time	or day fixed for univ	ersity Examinatio	n etc. on religious or	any			
	r ground. I understand t	that in the eve	ent of any informat	ion being found false	e or incorrect, my	candidature is liable	to be			
cancelled or rejected. Student's Sig							udent's Signature			
Decl	aration by Principal/HO	D/Chairperso	n							
resp	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the 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 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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Seal and Signature of Principal/HOD/Chairperson



	PRN: Eligibility Status:			Examination form No.: 110028		Division/Section: Roll N		Roll No.:		Haibhal
2	2018016400937355		Eligible							Har
Instru	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stude	ent's Name: DUDAK	IYA VAIBHA	V ATUL			Mother's Nan	ne: REKHA		Ge	ender: Male
Name	e in Vernacular Langua	ge:दुडकीया वै	भव अतुल							
Addre	ess: 14A, Havabai Cha	wl, Subhash	nagar, Asalpha G	hatkopar(W),Mumbai-4	00084					
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN:	400084					
	phone no.:			ile no: 919322743907			Email : duda	kiyavaib	hav@gr	mail.com
	: Apr 08, 2000		tegory: Open		<del>, ' ' ' ' ' '</del>	Handicap: No				
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019		Seat N	lo: 7283	236 (Status: ATKT)
	n form appearance type									
		se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA	College As	sessme	nt )	
SN	Paper Code	F		Paper Name					.,	AM - AT
1					ng IX - Financial Accounting					
2		Financiai Aci Business Ec		ing X - Cost Accounting				Th-UA [		
3		Commerce \						Th-UA [		
5			· ·	nor II				Th-CA [	•	
'								Th-CA		
-	rocation Fee	investment /	Exam Form Late	<u> </u>		Super Late Fee	2	_	nation F	
	Statement Fee		Total:		Examinating cupor Euro 1 co			LXum	ilation i	
			1.0.0							
Payn	nent Details: A	mount Rece	ived:	Col	lege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:			Bank:		
Cente	er Preference (Code/Na	ame):								
	e Preference (Code/Na	<u> </u>								
				controller Of Examinatio					lace:	Vidyavihar
decla	re that all statement ma	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examination	the best of n	ny knowledge a	ınd belief. I		ate:	
reque other	est for any special conc	ession such	as change in time	or day fixed for universi on being found false or	ty Examination	on etc. on religio	ous or any			
caric	Student's Signature									
Decla	aration by Principal/HO	D/Chairperso	on							
respo	form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the onsibility 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 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:	Examination for 110029		Division/Section:	Roll No	.:	Yours -	
2	018016400937363		Eligible						Your	
Instru	ction Medium:					Nationality:	India			
				Student's Pers	sonal Informati	on				
Stude	nt's Name: <b>GADH</b>	AVI VARSHA	BEN KANJI			Mother's Name: LA	AXMI	(	Gender: Female	
Name	in Vernacular Langua	ige:गाढवी वर्ष	बिन कांजी							
Addre	ess: 1/601,sahamishra	society P.K.I	Road,Mulund(W) N	1umbai 400080						
		, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN	400080					
Telep	hone no.:		Mot	ile no: 919867797526		Ema	l : vershagadh	navi@gr	nail.com	
DOB:	Oct 16, 2000	Ca	tegory: Open		Physically	Handicap: No				
Previo	ous Latest Examination	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83241 (Status: Pass)	
Exam	form appearance type	e: Fresher								
Paper	r <b>Details:</b> Plea	ise 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	ng IX - Financial Accounting Th					
2	83007	Financial Ac	counting and Audit	ing X - Cost Accountin	g		Th-U	٩[]		
3	83013	Business Ec					Th-U			
4 83014 Commerce VI								Th-UA[]		
5			direct Taxation Pa	per II			Th-CA			
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:							
Pavm	ent Details:	Amount Rece	ived:	Cc	llege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	<u> </u>		
	er Preference (Code/N	ame):	1							
	e Preference (Code/Na									
	`	•	Evaluations / The C	controller Of Examination	on,			Place:	Vidyavihar	
				nination. I have remitte		ed fee for the same.	I hereby	1 1466.	Viayaviilai	
				complete and correct t				Date:		
				ibed for the examination or day fixed for univers						
other	ground. I understand t			on being found false o						
cance	elled or rejected.							St	udent's Signature	
Decla	eclaration by Principal/HOD/Chairperson									
This f 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										
iace	· 									
Data:										
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:	Eligi	ibility Status:	Examination for 110030	)	Division/Section:	Roll No	<b>)</b> .:	Charles.	
	2018016400937371		Eligible				<u> </u>	_!	UDX.	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: PATEL	L SHUBH MAN	NISH			Mother's Name: DI	HARMISHTH	Α (	Gender: Male	
	e in Vernacular Langua	- 3								
	ess: 302, KASTURI PA					MARG, GHATKOP	AR WEST			
<u> </u>	MUMBAI, Taluka: Kurl	la, District: Μι								
	phone no.:			oile no: 919619641648			il : shubhppate	el13@gr	mail.com	
	3: Jun 23, 2000		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Sea	t No: 728	83476 (Status: Pass)	
	xam form appearance type: Fresher  aper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )									
	ı	ase select Par	per details which y			ssessment,CA - Co	Ilege Assessn	nent)		
SN	Paper Code	<del>                                     </del>		Paper Name				AM - AT		
1				ting IX - Financial Acco			Th-U/	.,		
2				ting X - Cost Accountir	ng		Th-U/			
3	83013	Business Eco					Th-U/			
4		Commerce V		<u></u>			Th-U/			
5			ndirect Taxation Pa	per II			Th-C/			
6 83016 Export Marketing Paper II Th-CA []									_	
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Payn	ment Details:	Amount Recei	ived:	С	College Receipt I	No. and Date:				
DD N	No:		MICR No:		DD Date:		Bank	κ:		
Cent	ter Preference (Code/N	lame):					•			
Venu	ue Preference (Code/Na	ame):								
To, C	Director, Board of Exam	nination and E	Evaluations / The C	Controller 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:		
	e gone through the sylla est for any special cond							$\vdash$		
other	r ground. I understand t									
canc	celled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	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 purse/term work (if any) according to university rules.									
Place	a:									
Date	:			College (	Staff Signature			and Sign	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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	•			Eversination	Evamination form No.					
	PRN:	Eligi	ibility Status:	Examination 1 11003	31	Division/Section:	Roll No	0.:	Pranks.B.	
:	2018016400937386		Eligible				l		Cran	
nstrı	uction Medium:					Nationality:	India			
				Student's P	Personal Informati	on				
Stude	ent's Name: BORK	AR PRATIK S	AYAJIRAO			Mother's Name: VI	JAYA		Gender: Male	
Nam	e in Vernacular Langua	age:PRATIK §	SAYAJIRAO BORŁ	(AR						
Addr	ess: K-11-8 BARVENA	AGAR BHATV	VADI GHATKOPAF	R WEST R B KADA	M MARG					
City:	MUMBAI, Taluka: Kurl	la, District: Mu	umbai Suburban, S	tate: Maharashtra, I	PIN: 400084					
Teler	ohone no.: 25126865		Moh	oile no: 9199672782	34	Emai	il : asmitaborl	kar@gma	ail.com	
DOB	: Mar 01, 2001	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	on Details: Ser	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Sea	at No: 728	83187 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear (	UA - University A	Assessment,CA - Col	llege Assess	ment)		
SN	Paper Code			Paper Nar	me				AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Ac	counting		Th-L	JA [ ]		
2	83007	Financial Acr	counting and Audit	ting X - Cost Accoun	ıting		Th-L	JA [ ]		
3	83013	Business Eco	onomics VI				Th-L	JA [ ]		
4 83014 Commerce VI TI										
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	Exa	amination	Fees	
Mark	Statement Fee		Total:							
		Amount Recei	1		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Ban	/k:		
	er Preference (Code/N									
	ie Preference (Code/N									
	Director, Board of Exam							Place:	Vidyavihar	
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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			
	ground. I understand telled or rejected.	that in the eve	ent of any informati	on being found false	e or incorrect, my	candidature is liable	e to be			
Cano	alled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HC	OD/Chairperso	on							
respo	is form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical urse/term work (if any) according to university rules.									
Place	ace:									
Date				College	e Staff Signature			I and Sign	nature of	



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Examination form No.:

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	PRN:	Eligi	ibility Status:	Examination form No.: 110032		Division/Section:	Roll No	.:	Doglish
:	2018016400937394		Eligible			2	164		3
Instru	uction Medium:					Nationality:	India		
				Student's Pers	sonal Informati	on			
Stud	ent's Name: PRAJA	APAT JAGDIS	SH CHHOGALAL			Mother's Name: B	ASANTI DEVI	C	Gender: Male
Nam	e in Vernacular Langua	age:प्रजापत ज	गदीश छोगालाल						
	ess: SHOP NO.77, M.0					089 CHEMBUR			
City:	MUMBAI, Taluka: Kurl	la, District: Μι	ımbai Suburban, S	tate: Maharashtra, PIN	N: 400089				
Telep	ohone no.:		Mob	ile no: 919892972691					
	: Sep 15, 2000		tegory: Open	_	Physically Handicap: No				
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33490 (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 Acco	ounting		Th-U	A [ ]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountin	ıg		Th-U	A [ ]	
3	83013	Business Eco	onomics VI				Th-U	JA [ ]	
4	83014	Commerce V	/1				Th-U	A [ ]	
5	83015	Direct and In	direct Taxation Pa	per II			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:						
Davra	nent Details:	Amount Recei	ivod:		ollege Receipt	No. and Date:			
DD N		Amount Nece	MICR No:		DD Date:	No. and Date.	Bank		
	er Preference (Code/N	lama):	IVIICITIVO.		DD Date.		Dank		
	ie Preference (Code/N								
	Director, Board of Exam			ontroller Of Everningti	ion			I <sub>D</sub> ,	\a
	uest permission to pres					ad foo for the come	l horoby	Place:	Vidyavihar
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 n	ny knowledge and be	elief. I	Date:	
	est for any special cond								
	ground. I understand	that in the eve	ent of any informati	on being found false o	or incorrect, my	candidature is liable	e to be		
canc	elled or rejected.							Stu	udent's Signature
Decla	aration by Principal/HC	DD/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 surse/term work (if any) according to university rules.								
Place	<del>j</del> .								
Date									
Date				College Staff Signature			Seal and Signature of		
							Principal/HOD/Chairperson		



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Examination form No.:

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	PRN:	Eligi	bility Status:	Examination form 110033	ı No.:	Division/Section:	Roll N	o.:	or the company of the way of		
	2018016400937405		Eligible						RJCHHEDA_		
nstr	uction Medium:	•				Nationality:	India		•		
				Student's Perso	nal Informati	ion					
Stud	ent's Name: CHHE	DA RAJ JAYE	SH			Mother's Name:	KALPANA		Gender: Male		
Nam	e in Vernacular Langua	age:KUTCHI									
Addr	ess: 802, TOWER 2, V	IKAS PARAD	DISE LBS MARG, N	MULUND (W)							
City:	MUMBAI, Taluka: Mun	nbai, District:	Mumbai City, State	e: Maharashtra, PIN: 40	0800						
Tele	ohone no.:		Mob	ile no: 919987616362		Em	ail : chhedakiı	njal95@g	ımail.com		
DOB	: Nov 23, 2000	Cat	tegory: Open		Physically	Handicap: No					
⊃rev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Se	at No: 72	290665 (Status: ATKT)		
Exar	kam 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 Name					AM - AT		
1 83001 Financial Accounting and Audit				ing IX - Financial Accou	nting		Th-l	JA [ ]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-l	JA [ ]			
3	83013	Business Ec	onomics VI				Th-l	JA []			
4 83014 Commerce VI							Th-l	Th-UA[]			
5 83015 Direct and Indirect Taxation Paper II							Th-0	CA []			
6	83023	Investment A	Analysis and Portfo	lio Management Paper I	I		Th-0	CA []			
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	aminatio	n Fees		
Mark	Statement Fee		Total:								
		Amount Rece	T			No. and Date:					
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	er Preference (Code/N										
	ie Preference (Code/Na										
				controller Of Examination				Place:	Vidyavihar		
req	uest permission to pres	sent myself fo	or the ensuing exan	nination. I have remitted complete and correct to	the prescribe	ed fee for the same	e. I hereby	Date:			
				ibed for the examination							
				or day fixed for universit							
	elled or rejected.	that in the eve	ent of any informati	on being found false or	incorrect, my	/ candidature is ilat	DIE TO DE				
	<b>,</b>							S	tudent's Signature		
Decl	aration by Principal/HO	D/Chairperso	on								
				me. The information pr							
	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.										
				T							
Place	ə:										
				_							
Date	<u>.</u>										
				College Sta	aff Signature		Seal and Signature of				
				_			Prin	cipal/HO	Principal/HOD/Chairperson		



Date:

## University of Mumbai, Mumbai

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

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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Elig	ibility Status:	Examination form 110034	No.:	Division/Section:	Roll No	).:	Thereto		
:	2018016400937421		Eligible						Thurston		
nstru	uction Medium:	•				Nationality:	India				
				Student's Perso	nal Informati	on					
Stude	ent's Name: VARM/	A SHWETA F	RAKESH			Mother's Name: M/	ANJU		Gender: Female		
Nam	e in Vernacular Langua	age:वर्मा १वेता	। राकेश								
Addr	ess: NEAR DATT MAN	IDIR ROOM	NO.145 SANKALP	SOC, ANAND GAD PAR	RKSITE, VIK	HROLI WEST					
	<u> </u>	a, District: M	umbai Suburban, S	State: Maharashtra, PIN:	400079						
Telep	phone no.:	,	Mob	pile no: 918108091669		Emai	l : varmashwe	eta000@	gmail.com		
DOB	: Jan 01, 2000	Ca	tegory: Open		Physically	Handicap: No	T				
Previ	ous Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33649 (Status: ATKT)		
	n form appearance type										
	per 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			ing IX - Financial Accour	nting		Th-U				
2	83007			ing X - Cost Accounting			Th-U	Th-UA[]			
3	83013										
4	83014	Commerce \					Th-U				
							Th-C				
6	83016	Export Mark	eting Paper II	1			Th-C				
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees		
Mark	Statement Fee		Total:								
Payn	nent Details:	Amount Rece	eived:	Colle	ege Receipt	No. and Date:					
DD N			MICR No:	,	DD Date:		Bank	c:			
Cent	er Preference (Code/N	ame):					'				
√enu	e Preference (Code/Na	ame):									
Γο, C	Director, Board of Exam	nination and E	Evaluations / The C	Controller Of Examination	١,			Place:	Vidyavihar		
				nination. I have remitted complete and correct to				Date:			
				ibed for the examination				<u> </u>			
				or day fixed for university ion being found false or i							
	ancelled or rejected. Student's Signature										
Deck	aration by Principal/HO	)D/Chairners							adont o dignature		
This respo	is form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical urse/term work (if any) according to university rules.										
Place:											
				1		I					

College Staff Signature



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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:	Eligil	bility Status:	Examination for 110035		Division/Section:	Roll No	.:	tiloso		
	2018016400937436		Eligible						Polist		
Instr	uction Medium:					Nationality:	India				
				Student's Pe	rsonal Informati	on					
Stud	ent's Name: <b>JETHV</b>	A ROHIT MA	NSUKH			Mother's Name: N	EERUBEN	(	Gender: Male		
Nam	e in Vernacular Langua	ge:जेठवा रोहि	त मनसुख								
Addr	ess: Dharavi transist ca	mp Block no	3 room no 5 row h	Sion Mumbai 40001	7						
City:	Mumbai, Taluka: Muml	oai, District: N	/lumbai City, State	: Maharashtra, PIN: 4	100017						
Tele	ohone no.:		Mob	ile no: 91771899500	4	Ema	il : rohitjethva2	2001@g	mail.com		
DOB	: Feb 13, 2001	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: 728	33300 (Status: ATKT)		
Exar	n 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	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 Accounti	ng		Th-UA	۹[]			
3	83013	onomics VI		Th-UA[]							
								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[]			
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:	lc	College Receipt	No. and Date:					
DD N			MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/Na	ame):					<u> </u>				
	ie Preference (Code/Na										
To, [	Director, Board of Exam	ination and E	valuations / The C	Controller Of Examina	tion,			Place:	Vidyavihar		
	uest permission to pres							D-4			
	are that all statement magene through the sylla							Date:			
requ	est for any special cond	ession such	as change in time	or day fixed for unive	rsity 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	ion being found false	or incorrect, my	candidature is liable	e to be				
Caric	elled of rejected.							St	udent's Signature		
Decl	aration by Principal/HO	D/Chairperso	n								
	form is carefully scrutinonsibility of fulfillment/re										
	se/term work (if any) ac			erane ia regulai stude	zur oi mis colle(	ge and has complete	a ine required	a au <del>c</del> nida	ance and practical		
	,	-	-	<u> </u>							
Place	<b>e</b> :										
				_							
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 for 110036		Division/Section:	Roll No	).:	Jakar .	
:	2018016400937444		Eligible							
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: SHETK	(AR SNEHAL	. SHASHIKANT			Mother's Name: SI	HRADHA	(	Gender: Female	
Nam	e in Vernacular Langua	age:शेतकरी स्त	नेहल शशिकांत							
Addr	ess: ROOM NO-5, SUI	DARSHAN SO	OC, PRABHAT NA	AGAR, KAJUPADA Ł	KURLA WEST					
<u> </u>	MUMBAI, Taluka: Kurl	la, District: Μι								
	phone no.:			oile no: 91829101364			il : hemant.ran	ık@gma	il.com	
	8: Sep 09, 2000		tegory: Open		<del></del>	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283585 (Status									83585 (Status: ATKT)	
	m form appearance type									
Pape	aper 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				ting IX - Financial Acc			Th-U/	.,		
2	83007	+	-	ting X - Cost Accounti	ing		Th-U/			
3 83013 Business Economics VI							Th-U/			
4		Commerce V					Th-U/			
5	83015	Direct and In-	direct Taxation Pa	per II			Th-C/	A[]		
6	83023	Investment A	_	lio Management Pap	er II		Th-C/	A[]		
Convocation Fee Exam Form Late Fee					Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
 Pavr	ment Details:	Amount Recei	ived:		College Receipt I	No and Date:				
DD N			MICR No:		DD Date:	10. 0 20	Bank			
	er Preference (Code/N		,					<u></u>	ı	
	ue 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	1 1000	Viayaviilai	
	are that all statement m							Date:		
	e gone through the sylla est for any special cond									
other	r ground. I understand t									
canc 	celled or 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	and Sigr	nature of	
					<b>3</b>			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:	Eligibility Status:	Examination forn 110037	n No.:	Division/Section:	Roll No	.:	Berkhole		
:	2018016400937452	Eligible						Contrate		
Instru	uction Medium:				Nationality:	India				
			Student's Perso	onal Informati	on					
Stud	ent's Name: <b>BANKH</b> I	ELE VAISHNAVI MANOJ			Mother's Name: R.	ATNA	(	Gender: Female		
Nam	e in Vernacular Languaç	ge:बाणखेले वैष्णवी मनोज								
Addr	ess: room no.9 shri gan	esh chawl committtee mithwa	la chawl bhatwadi							
City:	ghatkopar west, Taluka	: Kurla, District: Mumbai Subur	ban, State: Maharashtra	a, PIN: 40008	4					
Telep	ohone no.:	Mob	ile no: 919987992889		Ema	il : vaishnaviba	ankhele2	2000@gmail.com		
DOB	: Aug 12, 2000	Category: Open		Physically	Handicap: No					
Previ	ious Latest Examination	Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33158 (Status: ATKT)		
Exan	n 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	inancial Accounting and Audit	ing IX - Financial Accou	inting		Th-U	A[]			
2	83007 F	inancial Accounting and Audit	ing X - Cost Accounting			Th-U	A [ ]			
3	83013 E	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	83016 E	Export Marketing Paper II				Th-C/	A[]			
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:	Col	lege Receipt	No. and Date:					
DD N	lo:	MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/Na	me):								
Venu	ie Preference (Code/Na	me):								
To, C	Director, Board of Exami	nation and Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar		
		ent myself for the ensuing exan ade in this application are true,					Date:			
have	gone through the syllab	ous and the list of books prescr	ibed for the examinatior	n for which I a	m appearing. I shall	not				
		ession such as change in time nat in the event of any informati								
	elled or rejected.	ide in the event of diff informat	orr borning round raises or	moon oot, my		3 10 50				
							St	udent's Signature		
	aration by Principal/HOI	-								
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.									
DI										
Place	<del>2</del> .									
<b>.</b> .										
Date			College St	aff Signatura		Socia	and Sicr	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:	Eligibility Status:	Examination form 110038	n No.:	ivision/Section:	Roll No.	:	A STATE OF THE STA	
	2018016400937467	Eligible						E	
Instr	uction Medium:	·!	!	Na	ationality:	India			
			Student's Perso	nal Information					
Stud	ent's Name: <b>MEHTA</b>	APURVA MITESH		IV	Nother's Name: HE	TAL	G	ender: Male	
Nam	e in Vernacular Languaç	ge:Apurva		·			•		
Addr	ess: 303/b sai darshan	GARDEN LANE,GAONDVI R	OAD, Ghatkopar west, r	numbai					
City:	Mumbai, Taluka: Kurla,	District: Mumbai Suburban, S	tate: Maharashtra, PIN:	400086					
Tele	ohone no.: 25005030	Мо	bile no: 917506110141		Emai	l : apurvameht	ta200030	03@gmail.com	
DOB	: Sep 17, 2000	Category: Open		Physically Ha	andicap: No				
		Details: Sem III(Regular-Rev	16)	Exam Event: N	Nov-2019	Seat	No: 728	3400 (Status: ATKT)	
Exar	n form appearance type:								
Pape	er Details: Pleas	se select Paper details which	ou want to appear (UA	- University Ass	sessment,CA - Col	lege Assessm	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001 F	Financial Accounting and Aud	ting IX - Financial Accou	nting		Th-UA	<b>\[]</b>		
2	2 83007 Financial Accounting and Auditing X - Cost Accounting Th-UA []								
3	83013 Business Economics VI Th-UA []								
4	83014 Commerce VI Th-UA []								
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA			
6	83029 E	Elements of Operational Rese	arch Paper II			Th-CA	۱[]		
Conv	vocation Fee	Exam Form Late	Fee	Exam Form Sup	per Late Fee	Exam	nination I	Fees	
Mark	Statement Fee	Total:							
Dovr	nent Details: A	mount Received:	Call	ege Receipt No.	and Date:				
DD N		MICR No:	<u> </u>	DD Date:	o. and Date.	Bank:			
	er Preference (Code/Na			DD Date.		Dalik.	•		
	ie Preference (Code/Na								
	<u> </u>	nation and Evaluations / The	Controller Of Evamination	<u> </u>			Б.	APJ - T-	
		ent myself for the ensuing exa			fee for the same	l hereby	Place:	Vidyavihar	
decla	are that all statement ma	ade in this application are true	complete and correct to	the best of my k	knowledge and be	elief. I	Date:		
		ous and the list of books preso							
		ession such as change in time nat in the event of any informa							
	elled or rejected.	,	J				C+	idantia Cianatura	
Daal	anation by Dringing 1/1100	2/Oh airm are an					Stu	dent's Signature	
	aration by Principal/HOI	•	v ma. The information n	inted in the form	n io correct to the	hoot of my line	ladaa	Lalas undartaka tha	
		zed by the College staff and be ctification of the information.							
cour	urse/term work (if any) according to university rules.								
Place	<b>e</b> :								
Date	:			<b>"</b> O.					
			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.

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

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	PRN:	Eligi	ibility Status:	Examination fo 110039		Division/Section:	Roll No	o.:	Oldran
:	2018016400937475		Eligible						Akhan.
nstrı	uction Medium:	_				Nationality:	India		
				Student's Per	rsonal Informati	on			
Stud	ent's Name: <b>KHAN</b>	ASIYA FARE	ED AHMED			Mother's Name: N	AZRA KHATO	OON	Gender: Female
Nam	e in Vernacular Langua	age:खान आशि	ोया फरीद अहमद						
٩ddr	ess: PLOT NO 1 NEW	GAUTAM NA	AGAR NEAR SUN	NI BARELI MASJID C	GOVANDI				
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	tate: Maharashtra, Pl	IN: 400043				
Telep	ohone no.:		Mob	oile no: 918652154898	8	Ema	il : ASIYAKHA	AN@GM	AIL.COM
	: Aug 15, 2000		tegory: Open		Physically	Handicap: No			
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 728333									83338 (Status: Pass)
	n form appearance type								
	er Details: Plea	ase select Pa	per details which y	ou want to appear ( U	JA - University A	Assessment,CA - Co	llege Assessi	ment)	
SN	Paper Code			Paper Nam					AM - AT
1	83001			ing IX - Financial Acc			Th-U		
2	83007		counting and Audit	ng		Th-U			
							Th-U		
4	83014	Commerce V					Th-U		
5	83015		direct Taxation Pa	per II			Th-C		
6	83016	Export Marke	eting Paper II				Th-C		
Convocation Fee Exam Form Late Fee					Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Payn	nent Details:	Amount Recei	ived:	С	College Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Banl	<b>K</b> :	
Cent	er Preference (Code/N	lame):	<u>I</u>						
√enu	ie Preference (Code/Na	ame):							
Γο, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar
	uest permission to pres							<b>.</b> .	•
	are that all statement m gone through the sylla							Date:	
eque	est for any special cond	cession such	as change in time	or day fixed for univer	rsity Examination	on etc. on religious o	r any		
	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liabl	e to be		
Janic	siled 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.								
court	——————————————————————————————————————						T		
Place	ā.								
				_					
Date									
				College (	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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Seal and Signature of

Principal/HOD/Chairperson

'e-Suvidha' account on

Examination form No.: 110040 Eligibility Status: PRN: Division/Section: Roll No.: Betar 2018016400937483 Eligible Nationality: Instruction Medium: India Student's Personal Information Student's Name: KHAN ATASH FARHEEN ASHFAQUE AHMED Mother's Name: RIZWANA Gender: Female Name in Vernacular Language:खान आताशा फरही ASHFAQUE Address: NEW GAUTAM NAGAR PART NO 1 ROOM NO 229 GOVANDI MUMBAI City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400043 Telephone no.: Mobile no: 918850988419 Email: zaveriyakhan1998@gmail.com DOB: Jul 19, 2000 Physically Handicap: No Category: Open Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283340 (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 Business Economics VI Th-UA[] 4 83014 Th-UA[] Commerce VI 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 Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, 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:

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	bility Status:	Examination form 110041	1 No.:	Division/Section:	Roll No	).:	7) = 1	
	2018016400937491		Eligible						Disha	
nstrı	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: <b>MANGI</b>	E DISHA RAI	MESH			Mother's Name: K	ASTURIBEN	(	Gender: Female	
lam	e in Vernacular Langua	ige:मंगे दिशा	रमेश							
۸ddr	ess: a/4,ashtvinayak so	oc,kulkarni wa	adi j m road,asalfa	village ghatkopar west						
City:	mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400084					
ele	ohone no.:		1	ile no: 917666011695		Emai	I : dishamang	e123@g	mail.com	
ОВ	: Nov 09, 2000	Ca	tegory: Open		Physically	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33392 (Status: ATKT)	
	n form appearance type									
	per 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 Audi				_ <del>-</del>			Th-U			
2		Financial Ac	counting and Audit	ing X - Cost Accounting			Th-U	A [ ]		
3		Business Ec					Th-U			
4		Commerce \					Th-U	.,		
5			direct Taxation Pa	per II			Th-C			
6		Export Marke	eting Paper II				Th-C			
Convocation Fee Exam Form Late Fee				Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
/lark	Statement Fee		Total:							
Payn	nent Details:	Amount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date: Bank:			ι:		
Cent	er Preference (Code/Na	ame):					,			
/enu	ie Preference (Code/Na	ame):								
о, Г	Director, Board of Exam	ination and E	Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
lecla	are that all statement m	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 universi						
•	, ,		•	on being found false or	,	•	,			
anc	elled or rejected.							Stu	udent's Signature	
)ecl:	aration by Principal/HO	D/Chairners	on .					0.	adent o dignature	
		-		me. The information p	rinted in the fo	orm is correct to the	best of my kn	owledae	Lalso undertake the	
esp	onsibility of fulfillment/re	ectification of	the information. H	e/she is regular student						
cour	se/term work (if any) ac	cording to ur	niversity rules.							
Place	e:									
				_						
ate	•									
	•			College Sta	aff Signature		Seal and Signature of			
				11.13.11.11			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 110042	DIVISIO	n/Section:	Roll No.	.:	Gayatri		
	2018016400937517	Eligible								
nstrı	iction Medium:			Nationa	ality:	India				
			Student's Perso	nal Information						
Stud	ent's Name: CHAVA	IN GAYATRI RAMSINGH		Mothe	er's Name: Sh	HAKUNTALA	G	Gender: Female		
Nam	e in Vernacular Langua	ige:चव्हाण गायत्री रामसिंग								
٩ddr	ess: room no 4, Anand	ji kadam chawl, jamil nagar								
City:	mumbai, Taluka: Kurla	, District: Mumbai Suburban, St	ate: Maharashtra, PIN:	100078						
	hone no.:	Mob	ile no: 919967892491		Emai	I : ramsinghch	avan90(	@gmail.com		
	Jun 21, 2000	Category: Reserved (		Physically Handic						
Previous Latest Examination Details: Sem I(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7014633 (Status: Pass)										
	form appearance type	e: Fresher								
	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		Financial Accounting and Audit		nting		Th-UA				
2		Financial Accounting and Audit	ng X - Cost Accounting			Th-UA				
3 83013 Business Economics VI										
4 83014 Commerce VI Th-UA []										
5		Direct and Indirect Taxation Pa	per II			Th-CA				
6	<u> </u>	Export Marketing Paper II				Th-CA				
Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees								Fees		
Mark	Statement Fee	Total:								
ayn	nent Details:	mount Received:	Coll	ege Receipt No. and	d Date:					
DD N	lo:	MICR No:		DD Date:		Bank				
Cent	er Preference (Code/Na	ame):	-			<u> </u>				
/enu	e Preference (Code/Na	ame):								
Го, С	irector, Board of Exam	ination and Evaluations / The C	ontroller Of Examinatio	٦,			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	y Examination etc. o	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 candida	lature is liable	to be				
Janic	siled of rejected.						Stu	ıdent's Signature		
Deck	aration by Principal/HO	D/Chairperson								
This	form is carefully scrutin	nized by the College staff and by	me. The information pr	inted in the form is co	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 urse/term work (if any) according to university rules.									
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			1							
Place	<b>:</b> :				I					
lace	<b>:</b> :		_							
Place —— Date										
			_ College Sta	off Signature			and Sign	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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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility St	atus:	Examination form 110043	n No.:	Division/Section:	Roll No	ı.:	Sruskan	
	2018016400937525	Eligible	)						C MSpart	
Instru	uction Medium:	•				Nationality:	India	•		
				Student's Perso	onal Informati	on				
Stud	ent's Name: SHAIKH	I MUSKAN KAYUM				Mother's Name: N	AZRIN	G	Gender: Female	
Nam	e in Vernacular Langua	ge:शेख मुस्कान कयूम	н							
Addr	ess: ROOM NO 130 SF	A BUILDING, AZAD	NAGAR							
City:	GHATKOPAR WEST,	Γaluka: Kurla, Distric	ct: Mumbai	Suburban, State: Maha	rashtra, PIN:	400086				
Tele	phone no.:		Mob	ile no: 917045847736		Ema	il : shaikhmusl	kan0786	@gmail.com	
DOB	: Jun 23, 2001	Category:	Open		Physically	Handicap: No				
Prev	Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7290676 (Status: Pass)									
	n form appearance type	: Fresher								
Pape	er Details: Plea	se select Paper deta	ails 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	g and Audit	ing IX - Financial Accou	nting		Th-U	A[]		
2								A[]		
3 83013 Business Economics VI								A[]		
4	83014	Commerce VI					Th-U	A[]		
5	5 83015 Direct and Indirect Taxation Paper II Th-CA []									
6	83016	Export Marketing Pa	aper II				Th-C/	A[]		
Conv	ocation Fee	Exam	Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:								
		mount Received:		<u> </u>		No. and Date:	I			
DD N		MICR	No:		DD Date:		Bank	:		
	er Preference (Code/Na									
	ue Preference (Code/Na									
	Director, Board of Exami							Place:	Vidyavihar	
decla	uest permission to preso are that all statement ma gone through the syllal	ade in this applicatio	on are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
requ	est for any special conc	ession such as char	nge in time	or day fixed for universi	ty Examination	on etc. on religious o	r any			
	r ground. I understand tl elled or rejected.	nat in the event of ai	ny informat	on being found false or	incorrect, my	candidature is liable	e to be			
cario	Student's Signature									
Decl	aration by Principal/HO	D/Chairperson								
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	e:									
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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	PRN:	Eligi	bility Status:	Examination 11004		Division/Section:	Roll No	o.:	chetng
	2018016400937533		Eligible						<u>Jerg</u>
Instr	uction Medium:	•				Nationality:	India		
				Student's P	ersonal Informati	on			
Stud	ent's Name: CHAWI	DA CHETNA	NATUBHAI			Mother's Name: H	ARSHABEN	(	Gender: Female
Nam	e in Vernacular Langua	ge:चावंडा चेत	ना नदुभाई						
Addr	ess: FLAT NO 101 SHF	REE SAMAR	TH KRUPA SECT	OR 6 SARSOLE					
City:	NERUL NAVI MUMBA	l, Taluka: Tha	ane, District: Than	e, State: Maharashtı	ra, PIN: 400706				
Tele	phone no.:		Mob	ile no: 9188286621	89	Emai	I : chetnacha	wada21@	@gmail.com
DOB	: Nov 21, 2000	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83194 (Status: Pass)
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 Assessi	ment)	
SN	Paper Code			Paper Na	me				AM - AT
1				ing IX - Financial Ac			Th-U	A[]	
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-U	A[]	
								A[]	
								A[]	
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]	
6	83016	Export Marke	eting Paper II				Th-C	A[]	
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
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		mount Recei			College Receipt	No. and Date:	lp	1	
DD N		\	MICR No:		DD Date:		Banl	K:	
	er Preference (Code/Na								
	ue Preference (Code/Na							_	
	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	plication are true,	complete and corre	ct to the best of n	ny knowledge and be	elief. I	Date:	
	est for any special cond								
othe	r ground. I understand t	hat in the eve	ent of any informat	on being found false	e or incorrect, my	candidature is liable	e to be		
cand	elled or rejected.							St	udent's Signature
Decl	aration by Principal/HO	D/Chairperso	n					-	
resp	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the 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.								
Plac	e:								
Date	:								
			College	College Staff Signature			and Sigr ipal/HOD	nature of D/Chairperson	



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

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'e-Suvidha' account on



PRN: Eligibility Status:				Examination form 110045	1 No.:	Division/Section:	Roll No	.:	Till Co	
	2018016400937541		Eligible						Pollmite	
Instru	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: PALNI	TKAR REVA	TI PRAMOD			Mother's Name: Bl	HAGYASHRE	E (	Gender: Female	
Nam	e in Vernacular Langua	age:रेवती प्रमो	द पळणिटकर							
Addr	ess: Room No. 2, Char	ndralok Old M	lumbai Road, Near	TJSB Bank Tembhinak	ka, Thane					
City:	Thane, Taluka: Thane	, District: Tha	ne, State: Maharas	htra, PIN: 400601						
	ohone no.: 25427585			ile no: 918108973400	1	Emai	l : revapalnitk	ar@gma	ail.com	
	: Sep 16, 2000		tegory: Open		<del>, , , ,</del>	Handicap: No	1_			
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33444 (Status: Pass)	
	n form appearance type		1.0	(114						
_		ase select Pa	per details which y	ou want to appear ( UA	- University P	Assessment,CA - Co	llege Assessn	nent)	ANA AT	
SN	Paper Code	<b>5</b> ' ' - 1 A -		Paper Name		A []	AM - AT			
1	83001			ing IX - Financial Accou			Th-U/			
2	83007 83013	Business Ec		ing X - Cost Accounting			Th-U/			
3	83014	Commerce \					Th-U/			
5	83015		direct Taxation Pa	nor II			Th-C/			
6	83023						Th-C/			
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []  Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees										
	Statement Fee		Total:		LXaiii i Oilii	Super Late 1 ee	LXai	IIIIalion	1 663	
Mari	- Otatomont 1 00		Total.							
Payn	nent Details:	Amount Rece	ived:	Coll	lege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank:			
Cent	er Preference (Code/N	ame):								
	ie Preference (Code/N									
				ontroller Of Examinatio				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:		
				ibed for the examinatior or day fixed for universit						
othe	ground. I understand			on being found false or						
canc	elled or rejected.							St	udent's Signature	
Decl	aration by Principal/HC	D/Chairpers	on						Ü	
This	form is carefully scrutir	nized by the (	College staff and by	me. The information pre/she is regular student						
	sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical urse/term work (if any) according to university rules.									
Place	e:									
				_						
Date	:									
				College Sta	aff Signature				nature of D/Chairperson	
				1				F ~		



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Application Form for Examination of Summer Session 2021 event.

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	PRN:	Eligi	ibility Status:	Examination for 11004	l6	Division/Section:	Roll No	).:	linde
:	2018016400937556		Eligible						- Janes
nstru	uction Medium:					Nationality:	India		,
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: SHIND	DE PRANIL PF	RAKASH			Mother's Name: Pf	RAJAKATA		Gender: Male
Nam	e in Vernacular Langua	age:शिंदे प्राणि	ल प्रकाश						
Addr	ess: BAKELAL MHALA	AR CHAWL R	OOM NO 11 PRA	TAP NAGAR ROAD	BHANDUP WES	ST MUMBAI			
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	tate: Maharashtra, F	PIN: 400078				
Teler	phone no.:		Moh	oile no: 91981909251	18	Emai	il : shindepran	nil41@gn	nail.com
	: Sep 18, 1998		tegory: Open		Physically	Handicap: No			
Previ	ious Latest Examinatio	on Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83594 (Status: Pass)
Exan	n form appearance typ	e: Fresher							
Pape	per Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )								
SN	Paper Code			Paper Nan	ne				AM - AT
1	83001	Financial Acr	counting and Audit	ting IX - Financial Acc	counting		Th-U	A[]	
2	83007	Financial Acr	counting and Audit	ting X - Cost Account	ting		Th-U	A [ ]	
3	83013	Business Eco	onomics VI				Th-U	A []	
4	83014	Commerce V	/1			Th-UA[]			
5 83015 Direct and Indirect Taxation Paper II The								A[]	
6	83016	Export Marke	eting Paper II				Th-C/	A [ ]	
Convocation Fee Exam Form Late Fee Exam F						Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
	nent Details:	Amount Recei	ivod:		College Receipt I	No and Date:			
DD N			MICR No:		DD Date:	No. and Date.	Bank	<i>.</i>	
	er Preference (Code/N		IVIIOTTIVO.		DD Date.			·	
	ue Preference (Code/N								
	Director, Board of Exan			Controller Of Examina	ation			T <sub>Dlaco</sub> .	\ Calvardhar
	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 correc	ct to the best of m	ny knowledge and be	elief. I	Date:	
	gone through the syllates gone through the syllates gone est for any special con-								
other	ground. I understand								
canc	elled or rejected.		-	-				St	udent's Signature
Deck	aration by Principal/HC	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	<b>3</b> :								
Date	:			College	e Staff Signature			and Sigr	
						ļ	ı Princi	:ipai/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.

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	PRN:	Eligibility Status:	Examination form 110047	n No.: Division/	/Section:	Roll No.:	:	A.B. kadam
:	2018016400937564	Eligible		l III				
Instru	uction Medium:			Nationali	lity:	India		
		_	Student's Pers	onal Information				
Stud	ent's Name: KADAM	ASHWINI BABAJI		Mother'	's Name: MA	NISHA	C	Gender: Female
Nam	e in Vernacular Languaç	ge:कदम अश्विनी बाबाजी						
Addr	ess: siddheshwar mitra	mandal ram nagar b ghatkopa	ir west					
City:	mumbai, Taluka: Kurla,	District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400086				
Telep	phone no.:	Mot	pile no: 919967413866		Email	: asmitakd200	01@gm	ail.com
DOB	: Feb 15, 2001	Category: Open		Physically Handica	ıp: No			
Previ	ious Latest Examination	Details: Sem III(Regular-Rev1	16)	Exam Event: Nov-20	)19	Seat	No: 728	33309 (Status: ATKT)
	cam form appearance type: Fresher							
Pape	er Details: Pleas	se select Paper details which y	ou want to appear ( UA	- University Assessme	ent,CA - Colle	ege Assessm	ent)	
SN	Paper Code		Paper Name			AM - AT		
1		Financial Accounting and Audit				Th-UA	••	
2	83007 F	inancial Accounting and Audit	ing X - Cost Accounting	J		Th-UA	[]	
3		Business Economics VI				Th-UA	• •	
4	83014 C	[]						
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA	[]	
6								
Conv	ocation Fee	Exam Form Late	Fee	Exam Form Super La	ite Fee	Exam	nination	Fees
Mark	Statement Fee	Total:						
Pavn	nent Details: Ar	mount Received:	Co	llege Receipt No. and [	 Date:			
DD N		MICR No:		DD Date:		Bank:		
Cent	er Preference (Code/Na	me):						
Venu	ue Preference (Code/Na	me):						
To, C	Director, Board of Examin	nation and Evaluations / The C	controller Of Examination	n,			Place:	Vidyavihar
		ent myself for the ensuing exar					Doto:	•
		ade in this application are true, ous and the list of books prescr					Date:	
reque	est for any special conce	ession such as change in time	or day fixed for univers	ity Examination etc. on	religious or	any		
	r ground. I understand th elled or rejected.	nat in the event of any informat	ion being found false or	incorrect, my candidat	ture is liable	to be		
canc	ched of rejected.						Stu	udent's Signature
Decla	aration by Principal/HOD	D/Chairperson						
		ized by the College staff and be ctification of the information. H						
cours	urse/term work (if any) according to university rules.							
Place	e:							
			_					
Date	:							
			College St	aff Signature				nature of
						Princip	oal/HOL	D/Chairperson



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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN:		Eligi	Eligibility Status: Examination form No		n No.:	Division/Secti	on: R	Roll No.:	Science		
:	2018016400937572		Eligible								
Instru	uction Medium:	•	-			Nationality:	India		<del>.</del>		
				Student's Perso	onal Informati	on					
Stude	ent's Name: CHAUD	HRY SAIMA	SAEEDULLAH			Mother's Nar	ne: WAHIDU	NNISA	Gender: Female		
Nam	e in Vernacular Langua	ge:चौधरी सा	ईमा साईदुल्लाह								
Addr	ess: 2/11 YAKUB CHA	WL ALI DAD	A ESTATE NEHR	U NAGAR KURLA EAS	Т						
		a, District: Mu		tate: Maharashtra, PIN:	400024						
	ohone no.:			ile no: 919137806725			Email : saim	achaudhary	y570@gmail.com		
	: Jul 20, 2001		tegory: Open		<del>, , , , , , , , , , , , , , , , , , , </del>	Handicap: No		1			
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat No:	7283190 (Status: Pass)		
	n form appearance type										
		se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA	A - College As	ssessment	)		
SN	Paper Code			Paper Name					AM - AT		
1				ing IX - Financial Accou				Th-UA[]			
2				ing X - Cost Accounting				Th-UA[]			
3 83013 Business Economics VI								Th-UA[]			
4 83014 Commerce VI Th-UA []											
5											
6		Computer sy	stems and Applica	<u> </u>				Th-UA [ ] ;			
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fe	е	Examinat	tion Fees		
Mark	Statement Fee		Total:								
Davn	nent Details:	mount Rece	ived:	Call	lege Receipt	No. and Date:					
DD N		anount rece	MICR No:		DD Date:	INO. and Date.		Bank:			
	er Preference (Code/Na	ame).	IVIIOI ( IVO.		DD Date.			Darik.			
	ie Preference (Code/Na										
	<u> </u>			controller Of Examinatio	.n			Inia			
				nination. I have remitted		ed fee for the s	ame I hereh	Plac	ce: <b>Vidyavihar</b>		
decla	are that all statement ma	ade in this ap	oplication are true,	complete and correct to	the best of n	ny knowledge a	and belief. I	Date	e:		
				ibed for the examinatior or day fixed for universi				$\vdash$			
				on being found false or							
canc	elled or rejected.								Student's Signature		
Decl	aration by Principal/HO	D/Chairners							Otadent's Oignature		
This respo	form is carefully scrutin	ized by the C ectification of	College staff and by f the information. H	nme. The information pre/she is regular student					dge. I also undertake the indance and practical		
Place	ə: 										
Potes											



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

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Examination form No.:

Disciple 16



	PRN:	Eligi	bility Status:	110049	I NO	Division/Section:	: Roll I	No.:	Anomayas		
	2018016400937587	Р	rovisional						)		
Instr	uction Medium:	•				Nationality:	India		•		
				Student's Perso	onal Informat	on					
Stud	ent's Name: MOMA	YA YUKTA V	TRESH			Mother's Name:	HEMALI		Gender: Female		
Nam	e in Vernacular Langua	age:मोमाया यु	क्ता विरेश								
Addr	ess: Prakash lodaya 14	101 annant ch	nhaya 60feetRoad								
City:	Mumbai, Taluka: Kurla	, District: Mui	mbai Suburban, St	ate: Maharashtra, PIN:	400077						
Tele	phone no.:		Mob	ile no: 916354167403		Er	mail : yuktamo	maya031	@gmail.com		
DOB	: Oct 31, 2000	Cat	tegory: Open		Physically Handicap: No						
Prev	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Ever	t: Nov-2019	S	eat No: 72	283416 (Status: Pass)		
Exar	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 -	College Asses	sment)			
SN	Paper Code			Paper Name				AM - AT			
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ccounting Th-UA						
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th	-UA [ ]			
3	83013	Business Eco	onomics VI				Th	-UA [ ]			
4	83014	83014 Commerce VI Th-UA []									
5	83015	Direct and In	direct Taxation Pa	per II			Th	-CA[]			
6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th	Th-CA [] Examination Fees			
Convocation Fee Exam Form Late Fee				Fee	Exam Form	Super Late Fee	E	Examination Fees			
Mark	Statement Fee		Total:								
Pavr	nent Details:	Amount Recei	ived:	Coll	ege Receint	No. and Date:		-			
DD N		unount reco	MICR No:		DD Date:	ivo. una Dato.	Ba	nk:			
	er Preference (Code/N	ame):	1		22 2410.						
	ue Preference (Code/Na										
	`		valuations / The C	ontroller Of Examination	n,			Place	: Vidyavihar		
				nination. I have remitted							
				complete and correct to				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.							5	Student's Signature		
Decl	aration by Principal/HO	D/Chairperso	on								
		=		me. The information pr	rinted in the f	orm is correct to t	he best of my	knowledg	je. 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) according to university rules.										
Dies	<u></u>										
Place:											
D											
Date	:		College Sta	aff Signature		99	al and Sir	anature of			
				Conlege Ote	an Oigilatule			Seal and Signature of Principal/HOD/Chairperson			



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

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

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PRN: Eligibility Status:				Examination f		Division/Section:	Roll No.	<i>.</i>		
			-	11005 		Division/Occuon.	11011110	···	Shairs	
	2018016400937595		Eligible			<b></b>				
nstru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati					
Stude	ent's Name: SHAIKI	(H TEHZIB TA	SLEEM			Mother's Name: M	EHZABEEN		Gender: Female	
Nam	e in Vernacular Langua	age:शेख तेःझी	<u>ब्</u>							
Addr	ess: 002,madina co-op	ວ. hsg soc. bld	ig.no.08 shailesh r	agar mumbra						
	mumbra, Taluka: Than	ne, District: Th	nane, State: Mahar	ashtra, PIN: 400612	-					
	ohone no.:		Mot	oile no: 91897643768	33	Emai	il : shkiqra005	@gmail.	.com	
	: Apr 16, 2000		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83577 (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 - Co	Ilege Assessn	nent)		
SN	Paper Code	<u> </u>		Paper Nar					AM - AT	
1			<u>~</u>	ting IX - Financial Ac	<u>~</u>		Th-UA	A[]		
2				ting X - Cost Account	ting		Th-UA			
3	83013	Business Eco					Th-UA			
4 83014 Commerce VI								Th-UA[]		
								A[]		
6										
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Davr	nent Details:	Amount Recei	ived:		College Receipt	No and Date:				
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	er Preference (Code/N	Jame).	INIOTYTYO.		DD Date.		Bui.ii.	-		
	ie Preference (Code/Na									
	Director, Board of Exam	,		Controller Of Examin	ation.			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	pplication are true,	complete and correct	ct to the best of m	ny knowledge and be	elief. I	Date:		
	gone through the sylla est for any special cond									
other	ground. I understand t									
canc	elled or rejected.						l	St	tudent's Signature	
Decl	aration by Principal/HO	DD/Chairperso	on .							
This	form is carefully scrutir	inized by the C	College staff and by	v me. The informatio	n printed in the f	orm is correct to the	best of my kn	owledge	e. I also undertake the	
respo	onsibility of fulfillment/re	rectification of	f the information. H	e/she is regular stud	lent of this Collec	je and has complete	d the required	dattenda	ance and practical	
cours	se/term work (if any) ac	ccording to un	iversity rules.							
21						ļ				
Place	<i></i>					ļ				
~										
Date:				College	Staff Signature	ļ	Seal	and Sigr	nature of	
				Conces	, Otali Olgilatai S	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 110051		Division/Section:	Roll No.	u:	There on
:	2018016400937606	Eligible		1111				***
Instru	uction Medium:				Nationality:	India		
			Student's Perso	onal Informati	on			
Stud	ent's Name: SHUKL	LA SWATI GULABCHAND			Mother's Name: AF	RILA	G	ender: Female
Nam	e in Vernacular Langua	age:शुक्ल स्वाती गुलाबचंद						
		MLA SHANKAR TIWARI CHAW			VADI, LBS MARG, G	HATKOPAR	WEST	
		la, District: Mumbai Suburban, S		: 400086				
	phone no.:		bile no: 919136193612			l : swatishukla	10001 <u>@</u>	gmail.com
DOB	3: Jan 18, 2000	Category: Open		<del> </del>	Handicap: No			
		n Details: Sem III(Regular-Rev1	16)	Exam Even	t: Nov-2019	Seat	No: 728	3601 (Status: Pass)
	n form appearance type							
		ase select Paper details which y	ou want to appear (UA	- University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code	<del> </del>	Paper Name					AM - AT
1		Financial Accounting and Audit	<del>-</del>	<u>-</u>		Th-UA		
2		Financial Accounting and Audit	ting X - Cost Accounting	J		Th-UA	Α[]	
3		Business Economics VI				Th-UA		
4 83014 Commerce VI Th-UA							A[]	
5 83015 Direct and Indirect Taxation Paper II Th-CA							A[]	
6	83023	Investment Analysis and Portfo	olio Management Paper	II		Th-CA	A [ ]	
Conv	vocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination I	Fees
Mark	Statement Fee	Total:						
_		Amount Received:	<u> </u>		No. and Date:	lpi		
DD N		MICR No:		DD Date:		Bank	.:	
	ter Preference (Code/Na	,						
	ue Preference (Code/Na	<del></del>						
		nination and Evaluations / The C					Place:	Vidyavihar
decla	are that all statement ma	sent myself for the ensuing exar nade in this application are true, abus and the list of books prescr	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 t	cession such as change in time that in the event of any informat	or day fixed for universit	ity Examinatio	on etc. on religious or	r any		
сапо	elled or rejected.						Stu	ident's Signature
Deck	aration by Principal/HO	D/Chairperson						
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	ə: 							
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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	PRN:	Eligibility Status:	Examination form 110052	n No.:	Division/Section:	Roll No	:	O'm sho	
	2018016400937614	Eligible							
nstrı	uction Medium:	•			Nationality:	India	,		
			Student's Person	onal Informati	on				
Stud	ent's Name: RAVAF	RIYA NIMISHA DHANJI			Mother's Name: RA	AKHI	(	Gender: Female	
Nam	e in Vernacular Langua	ige:रावरिया निमिषा धनजी							
٩ddr	ess: 1/4,savitri devi cha	awl subhash nagar, asalfa villag	е						
City:	mumbai, Taluka: Kurla	, District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400086					
Tele	ohone no.:	Mob	ile no: 919870888442		Emai	l : rakhiravariy	/a@gail.	com	
OOB	: Nov 09, 2001	Category: Open		Physically	Handicap: No				
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33516 (Status: Pass)	
Exam form appearance type: Fresher									
Pap∈	er Details: Plea	ise 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	83001	Financial Accounting and Audit	ing IX - Financial Accoι	ınting		Th-U	4[]		
2	83007	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	A[]		
3	83013	Business Economics VI				Th-U	۹[]		
4	83014	Commerce VI				Th-U	Th-UA[]		
5	83015	A[]							
6	6 83016 Export Marketing Paper II Th-CA []								
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee	Total:							
Dov.m	nent Details:	Amount Received:	Cal	lege Receipt I	No. and Data:				
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	er Preference (Code/N			DD Date.		Dank	•		
	ie Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·							
	`	ination and Evaluations / The C	ontroller Of Examination	n,			Place:	Vidyavihar	
		ent myself for the ensuing exan			ed fee for the same.	l hereby	i idoc.	Vidyaviilai	
decla	ire that all statement m	ade in this application are true,	complete and correct to	the best of m	y 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.						St	udent's Signature	
Deck	aration by Principal/HO	D/Chairperson							
		nized by the College staff and by	me. The information p	rinted in the fo	orm is correct to the	best of my kno	owledge	. I also undertake the	
resp	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.								
cour	se/term work (if any) ac	cording to university rules.							
Place	·			<u> </u>		<u> </u>			
iace	<del>.</del>								
Date	e:  College Staff Signature Seal and Signature of								
			- Concept Of	a oigilataio				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.:

'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination for 110053		Division/Section:	Roll No	.:	183°//
	2018016400937622		Eligible						2//
Instr	uction Medium:	_ <del>-</del>				Nationality:	India	<u>'</u>	
				Student's Pe	rsonal Informati	on			
Stud	ent's Name: DOSHI	HARSH HITI	ESH			Mother's Name: NI	TA	(	Gender: Male
Nam	e in Vernacular Langua	ge:दोषी हर्ष f	हेतेश						
Addr	ess: NEAR GOPAL BH	UVAN ROOM	M NO.02, SHYAM	NIWAS BETHI CHAV	VL LBS MARG,	GHATKOPAR WES	Т		
City:	MUMBAI, Taluka: Kurla	n, District: Μι	ımbai Suburban, S	tate: Maharashtra, P	IN: 400086				
Tele	ohone no.:		Mob	ile no: 91961946259	8	Emai	l : hhdoshi00@	@gmail.d	com
DOB	: Mar 15, 2000	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatior	Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83228 (Status: ATKT)
Exar	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 Nam	ne				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	ounting		Th-U	••	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounti	ng		Th-U	4[]	
3	83013	Business Eco	onomics VI				Th-U	۹[]	
4 83014 Commerce VI Th-UA [								4[]	
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:						
Dave	nent Details:	mount Recei	ivod:	10	College Receipt	No. and Date:			
DD N		mount Nece	MICR No:		DD Date:	No. and Date.	Bank		
	er Preference (Code/Na	me).	IMICITIO.		DD Date.		Dank	•	
	ie Preference (Code/Na								
	Director, Board of Exami		valuations / The C	Controller Of Examina	tion			Diago	\fighter ibox
	uest permission to prese					ed fee for the same	l 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	elief. I	Date:	
	gone through the syllal est for any special conc								
othe	ground. I understand the	nat in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be		
cano	elled or rejected.							St	udent's Signature
Decl	aration by Principal/HO	D/Chairnerso	n e						adont o dignature
This	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								
	urse/term work (if any) according to university rules.								
Plac	e:								
Date				_					
Daic	•		College	Staff Signature				nature of D/Chairperson	



PRN:

2018016400937637

Instruction Medium:

#### 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.: 110054

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

Eligibility Status:

Eligible

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'e-Suvidha' account on

India

Division/Section:

Nationality:



Student's Signature

	Student's Personal Information										
Stude	nt's Name:	GOSALIA	MIHIR HIMANSHU		Mother's Na	me: JAGRUTI	Gender: Male				
Name	in Vernacul	ar Language	ःगोसालिया मिहीर हिमांशु				•				
Addre	ess: NEELYC	OG APT C/2	203 PANTNAGAR GAURI	SHANKAR WADI NO 2 G	SHATKOPAR EAST MUMB	AI-45					
City: I	City: MUMBAI, Taluka: Mumbai, District: Mumbai City, State: Maharashtra, PIN: 400075										
	hone no.:			obile no: 917984571040		Email : mgosalia2	0@gmail.com				
DOB:	DOB: Aug 03, 2000 Category: Open Physically Handicap: No										
Previo	Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7290670 (Status: ATKT)										
Exam	form appear	rance type: F	Fresher			·					
Paper	r Details:	Please	select Paper details which	you want to appear ( UA	- University Assessment,C	A - College Assessi	ment)				
SN	Paper C	ode		Paper Name			AM - AT				
1	8300	1 Fii	nancial Accounting and Au	diting IX - Financial Accοι	unting	Th-U	A[]				
2	8300	7 Fii	nancial Accounting and Aud	diting X - Cost Accounting	J	Th-U	A[]				
3	8301	3 Bu	usiness Economics VI			Th-U	A[]				
4	8301	4 Co	ommerce VI			Th-U	A[]				
5	8301	5 Di	rect and Indirect Taxation F	Paper II		Th-C	A[]				
6	8302	0 Co	omputer systems and Appli	cations Paper II		Th-U	A [ ] ;Th-CA [ ]				
Conv	ocation Fee		Exam Form Lat	e Fee	Exam Form Super Late Fe	ee Exa	mination Fees				
Mark	Statement F	ee	Total:								
Paym	ent Details:	Am	ount Received:	Col	llege Receipt No. and Date:						
DD N			MICR No:		DD Date:	Banl	<b>C</b> :				
Cente	r Preference	(Code/Nam	ne):		1	1					
Venue Preference (Code/Name):											
To, D	irector, Board	d of Examina	ation and Evaluations / The	Controller Of Examination	on,		Place: Vidyavihar				
					the prescribed fee for the so the best of my knowledge		Date:				

### Declaration by Principal/HOD/Chairperson

cancelled or rejected.

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.

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

Place:		
Date:	College Staff Signature	Seal and Signature of
	Conogo cian Cignatare	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 for 110055		Division/Section:	Roll No	o.:	
:	2018016400937645		Eligible						Asaneuro.
nstrı	uction Medium:	_				Nationality:	India		
				Student's Pe	ersonal Information	on			
Stud	ent's Name: SHAIK	H SAMEERA	SHAMSHIR			Mother's Name: Sa	AIRA	(	Gender: Female
Nam	e in Vernacular Langua	age:शेख समीर	त शमशेर						
Addr	ess: NEAR AFZAL BAI	KERY NEW C	GAUATAM NAGAF	A COLONY GOVAN	NDI MUMBAI				
City:	MUMAI, Taluka: Kurla	, District: Mun							
	phone no.:		Mob	oile no: 91976802376	7	Ema	il : shaikhsaira	a095@gr	mail.com
	: Jan 06, 2001		tegory: Open		Physically	Handicap: No			
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83575 (Status: Pass)
	n form appearance type								
		ase select Pa	per details which y	ou want to appear ( L		ssessment,CA - Co	Ilege Assessr	ment)	
SN	Paper Code			Paper Nam					AM - AT
1	83001	<del> </del>		ing IX - Financial Acc			Th-U		
2	83007			ing X - Cost Accounti	ing		Th-U		
3	83013	Business Eco					Th-U		
4 83014 Commerce VI Th-L									
5	83015		idirect Taxation Pa				Th-C		0.4.1.1
6									
	vocation Fee		Exam Form Late	<u>Fee</u>	Exam Form	Super Late Fee	Exa	mination	i Fees
viark	Statement Fee		Total:						
Payn	nent Details:	Amount Recei	ived:	C	College Receipt I	No. and Date:			
DD N	10:		MICR No:	<u> </u>	DD Date:		Bank	k:	
Cent	er Preference (Code/N	lame):							
√enu	ue Preference (Code/N	ame):							
Γο, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examina	ition,			Place:	Vidyavihar
	uest permission to pres							Data	•
	are that all statement many gone through the sylla							Date:	
eque	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examinatio	on 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 liable	e to be		
Jano	silica or rojocioa.							St	udent's Signature
Deck	aration by Principal/HC	D/Chairperso	on						
	form is carefully scruting								
	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	e:								
				College	Staff Signature			and Sign	
							<sub>l</sub> Princ	ираі/НОL	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:	Eligi	ibility Status:	Examination form 110056	n No.:	Division/Section:	Roll No.	u.:	Proposh	
:	2018016400937653		Eligible		III					
İnstrı	uction Medium:	_				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: MISHRA	A RUPESH [	RUDRAKANT			Mother's Name: RI	NKU	G	ender: Male	
Nam	e in Vernacular Langua	ige:rupesh								
				ng ro om sai darshan 3/7	7 near 50/50 c	Jhabha hagimalang	road kalyan ea	ast		
City:	kalyan, Taluka: Kalyan,	, District: Tha	ane, State: Mahara	shtra, PIN: 421306						
Teler	ohone no.:		Mob	oile no: 917039754085	no: 917039754085 Email : rupeshmishra15432@gmail.com					
DOB	: Jun 02, 2000	Caf	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	3709 (Status: Fail)	
	n form appearance type									
Pape	er Details: Pleas	ise select Pa	per details which y	ou want to appear ( UA	University A	ssessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1		Financial Ac	counting and Audit	ting IX - Financial Accou	unting		Th-UA			
2				ting X - Cost Accounting	J		Th-UA	A[]		
3	83013 E	Business Eco	onomics VI			Th-UA	A[]			
4		Commerce V	<u>/I</u>			Th-UA	Th-UA [ ]			
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A[]		
6		Computer sy	ystems and Applica	tions Paper II			Th-UA	A [ ] ;Th-C	CA[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination f	Fees	
Mark	Statement Fee		Total:							
Davr	nent Details: A	Amount Recei		Col	Iloge Peceint	No. and Date:				
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	er Preference (Code/Na		INICK NO.		DD Date.		Dank			
	er Preference (Code/Na									
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Evaluations / The C	Controller Of Examination	<u></u>			DI	V 0. 4 4b	
				nination. I have remitted		ed fee for the same		Place:	Vidyavihar	
decla	are that all statement ma	ade in this ap	pplication are true,	complete and correct to	o the best of m	ny knowledge and be	elief. I	Date:		
				ribed for the examination				<b> </b>		
				or day fixed for universit ion being found false or						
	elled or rejected.		•	J	-			St.,	ident's Signature	
Dack	aration by Principal/HOI	D/Chairners						Siu	dent's Signature	
		·=		y me. The information pr	rinted in the fo	orm is correct to the	hast of my kny	owlodge	Lalan undertake the	
				y me. The information pi le/she is regular student						
cours	se/term work (if any) acc	cording to ur	niversity rules.	-	=	,	•		·	
		-					 			
Place	ž.									
				_						
Date				0.11.00.1501						
				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 110057	No.:	Division/Section:	Roll No.	.:				
2018016400937661	Eligible						Chikane			
nstruction Medium:	•	<del>'</del>		Nationality:	India		•			
	•	Student's Person	nal Informati	on						
Student's Name: CHIKANE	ARPANA VITTHAL			Mother's Name: LA	TA	G	Gender: Female			
lame in Vernacular Language	e:CHIKANE ARPANA VITTH	AL								
ddress: madina madid room ı	no 4 vikhroli parksite [w]									
City: mumbai, Taluka: , District	t: Thane, State: Maharashtra	, PIN: 400079								
elephone no.:	l : arpanac123	3@gmail	.com							
OOB: Apr 12, 2001	Category: Open		Physically	Handicap: No						
Previous Latest Examination D	Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	3201 (Status: Pass)			
xam form appearance type: F	xam form appearance type: Fresher									
Paper Details: Please	e select Paper details which y	ou want to appear ( UA -	- University A	ssessment,CA - Col	lege Assessm	nent)				
SN Paper Code		Paper Name					AM - AT			
	nancial Accounting and Audit	ing IX - Financial Accour	nting		Th-UA	٠[]				
2 83007 Fir	nancial Accounting and Audit	ing X - Cost Accounting			Th-UA	4[]				
3 83013 Bu	usiness Economics VI				Th-UA	4[]				
4 83014 Co	ommerce VI				Th-UA	4[]				
5 83015 Dir	Th-CA	<del>4</del> []								
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []										
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees			
Mark Statement Fee	Total:									
Payment Details: Amo	nount Received:	Colle	ege Receipt I	No. and Date:						
DD No:	MICR No:		DD Date:		Bank:	:				
Center Preference (Code/Nam										
/enue Preference (Code/Nam	•									
o, Director, Board of Examina	ation and Evaluations / The C	ontroller Of Examination	١,			Place:	Vidyavihar			
request permission to present leclare that all statement made lave gone through the syllabus	de in this application are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:				
equest for any special conces	ssion such as change in time	or day fixed for university	y Examinatio	n etc. on religious or	r any					
ther ground. I understand that	it in the event of any informat	ion being found false or i	ncorrect, my	candidature is liable	to be	l				
ancelled or rejected.						Stu	udent's Signature			
Declaration by Principal/HOD/	Chairperson									
This form is carefully scrutinize esponsibility of fulfillment/rect course/term work (if any) acco	tification of the information. H									
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)

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

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

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Examination form No.:

Disciple 16



PRN: Eligibility Status:			110058	Division/S	Section:	Roll No.:	:   _	Ganos	
	2018016400937676	Eligible							
Instr	uction Medium:	<del>- !</del>		Nationalit	:y:	India	•		
			Student's Perso	nal Information					
Stud	ent's Name: DHERI	E GANESH PANDURANG		Mother's	Name: RA	AHIBAI	Ger	nder: Male	
Nam	e in Vernacular Langua	age:ढेरे गणेश पांडुरंग							
Addr	ess: kaju hill, azad cha	awl commitee, near hanuman ma	ndir, ghatkopar west, m	umbai maharahstra 40	0086				
City:	mumbai , Taluka: Kurl	a, District: Mumbai Suburban, Sta	ate: Maharashtra, PIN:	400086					
Tele	ohone no.:	Mobi	le no: 919892859960		: dhere3763@	gmail.cor	n		
DOB	: Jan 02, 2001	Category: Open		Physically Handicap: No					
Prev	ious Latest Examinatio	on Details: Sem III(Regular-Rev16	6)	Exam Event: Nov-201	19	Seat	No: 72832	25 (Status: ATKT)	
Exar	n form appearance typ	e: Fresher							
Pape	er Details: Plea	ase select Paper details which yo	ou want to appear ( UA -	University Assessmen	nt,CA - Col	lege Assessm	ent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001	Financial Accounting and Auditin	ng IX - Financial Accou	nting		Th-UA	[]		
2	83007	Financial Accounting and Auditin	ng X - Cost Accounting			Th-UA	.[]		
3	83013	Business Economics VI				Th-UA	[]		
4	83014	Commerce VI					Th-UA[]		
5	83015	Direct and Indirect Taxation Pap	er II			Th-CA	[]		
6	83023	Investment Analysis and Portfoli	io Management Paper I			Th-CA	[]		
Conv	ocation Fee	Exam Form Late F	ee	Exam Form Super Lat	e Fee	Exam	nination Fe	es	
Mark	Statement Fee	Total:							
Dover	nent Details:	Amount Received:	Call	age Pagaint No. and D	loto:				
DD N		MICR No:	<u> </u>	ege Receipt No. and D DD Date:	ale.	Bank:			
	er Preference (Code/N			Do Date.		Dank.			
	ie Preference (Code/N								
	,	nination and Evaluations / The Co	ontroller Of Evamination	<b>1</b>		I	Diana	Order Design	
		sent myself for the ensuing exam			the came I		Place: \	Vidyavihar	
decla	are that all statement m	nade in this application are true, c	complete and correct to	the best of my knowled	dge and be	lief. I	Date:		
		abus and the list of books prescrib							
		cession such as change in time of that in the event of any information							
cano	elled or rejected.	•	· ·				Ctude	ent's Signature	
Dool	aration by Principal/UC	)D/Chairnaman				l	Stude	int's Signature	
	aration by Principal/HC	nized by the College staff and by	ma The information or	inted in the form is corr	raat ta tha l	and of my kno	wlodao I	alaa undartaka tha	
		rectification of the information. He							
cour	se/term work (if any) a	ccording to university rules.	-	-	·	•		•	
Plac	<b>e</b> :								
			_						
Date	:		0 11 01	College Staff Signature Seal and Signature of			•		
			College Staff Signature Seal and Signature Principal/HOD/C						



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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 110059	)	Division/Section:	Roll No	<b>)</b> .:	- Hardao	
	2018016400937684	l	Eligible		<b>  </b>		l	!	NO.	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: <b>KAHAF</b>	R CHANDAN	BABURAM			Mother's Name: R	AMAVATI		Gender: Male	
	e in Vernacular Langua									
	ess: RAJESH HOUSIN					RATAP NAGAR RO	DAD			
<u> </u>	MUMBAI, Taluka: Kurl	ia, District: Μι								
	phone no.:		tegory: Open	oile no: 918108901887	1	Handicap: No	il : chandanka	ıhar1999	@gmail.com	
DOB										
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Sea	t No: 728	83312 (Status: ATKT)	
	xam form appearance type: Fresher									
	ı	ase select Par	per details which y	ou want to appear ( U		ssessment,CA - Co	Ilege Assessr	nent)		
SN	Paper Code	<u> </u>		Paper Name					AM - AT	
1				ting IX - Financial Acco			Th-U			
2		+		ting X - Cost Accountin	ng		Th-U			
3	83013	Business Eco Commerce V					Th-U			
4				Th-U						
5 83015 Direct and Indirect Taxation Paper II Th-0										
6		Export Marke	eting Paper II	_	<del></del>	<u>-</u>	Th-C		_	
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Payn	ment Details:	Amount Recei	ived:	C	ollege Receipt I	No. and Date:				
DD N	No:		MICR No:		DD Date:		Bank	κ:		
Cent	ter Preference (Code/N	lame):	•				•			
Venu	ue Preference (Code/Na	ame):								
To, C	Director, Board of Exam	nination and E	Evaluations / The C	controller Of Examinat	ion,			Place:	Vidyavihar	
decla	uest permission to pres 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. l	Date:		
	e gone through the sylla est for any special cond							$\vdash$		
other	r ground. I understand t									
canc	celled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	D/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	a:									
Date	:			College §	Staff Signature			and Sign	nature of 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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	PRN:	Eligi	ibility Status:	Examination form 110060	n No.:	Division/Section:	Roll N	0.:	rdmisha	
	2018016400937692		Eligible							
Instru	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informat	ion				
Stud	ent's Name: WARRII	ER NIMISHA	SATHEESH KUN	MAR		Mother's Name: V	ANAJA	(	Gender: Female	
Nam	e in Vernacular Langua	ge:Warrier n	imisha satheesh K	umar		•				
Addr	ess: A/16 aatmaj CHS 3	ord floor Tha	kurwadi deendaya	l road Dombivili west 42	1202					
City:	Dombivili, Taluka: Kalya	an, District:	Thane, State: Mah	arashtra, PIN: 421202						
Tele	phone no.:		Mot	pile no: 919167379706		Ema	il : chinnuw02	2@gmail.	com	
DOB	: Feb 10, 2000	Ca	tegory: Open		Physically Handicap: No					
Prev	ious Latest Examination	Details: Se	m III(Regular-Rev	6)	Exam Ever	t: Nov-2019	Sea	at No: 728	33661 (Status: Pass)	
	n form appearance type	Fresher								
Pape	r Details: Pleas	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assess	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001 F	inancial Ac	counting and Audit	ing IX - Financial Accou	nting		Th-L	JA [ ]		
2	83007 F	inancial Ac	counting and Audit	ing X - Cost Accounting				JA [ ]		
3	83013 E	Business Ec	onomics VI				Th-L	JA []		
4	83014	Commerce \	/I				Th-U	JA []		
5	83015 I	Direct and In	direct Taxation Pa	per II			Th-C	A[]		
6	83023 I	nvestment A	Analysis and Portfo	lio Management Paper	II		Th-C	A[]		
Conv	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Dave	nent Details: A	mount Rece	i. a.d.	Call	laga Dagaint	No. and Data:				
DD N		illoulit Rece	MICR No:		DD Date:	No. and Date:	Ban	le:		
	er Preference (Code/Na	ime).	IWICK NO.		DD Date.		Daii	Ν.		
	e Preference (Code/Na									
	<u> </u>		Evaluations / The C	Controller Of Examinatio	n			T <sub>D</sub> .	\n	
				nination. I have remitted		ed fee for the same	Lhereby	Place:	Vidyavihar	
decla	are that all statement ma	ide 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 universited the contraction in the contraction						
				ion being found false or						
canc	elled or rejected.		•	-	•			<sub>C+</sub>	udent's Signature	
Dool	aration by Principal/HOI	)/Chairners	nn .					31	udent's Signature	
	-	-		, me. The information of	rinted in the f	orm is correct to the	hest of my ki	nowledge	Lalso undertake the	
	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical									
cour	se/term work (if any) acc	cording to ur	niversity rules.							
Place	e:									
Date	:			College Stoff Signature		0 1	d C:	atura 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:	Eligi	bility Status:	Examination for 110061	m No.:	Division/Section:	Roll No	0.:	Dhiche	
:	2018016400937711		Eligible		IIII					
Instru	ıction Medium:	•				Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: PRAJA	PATI NEHA I	BABULAL			Mother's Name: R	ITA DEVI	(	Gender: Female	
Nam	e in Vernacular Langua	ge:नेहा बाबुल	ाल प्रजापती							
Addr	ess: ROOM NO 7, ING	LE CHAWL,	HANUMAN NAGA	R P.N.ROAD, BHAND	UP-WEST					
City:	MUMBAI, Taluka: Kurla	a, District: Μι	umbai Suburban, S	State: Maharashtra, PIN	l: 400078					
Telep	phone no.:		Mob	pile no: 919930796284		Ema	il : neha6284	p@gmail	.com	
	: Nov 03, 2000		tegory: Open		Physically Handicap: No					
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	at No: 72	83491 (Status: ATKT)	
	n form appearance type	: Fresher								
Pape	r Details: Plea	se select Pa	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assess	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acco	unting		Th-L			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	g		Th-L	JA [ ]		
3	83013	Business Eco	onomics VI				Th-L			
4	83014	Commerce V	/I				Th-L	JA []		
5	83015	Direct and In	direct Taxation Pa	per II			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	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	mount Recei	ived:	Co	llege Receipt	No. and Date:				
DD N		anount reco	MICR No:	100	DD Date:	140. drid Date.	Ban	k.		
	er Preference (Code/Na	ame).	imorrito.		DD Date.					
	e Preference (Code/Na									
	Pirector, Board of Exam		Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar	
	uest permission to pres								•	
	re that all statement mage							Date:		
	est for any special conc									
other	ground. I understand t									
canc	elled or rejected.							St	udent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on					•		
This	form is carefully scrutin	ized by the C	College staff and by	y me. The information p	orinted in the fo	orm is correct to the	best of my kr	nowledge	e. I also undertake the	
	onsibility of fulfillment/re			e/she is regular studen	nt of this Collec	ge and has complete	d the require	d attenda	ance and practical	
cours	se/term work (if any) ac	cording to un	liversity rules.							
Place	à·									
i iact	<del>.</del>									
Date										
Date				College Staff Signature		Seal	and Sign	nature of		
				Concye o	College Stall Signature			Seal and Signature of Principal/HOD/Chairperson		



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PRN: Eligibility Stat		Eligibility Status:	Examination form 110062	1 No.:	Division/Section:	Roll No.	.:	1 ./		
2	018016400937734	Eligible		III				pric.		
Instru	ction Medium:				Nationality:	India				
			Student's Perso	onal Informati	on					
Stude	nt's Name: CHHED	A RAJ AMRISH			Mother's Name: Bl	HAVNA	(	Gender: Male		
Name	in Vernacular Languaç	ge:छेडा राज अमरीश								
Addre	ss: 1/9 Jay Mahavir 60	feet road Ghatkopar East								
City: N	Mumbai, Taluka: Kurla,	District: Mumbai Suburban, St	ate: Maharashtra, PIN:	400077						
Telep	hone no.: 21026303	Mot	pile no: 917021358072		Emai	l : rajachheda	@gmail	.com		
	Jan 27, 2000	Category: Open		Physically Handicap: No						
		Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33199 (Status: Pass)		
	form appearance type:	: Fresher								
Paper	Details: Pleas	se select Paper details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessm	nent)			
SN	Paper Code		Paper Name					AM - AT		
1	83001 F	inancial Accounting and Audit	ing IX - Financial Accou	nting		Th-UA	۱[]			
2	83007 F	inancial Accounting and Audit	ing X - Cost Accounting			Th-UA	۱[]			
3	83013 E	Business Economics VI			Th-UA	۱[]				
4	83014	Commerce VI						Th-UA[]		
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA				
6	83016 E	Export Marketing Paper II				Th-CA	۱] ۲			
Convo	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees		
Mark :	Statement Fee	Total:								
Davm	ent Details: A	mount Received:	Call	logo Pocoint I	No. and Date:					
DD No		MICR No:	<u> </u>	College Receipt No. and Date:  DD Date: Banl						
	r Preference (Code/Na			DD Date.		Dank	•			
	e Preference (Code/Na									
	<u> </u>	nation and Evaluations / The C	Controller Of Evamination	n			Disease	VC days the same		
		ent myself for the ensuing exar			ad fee for the same	l harahy	Place:	Vidyavihar		
		ade in this application are true,					Date:			
		ous and the list of books prescr								
		ession such as change in time nat in the event of any informat								
	lled or rejected.	,	ŭ				~	da.atla Cianatama		
Daala	ration by Dringing!/IOC	2/Oh airm arra ar					51	udent's Signature		
	ration by Principal/HO		, ma The information n	intad in the fe	orm is sorrest to the	hoot of my line		Lalas undartaka tha		
		zed by the College staff and by ctification of the information. H								
		cording to university rules.	J		,	•		·		
Place	:									
			-							
Date:						_		_		
			College Staff Signature			Seal and Signature of Principal/HOD/Chairperson				



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	PRN:	Eligi	ibility Status:	Examination for 110063		Division/Section:	Roll No	o.:	Sainis	
	2018016400937742		Eligible							
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	lent's Name: KARIA	JAINIL KHUS	SHAL			Mother's Name: JA	VERBEN		Gender: Male	
Nam	ne in Vernacular Langua	age:कारीया ज	यनीय खुशाल							
Addr	ress: 103/1 Atul Apt., O	pp. Civil Hosp	pital Dhobi Ali, Ten	ıbinaka Thane (w)						
City:	Thane, Taluka: Thane	, District: Tha	ne, State: Mahara	shtra, PIN: 400601						
Telephone no.:   Mobile no: 919920967707   Email : jainilkaria4@gmail.com										
	3: Dec 27, 2000		tegory: Open		Physically	Handicap: No				
	rious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	ıt No: 728	83322 (Status: Fail)	
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 Nam					AM - AT	
1	83001	Financial Acc	counting and Audit	ting IX - Financial Acc	counting		Th-U	.,		
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounti	ing		Th-U	A[]		
3	83013	Business Eco					Th-U			
4	83014	Commerce V					Th-U			
5 83015 Direct and Indirect Taxation Paper II Th-Ca										
6	83029	Elements of	Operational Resea	·			Th-C			
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees	
Mark	Statement Fee		Total:							
Payr	ment Details:	Amount Recei			College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank	k:		
Cent	ter Preference (Code/N	lame):	1							
	ue Preference (Code/N									
	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 remit	tted the prescribe				Viayariiai	
	are that all statement me gone through the sylla							Date:		
	est for any special cond									
other	r ground. I understand									
canc 	celled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HC	D/Chairperso	on							
respo	form is carefully scruting onsibility of fulfillment/rese/term work (if any) ac	rectification of	f the information. H							
Place	e:									
Date	c			College Staff Signature Seal and Signature of						
					College Stall Signature			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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	PRN:	Eligi	ibility Status:	Examination for 110064	4	Division/Section:	Roll No.	u:	Hakhan	
	2018016400937757	<u>L</u>	Eligible				<u> </u>		1 as	
nstru	uction Medium:	-				Nationality:	India			
				Student's Pe	rsonal Informati	on				
Stude	ent's Name: LAKHA	AN TANMAY \	VILAS			Mother's Name: PF	RANITA		Gender: Male	
Namo	e in Vernacular Langua	age:LAKHAN	TANMAY VILAS							
Addro	ess: A/5 Tarabai Niwas	s, Tembipada	Gavdevi Road Bł	nandup (west)						
City:	Mumbai, Taluka: , Dist	trict: Mumbai	Suburban, State: N	Naharashtra, PIN: 400	0078					
Teler	ohone no.:		Mot	oile no: 919892913694	4	Emai	I : SHWETA14	4343@0	GMAIL.COM	
DOB:										
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	ι No: 728	33372 (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 Nam	пе				AM - AT	
1 83001 Financial Accounting and Auditing IX - Financial Accounting							Th-UA	A [ ]		
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-UA	A [ ]		
3 83013 Business Economics VI							Th-UA	A [ ]		
4	83014	Commerce V	/I				Th-U/	Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-CA [										
6 83029 Elements of Operational Research Paper II Th-CA []										
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Paym	nent Details:	Amount Recei		C	College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
	e Preference (Code/Na	<u> </u>								
To, D	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examina	tion,			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:		
	est for any special cond									
other	ground. Í understand t									
cance	elled or rejected.							St	udent's Signature	
Decla	aration by Principal/HO	DD/Chairperso	on						<u>.</u>	
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	);									
Date:				College	Staff Signature		Seal :	and Sigr	poture 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.

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

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 form 110065	ı No.:	Division/Section:	Roll N	lo.:	Luch	
:	2018016400937765	P	Provisional						C+/2/2	
Instru	uction Medium:			<u> </u>		Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: <b>M ADIT</b>	TYAN K MURI	UGESAN			Mother's Name: SE	EEMA	(	Gender: Male	
Nam	e in Vernacular Langua	ıge:एम . आरि	देत्यन							
	ess: A9 AJAY SATYA F ALPUR , TILHERI	PRAKASH HO	OMES NEAR SPO	ORTS CLUB JABALPUR	, TILHERI AS	AJAY SATYA PRA	KASH HOM	IES NEAF	R SPORTS CLUB	
_		ABALPUR, D		tate: Madhya Pradesh, P	PIN: 482020					
	phone no.:			oile no: 919407506321			il : ad2116bl	1983@gm	nail.com	
	: Oct 21, 1999		tegory: Open			Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Se	at No: 728	83669 (Status: Pass)	
	n form appearance type									
		se 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 Accour				UA [ ]		
2 83007 Financial Accounting and Auditing X - Cost Accounting						Th-UA[]				
3		Business Eco				Th-UA []				
4		Commerce V						h-UA []		
5			ndirect Taxation Pa	•				CA[]		
6		Investment A	<del>,                                    </del>	olio Management Paper I				CA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex:	amination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Recei	in od:	Call	logo Deceint	No. and Date:				
DD N			MICR No:		DD Date:	10. and Date.	Ban	nk.		
	er Preference (Code/Na		MICK NO.		DD Date.		Dai	IK.		
	ue Preference (Code/Na									
	`			Controller Of Examination	<u> </u>			T <sub>D10</sub>	Value and	
				nination. I have remitted		ad foo for the same	Lharehy	Place:	Vidyavihar	
decla	are that all statement ma	ade in this ap	pplication are true,	complete and correct to	the best of m	ny knowledge and be	elief. l	Date:		
				ribed for the examination or day fixed for universit						
other	r ground. Í understand tl			tion being found false or						
	elled or rejected.			-				St	udent's Signature	
Deck	aration by Principal/HOI	D/Chairperso	on .						ddoine o sg.	
This respo	form is carefully scrutin	nized by the C ectification of	College staff and by f the information. H	y me. The information pr le/she is regular student						
Place	ə:									
Date	:			College Sta	aff Signature			al and Sign	nature of D/Chairperson	



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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:	Eligi	ibility Status:	Examination fo 110066	6	Division/Section:	Roll No	).:	(B) Marya		
2	2018016400937773		Eligible								
nstrı	uction Medium:					Nationality:	India				
				Student's Pe	rsonal Informati	on					
Stude	ent's Name: SHETT	TY BHAVYAS	HREE			Mother's Name: VI	DYA		Gender: Female		
Name	e in Vernacular Langua	age:शेट्टी भव्य	यश्री								
Addr	ess: 601 fortune avenu	ıe hiranandar	ni brahmand link ro	oad Thane (west)							
<u> </u>	Thane, Taluka: Thane,	, District: Tha	ne, State: Maharas	shtra, PIN: 400607							
	phone no.:		I	oile no: 917208613999			il : bhavyashe	tty292@	gmail.com		
	: Nov 20, 2000		tegory: Reserved (	· · · · · · · · · · · · · · · · · · ·	Physically	Handicap: No					
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283587 (Status: Par											
	xam form appearance type: Fresher										
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear (U	JA - University A	ssessment,CA - Co	llege Assessr	ment)			
SN	Paper Code	<u> </u>		Paper Nam	Paper Name				AM - AT		
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	g IX - Financial Accounting Th-						
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-UA[]				
3 83013 Business Economics VI							Th-U				
4 83014 Commerce VI T								Γh-UA [ ]			
5 83015 Direct and Indirect Taxation Paper II Th-CA []											
6	83023	Investment A	<del>,                                    </del>	lio Management Pape	er II		Th-C	A[]			
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees		
Mark	Statement Fee		Total:								
 Pavn	ment Details:	Amount Recei		C	College Receipt I	No and Date:					
DD N			MICR No:	1 -	DD Date:	10. 0 2 2 2 2 2	Bank				
	er Preference (Code/N		1		1			<u>"</u>			
	ue Preference (Code/Na										
To, C	Director, Board of Exam	nination and F	Evaluations / The C	controller Of Examina	tion,			Place:	Vidyavihar		
	uest permission to pres							L			
	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 univer	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	or incorrect, my	candidature is liable	e to be				
Canc	alled or rejected.							St	udent'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								
Place	<b>3</b> :										
Date:	1			College	Ctaff Cianatura		Sool	- nd Ciar	of		
				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



	PRN:	Eligi	bility Status:	Examination f 11006	7	Division/Section:	Roll No	).:	Sanket	
	2018016400937781		Eligible						San.	
Instru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: BAIT S	ANKET LAXI	MAN			Mother's Name: A	RCHANA	(	Gender: Male	
Nam	e in Vernacular Langua	ige:बाईत संके	त लक्ष्मण							
Addr	ess: Gurudatta Mitra M	andal, Pitam	aha Ramji Nagar,	Bhatwadi, Ghatkopa	r west					
City:	mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, Pl	N: 400084					
	phone no.:	1		ile no: 91996795745	52	Ema	l : sanketbait9	984@gm	nail.com	
	: Feb 28, 2000		tegory: Reserved (		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Se								t No: 728	83155 (Status: Pass)	
Exan	n form appearance type									
Pape	er Details: Plea	ise select Pa	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Nar	ne			AM - AT		
1				ing IX - Financial Ac			Th-U			
2	83007			ing X - Cost Account	ting		Th-U	A [ ]		
3	83013	Business Ec					Th-U			
							Th-U			
								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:							
Pavn	nent Details:	mount Rece	ived:		College Receipt	No. and Date:				
DD N			MICR No:	<u> </u>	DD Date:		Bank	<u></u>		
	er Preference (Code/Na	ame):					1			
	ue Preference (Code/Na									
To, C	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres							Data	·	
	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 unive	ersity Examination	n etc. on religious o	r 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			
cario	ched of 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	:			College	Staff Signature		Seal	and Siar	nature 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)

Application Form for Examination of Summer Session 2021 event.

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PRN: Eligibility Status:				Examination for 110068	8	Division/Section:	Roll No	o.:	1649	
	2018016400937796	<u> </u>	Eligible				l			
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: SHAIK	TH ALIYA KHA	ATOON MUNEER			Mother's Name: R	AEESUNNIS	Α (	Gender: Female	
Nam	e in Vernacular Langua	age:शेख आली	य मुनीर							
Addr	ess: RAFIQ NAGAR (	GOVANDI MU	JMBAI							
	MUMBAI, Taluka: Kurl	la, District: Μι								
	phone no.:		Mot	oile no: 91977341099	9	Emai	I : ALIYASHA	\IKH1969	9@GMAIL.COM	
	3: Jul 29, 2001		tegory: Open		Physically	Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	it: Nov-2019	Sea	ıt No: 728	83742 (Status: Pass)	
	n form appearance type									
Pape		ase select Par	per details which y	ou want to appear ( L	JA - University A	ssessment,CA - Co	ilege Assessr	ment)		
SN	Paper Code				Paper Name				AM - AT	
1	83001			ting IX - Financial Acc			Th-U	.,		
2	83007	+		ting X - Cost Accounti	ing		Th-U			
3	83013	Business Eco						Th-UA []		
4	83014	Commerce V					Th-U	•••		
5	83015	1	ndirect Taxation Pa	-				A[]		
6	83020	Computer sy	stems and Applica					JA [ ] ;Th-		
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	ı Fees	
Mark	Statement Fee		Total:							
Payn	ment Details:	Amount Recei	ived:		College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank	k:		
Cent	ter Preference (Code/N	lame):								
	ue Preference (Code/N				-					
To, C	Director, Board of Exam	nination and F	Evaluations / The C	controller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres								,	
	are that all statement me gone through the sylla							Date:		
reque	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
other	r ground. I understand elled or rejected.									
Cano	ellea or rejected.							St	tudent's Signature	
Deck	aration by Principal/HC	OD/Chairperso	on							
respo	form is carefully scrutionsibility of fulfillment/r se/term work (if any) ac	rectification of	f the information. H							
Place	э:									
Date:	:			College	Staff Signature				nature of D/Chairperson	
						,	, PIIIIC	лраипоц	ا المالك الحالم الكالك الحالم الكالك الحالم الكالك الكالك الكالك الكالك الكالك الكالك الكالك الكالك الكالك الك	



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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 110069	ı No.:	Division/Section:	Roll No.	.:	S. 0		
2018016400937807	Eligible						Painl		
nstruction Medium:				Nationality:	India				
	<u></u>	Student's Perso	nal Information	on					
Student's Name: JAIN NIDI	HI MAHAVIR			Mother's Name: Pl	STA	C	Gender: Female		
lame in Vernacular Language	e:Jain nidhi mahavir								
ddress: Near shakuntala hos	spital shop no.11 Tagore Nag	jar, grp no. 2 Vikhroli eas	st						
City: Mumbai, Taluka: Kurla, D	District: Mumbai Suburban, St	.ate: Maharashtra, PIN: 4	400083						
elephone no.:	1	oile no: 919619550540		4@gmail	I.com				
OOB: Dec 24, 2000	Category: Open		Physically Handicap: No						
Previous Latest Examination Γ	Details: Sem I(Regular-Rev16	<i>i</i> )	Exam Event: Nov-2019 Seat No: 7014678 (Status: Pass)						
xam form appearance type: F	Fresher								
Paper Details: Please	e select Paper details which y	ou want to appear ( UA ·	- University A	ssessment,CA - Col	lege Assessm	nent)			
SN Paper Code		Paper Name					AM - AT		
	nancial Accounting and Audit	ing IX - Financial Accour	nting	Th-UA	4 [ ]				
2 83007 Fir	nancial Accounting and Audit	ing X - Cost Accounting			Th-UA	4[]			
3 83013 Bu	usiness Economics VI				Th-UA	4[]			
4 83014 Co	ommerce VI				Th-U <i>F</i>	Th-UA[]			
5 83015 Di	irect and Indirect Taxation Pa	per II			Th-CA	4[]			
6 83020 Cd	omputer systems and Applica	itions Paper II			Th-U <i>F</i>	۲ [] ;Th-(	CA[]		
Convocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees		
Mark Statement Fee	Total:								
	nount Received:			No. and Date:					
DD No:	MICR No:		DD Date:		Bank:	<u>:                                    </u>			
Center Preference (Code/Nam									
/enue Preference (Code/Nam	•								
o, Director, Board of Examina						Place:	Vidyavihar		
request permission to presen leclare that all statement mad have gone through the syllabu	de in this application are true,	complete and correct to	the best of m	ny knowledge and be	elief. I	Date:			
equest for any special conces other ground. I understand tha	ssion such as change in time	or day fixed for university	ty Examinatio	n etc. on religious or	r any				
ancelled or rejected.	•	· ·				C+.	datla Cianatura		
See the Debata //UOD/	(A) 1					Sit	udent's Signature		
esponsibility of fulfillment/rect	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.								
Place:									
Pate:		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.

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	PRN:	Eligib	oility Status:	Examination form 110070	1 No.:	Division/Section:	Roll No	).:	1	
:	2018016400937815	1	Eligible						Margare	
Instru	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: <b>JETHV</b>	A HARSHIL S	SURESH			Mother's Name: LA	ATA	(	Gender: Male	
Nam	e in Vernacular Langua	ge:जेथव हर्षि	ांल सुरेश							
Addr	ess: 31 b KAILASH DA	RSHAN HAN	SOTI LANE KAMA	A GALI GHATKOPAR W	VEST					
City:	Mumbai, Taluka: Kurla	, District: Mun	nbai Suburban, St	ate: Maharashtra, PIN:	400086					
	phone no.:		Mob	ile no: 918828558629		Ema	il : harshiljethv	/a9718@	gmail.com	
	: Jun 06, 2000		egory: Open		Physically	Handicap: No				
	ous Latest Examination		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33691 (Status: Fail)	
	n form appearance type									
		se select Pap	er 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	nting	Th-U	A [ ]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting		Th-U	A [ ]			
3	83013	Business Eco	onomics VI			Th-U/	A [ ]			
4	83014	Commerce V	1					Th-UA[]		
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-	CA[]	
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	mount Recei	ved:	Coll	lege Receipt	No. and Date:				
DD N			MICR No:	<u> </u>	DD Date:		Bank	ί:		
Cent	er Preference (Code/Na	ame):								
Venu	e Preference (Code/Na	ime):								
To, E	Pirector, Board of Exam	ination and E	valuations / The C	controller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
have	gone through the syllal	bus and the li	st of books prescr	ibed for the examinatior	n for which I a	m appearing. I shall	not			
				or day fixed for universition being found false or						
	elled or rejected.	nat in the eve	ant of any informat	on being lound raise of	incorrect, my	Candidature is liable	o to be			
cultioned of rejection.								St	udent's Signature	
	Declaration by Principal/HOD/Chairperson									
				/ me. The information pre/ e/she is regular student						
	se/term work (if any) ac			crone to regular stadent		ge and has complete	a the required	attoriat	ande and praetical	
Place	<b>:</b> :									
Date				College Staff Signature		Cocl	and Cie-	noture of		
				College Staff Signature					nature of D/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:				Examination fo 110071		Division/Section:	Roll No.	).:	2000	
2	2018016400937823		Eligible			l		ļ	2001	
nstrı	uction Medium:			-		Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: BHATT	T SIDDHI BHA	AVESH			Mother's Name: NI	ISHA		Gender: Female	
	e in Vernacular Langua		`							
	ess: A/17 RAGUPATI A									
	MUMBAI, Taluka: Kurl	la, District: Μι								
	phone no.:			oile no: 918422073856			il : siddhibhatt3	30@gm	ail.com	
	:: Dec 30, 2000		tegory: Open		Physically Handicap: No					
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	ι No: 728	83181 (Status: Pass)	
	n form appearance type									
		ase select Par	per details which y	ou want to appear (U.		ssessment,CA - Co	Ilege Assessm	nent)		
SN	Paper Code	<u> </u>		<b>'</b>	Paper Name				AM - AT	
1				ting IX - Financial Acco		Th-UA				
2				ting X - Cost Accountir	ng		Th-UA			
3	83013	Business Eco						Th-UA []		
4		Commerce V						A[]		
5			ndirect Taxation Pa	•			Th-CA			
6		Investment A		olio Management Pape				A [ ]		
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Payn	ment Details:	Amount Recei	eived:	c	College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank	c:		
Cent	er Preference (Code/N	lame):								
	ue Preference (Code/Na									
To, C	Director, Board of Exam	nination and F	Evaluations / The C	Controller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres								<b>,</b>	
	are that all statement me gone through the sylla							Date:		
reque	est for any special cond	cession such	as change in time	or day fixed for univer-	rsity Examinatio	on etc. on religious or	r any			
other	r ground. I understand telled or rejected.									
Carro	alled of rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutir									
	onsibility of fulfillment/ro se/term work (if any) ac			e/she is regular stude	ent of this Colleg	je and has complete	d the required	d attenda	ance and practical	
Place	e:					ļ	l			
				_		ļ				
Date:	£					ļ	l			
				College 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.

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

'e-Suvidha' account on Roll No .:

> Seal and Signature of Principal/HOD/Chairperson

M.S. Wikan Examination form No.: Eligibility Status: PRN: Division/Section: 110072 2018016400937831 Eligible Nationality: Instruction Medium: India Student's Personal Information NIKAM MANJUSHA SANTOSH Student's Name: Mother's Name: ANITA Gender: Female Name in Vernacular Language:मंजूषा संतोष निकम Address: ROOM NO 6 ,RAI MASTER CHWAL RATAN BHAI COMPAUND SHIVAJI NAGAR WAGALE ESTATE THANE WEST(400604) City: thane, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604 Telephone no.: 91 Mobile no: 918108530025 Email: manjusha31102@gmail.com DOB: Oct 31, 2000 Physically Handicap: No Category: Open Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283714 (Status: Pass) Exam form appearance type: Fresher Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment ) Paper Details: 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[] 6 83020 Computer systems and Applications Paper II Th-UA [ ] ;Th-CA [ ] Exam Form Late Fee Convocation Fee Exam Form Super Late Fee **Examination Fees** Mark Statement Fee Total: Payment Details: Amount Received: College Receipt No. and Date: MICR No: DD Date: DD No: Bank: Center Preference (Code/Name): Venue Preference (Code/Name): To, 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:



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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 110073		Division/Section:	Roll No	.:	Sejal	
:	2018016400937846		Eligible							
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: PATEL	SEJAL DEV	JI			Mother's Name: C	HANDRIKA	(	Gender: Female	
Nam	e in Vernacular Langua	ige:पटेल सेज	ल देवजी							
Addr	ess: 6/10, jawaharnaga	ar NEAR ONG	GC COLONY vidya	vihar(east)						
City:	MUMBAI, Taluka: Kurl	a, District: Mu	umbai Suburban, S	tate: Maharashtra, PIN	N: 400077					
Telep	ohone no.:		Mob	ile no: 919833901830		Ema	il : pchandrika	707@gr	mail.com	
DOB	: Jun 13, 2001	Ca	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283474 (Status: Pass)					
Exan	n form appearance type	e: Fresher								
Pape	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	۹[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accountin	g		Th-U	۹[]		
3	83013	Business Ec	onomics VI				Th-U			
4		Commerce \					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	rocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Rece	ived:	Co	llege Receipt	No. and Date:				
DD N		unount ricce	MICR No:	00	DD Date:	140. drid Date.	Bank			
	er Preference (Code/N	ame).	imorrito.		DD Dato.		Dank			
	ie Preference (Code/Na									
	Director, Board of Exam	•	Evaluations / The C	ontroller Of Examination	on.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	l lacc.	Vidyaviilai	
decla	are that all statement m	ade in this ap	oplication are true,	complete and correct t	o 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	udent's Signature	
Declaration by Principal/HOD/Chairperson										
This respo	is form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical urse/term work (if any) according to university rules.									
Place	<del>2</del> :									
Date:				College Stoff Signature		ا امدا	and Oir	notive 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)

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

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	PRN:	Eligi	ibility Status:	Examination form 110074	No.:	Division/Section:	Roll N	۱o.:	Prachi
2	2018016400937854		Eligible		11	1		1	
nstrı	uction Medium:					Nationality:	India		
				Student's Person	nal Informati	ion			
Stude	ent's Name: PATEL	. PRACHI JITI	ESH			Mother's Name: MA	AYA	(	Gender: Female
lam	e in Vernacular Langua	ıge:पटेल प्राच	्री जितेश						
ddr	ess: C/5, JAWAHAR NA	AGAR NEAR	ONGC COLONY	vidyavihar(east)					
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	State: Maharashtra, PIN:	400077				
Telephone no.: Mobile no: 919869710534 Email : deve								thod1512(	@gmail.com
ОВ	: May 31, 2001	Cat	tegory: Open		Physically	/ Handicap: No			
revi	ious Latest Examinatior	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Se	at No: 728	83472 (Status: Pass)
xan	n form appearance type	e: Fresher							
ape	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA -	- University F	Assessment,CA - Col	lege Asses	sment)	
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accoun	nting		Th-	-UA[]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Th-	-UA [ ]	
3	83013	Business Eco	onomics VI				Th-	-UA [ ]	
4	83014	Commerce V	/I				Th-	-UA [ ]	
5	83015	Direct and In	ndirect Taxation Pap	per II			Th-	-CA[]	
6	83016	Export Marke	eting Paper II				Th-	-CA[]	
Conv	ocation Fee		Exam Form Late I	Fee	Exam Form	Super Late Fee	Ex	kamination	Fees
/lark	Statement Fee		Total:						
			<u> </u>						
		Amount Recei			<u> </u>	No. and Date:			
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	er Preference (Code/Na								
	ue Preference (Code/Na		The C	· · · · · · · · · · · · · · · · · · ·				<del></del>	ľ
				Controller Of Examination		Complete and a second	I banaha.	Place:	Vidyavihar
				nination. I have remitted to complete and correct to the complete and correct to the correct t				Date:	
ave	gone through the syllal	bus and the li	list of books prescri	ibed for the examination	for which I a	am appearing. I shall	not	<u> </u>	
				or day fixed for university ion being found false or in					
	elled or rejected.	Hut III	officer any much	On boning reasons and	11001100., ,	ouridiada.c.	, 10 50	.	
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	aration by Principal/HO	-		Ti i Come Man out	· · · · · · · · · · · · · · · · · · ·	to the	· · · · · · · · · · · · · · · · · · ·	· !daa	to delicate
				y me. The information pri le/she is regular student o					
	se/term work (if any) ac			5,65 (2 ) 25	J	, , ,		00 =	and and process
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Place	<b>э</b> :						ı		
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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.

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Examination form No.:

Disciple 16



PRN: Eligibility Status:			110075	II INO	Division/Section:	Roll No.	.:	no.	
:	2018016400937877		Eligible						Shawken
Instru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stud	ent's Name: THAKK	KAR JAGRUT	I DEEPAK			Mother's Name: MI	NAXI	(	Gender: Female
Nam	e in Vernacular Langua	age:जागृती दि	पक ठक्कर						
	ess: 198 1st floor matru								
City:	thane, Taluka: Thane,	District: Than	ie, State: Maharas	ntra, PIN: 400601					
Teler	phone no.:		Mob	oile no: 919322752225		Email	: jagrutit444@	@gmail.	com
DOB	: Aug 15, 2000	Cat	tegory: Open		Physically Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83630 (Status: Pass)
	n form appearance type								
<del></del> -		ase select Par	per details which y	ou want to appear ( UA	- University A	ssessment,CA - Coll	lege Assessm	nent)	
SN	Paper Code	<b></b>		Paper Name				AM - AT	
1		Financial Acc	counting and Audit	ting IX - Financial Accou	ınting		Th-UA		
2		Financial Acc	counting and Audit	ting X - Cost Accounting	J		Th-UA		
3	83013	Business Eco	onomics VI			Th-UA	Th-UA[]		
4		Commerce V	<u>/I</u>		Th-UA	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] ۲	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees
Mark	Statement Fee		Total:						
Davr	nent Details:	Amount Recei	in od:	Col	llogo Deceint	No. and Date:			
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	er Preference (Code/Na	ame).	IVIIOT ( IVO.		DD Date.			·	
	ue Preference (Code/Na								
	•	-	 Evaluations / The C	Controller Of Examination	 on.			Place:	Vidyavihar
				nination. I have remitted		ed fee for the same. I		i idee.	Vidyaviilai
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	lief. I	Date:	
				ibed for the examination or day fixed for universit					
other	r ground. I understand t			ion being found false or					
canc	elled or rejected.							St	udent's Signature
Deck	aration by Principal/HO	)D/Chairperso							ddones orginata.s
		-		y me. The information pr	rinted in the f	orm is correct to the h	nest of mv kno	owledae	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	cording to un	iversity rules.						
Place	): :								
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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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	110076	II NO	Division/Section:	Roll No	).:	Teins	
2	2018016400937885		Eligible		III				Fejuf	
Instru	ction Medium:					Nationality:	India			
				Student's Person	onal Informat	ion				
Stude	ent's Name: PATIL T	EJAS SANJ	AYKUMAR			Mother's Name: Ti	RUPTI	G	Gender: Male	
Name	e in Vernacular Langua	ge:पाटील तेज	ास संजयकुमार							
	ess: Room No. 11, Irsha		<u> </u>	,						
<u> </u>	<u></u>	District: Mu		ate: Maharashtra, PIN:	400078					
Telep	hone no.:		Mob	ile no: 917039352800		Emai	l : tejaspatil2:	3456@gm	nail.com	
DOB:	Nov 10, 2000	Cat	egory: Open		Physically Handicap: No					
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283482 (Status: Pass)					
Exam	form appearance type	: Fresher								
Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Asses								ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001 F	Financial Ac	counting and Audit					A[]		
2	83007 F	Financial Ac	counting and Audit	ing X - Cost Accounting	l	Th-U	A[]			
3	83013 E	Business Ec	onomics VI				Th-U	A[]		
4	83014	Commerce V	1				Th-U	A[]		
5	83015 I	Direct and In	direct Taxation Pa	per II			Th-C	A[]		
6	83023 I	nvestment A	nalysis and Portfo	lio Management Paper	II		Th-C	A[]		
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee		Total:							
				T						
		mount Rece		Col		No. and Date:				
DD N			MICR No:		DD Date:		Banl	C:		
	er Preference (Code/Na									
	e Preference (Code/Na	-								
				Controller Of Examination				Place:	Vidyavihar	
decla	re that all statement ma	ade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of r	ny knowledge and be	elief. I	Date:		
				ibed for the examination or day fixed for universi						
other	ground. I understand the			ion being found false or						
cancelled or rejected.								Stu	ıdent's Signature	
Decla	ration by Principal/HOI	D/Chairperso	on							
respo		ectification of	the information. H	/ me. The information p e/she is regular student						
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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PRN: Eligibilit			ibility Status:	Examination f 11007		Division/Section:	Roll No	u:	Shimi	
	2018016400937893		Eligible						0	
nstr	uction Medium:	<del>'</del>				Nationality:	India			
				Student's Pe	ersonal Informat	ion				
Stud	ent's Name: PATEL	BHUMI BHA	RAT			Mother's Name: M	ADHU	(	Gender: Female	
Nam	e in Vernacular Langua	age:पटेल भूमी	भारत							
٩ddr	ess: ROAD NO 4 JAMI	JNA YADAV	CHAWL PESTAM	SAGAR NEAR SHO	PPER STOP					
City:	MUMBAI, Taluka: Kurl	a, District: M	umbai Suburban, S	State: Maharashtra, P	PIN: 400089					
Tele	ohone no.:		Mob	ile no: 91989282903	39	il : bhumipate@	652@gn	nail.com		
OOB	: Nov 30, 2000	Ca	tegory: Open		Physically Handicap: No					
⊃rev	ious Latest Examination	n Details: Se	m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283464 (Status: Pass)					
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear ( l	UA - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Nan	ne				AM - AT	
1	83001	Financial Ac	counting and Audit	ing IX - Financial Aco	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/	Th-UA [ ]			
4	83014	Commerce \	/I			Th-U/	Th-UA[]			
5	83015	Direct and Ir	ndirect Taxation Pa	per II			Th-C/	A [ ]		
6	83023	Investment A	Analysis and Portfo	lio Management Pap	Management Paper II			A[]		
Conv	ocation Fee		Exam Form Late	Fee	e Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee		Total:							
					•		,			
_		Amount Rece	1	(	College Receipt No. and Date:					
N DC			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
∕enι	ie Preference (Code/Na	ame):								
Го, [	Director, Board of Exam	ination and E	Evaluations / The C	Controller Of Examina	ation,			Place:	Vidyavihar	
decla	uest permission to pres are that all statement m gone through the sylla	ade in this ap	pplication are true,	complete and correc	t to the best of r	ny knowledge and be	elief. I	Date:		
equ	est for any special cond	cession such	as change in time	or day fixed for unive	ersity Examination	on etc. on religious o	r any			
	r ground. I understand t elled or rejected.	that in the ev	ent of any informat	ion being found false	or incorrect, my	y candidature is liable	e to be			
Janic	elled of rejected.							St	udent's Signature	
Decl	eclaration by Principal/HOD/Chairperson									
esp	form is carefully scrutir onsibility of fulfillment/ro se/term work (if any) ac	ectification of	f the information. H							
Place	e:									
Date	:			College Staff 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.

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PRN: Eligibility Status:					Examination form 110078	n No.:	Division/Section:	Roll No	o.:	Josish a	
	201801640093	37927		Eligible		III					
nstrı	uction Medium	:					Nationality:	India			
					Student's Perso	onal Informati	on				
Stud	ent's Name:	MISHRA	A VARUN AM	MRENDRA			Mother's Name: Pl	RECILLA	(	Gender: Male	
Nam	e in Vernacula	r Langua	ge:मिश्रा वरून	न अमरेंद्र							
٩ddr	ess: 702/D Pa	tidar Com	plex, Kanna	amwar Nagar 2 Vik	hroli (East)						
City:	MUMBAI, Talı	uka: , Dist	trict: Mumba	i City, State: Mahai	rashtra, PIN: 400083						
Tele	phone no.:				ile no: 919773831079		Emai	l : varunmish	ra4662@	gmail.com	
	: Oct 22, 2000			tegory: Open		Physically	Handicap: No				
				m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 72	83410 (Status: Fail)	
Exam form appearance type: Fresher											
	er Details:	Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assess	ment)		
SN	Paper Co	ode			Paper Name					AM - AT	
1	83001	I	Financial Acc	counting and Audit	ing IX - Financial Accou	ng IX - Financial Accounting					
2	83007		Financial Acc	counting and Audit	ing X - Cost Accounting	l		Th-U	A[]		
3	83013		Business Ec	onomics VI				Th-U			
4	83014	. (	Commerce V	<u>′</u> 1				Th-U	Th-UA[]		
5	83015			direct Taxation Pa	per II	er II			A[]		
6	83016	I	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 Fe	е		Total:							
Payr	nent Details:	Α	mount Rece	ived:	Col	lege Receipt	No. and Date:				
DD N	No:			MICR No:	·	DD Date:		Ban	k:		
Cent	er Preference	(Code/Na	nme):								
√enι	ue Preference	(Code/Na	me):								
					ontroller Of Examinatio				Place:	Vidyavihar	
decla	are that all stat	ement ma	ade in this ap	plication are true,	nination. I have remitted complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
					ibed for the examination or day fixed for universi						
					on being found false or						
canc	elled or rejecte	ed.		-	-				<sub>St</sub>	udent's Signature	
) oct	aration by Drin	cinal/H∩l	D/Chairnere	n .					31	duent's Olynature	
	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									l also undertake the	
resp	onsibility of fulf	fillment/re	ectification of	the information. H	e/she is regular student	t of this Collec	ge and has complete	d the require	d attenda	ance and practical	
cour	se/term work (i	if any) ac	cording to ur	niversity rules.							
Place	a·										
	<b>-</b>				_						
Date											
Sale.					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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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination forn 110079		Division/Section:	Roll No.	.:	A. re
	2018016400937935	Eligible		<u> </u>				Cart
Instru	uction Medium:				Nationality:	India		
			Student's Perso	onal Informati	on			
Stud	ent's Name: RAJPU	ROHIT KRUPAKAWAR CHETA	ANSINGH		Mother's Name: Pa	ARASDEVI		Gender: Female
Nam	e in Vernacular Langua	ge:राजपुरोहित कृपाकवर चेतनसिं	π					
		no 5 sagar bldg samta colony pa		t mumbai				
_		rict: Thane, State: Maharashtra						
Tele	phone no.:	Mob	Ema	I : chtnrjprht@	gmail.co	om		
	: Nov 19, 2000	Category: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev1	16)	Exam Even	t: Nov-2019	Seat	t No: 728	33501 (Status: Pass)
Exan	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 I	Financial Accounting and Audit	ing IX - Financial Accou	unting	Th-UA	A[]		
2	83007 F	Financial Accounting and Audit	ing X - Cost Accounting	]		Th-UA	A[]	
3	83013 E	Business Economics VI				Th-UA	A [ ]	
4	83014	Commerce VI				Th-UA	A [ ]	
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA	A[]	
6	83016 E	Export Marketing Paper II				Th-CA	A[]	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee	Total:						
				•		•		
_		mount Received:	Col	· -	No. and Date:			
DD N		MICR No:		DD Date:		Bank	:	
	er Preference (Code/Na							
Venu	ue Preference (Code/Na	ime):						
To, E	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, bus and the list of books prescr	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 change in time hat in the event of any informat	or day fixed for university	ity Examinatio	on etc. on religious o	r any		
cancelled or rejected. Student's Signature								udent's Signature
Decla	aration by Principal/HOI	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.

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

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	PRN:	Eligi	bility Status:	Examination for 110080		Division/Section:	Roll No	.:	Jange	
	2018016400937943		Eligible						Control of the contro	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	sonal Informati	on				
Stud	ent's Name: MANG	DHRUV RA	MESH			Mother's Name: V	ARSHA	(	Gender: Male	
Nam	e in Vernacular Langua	ge:धुव रमेश	मंगे							
Addr	ess: 16/2 UJALA BUILI	DING DOMBI	IVLI EAST AYRE F	ROAD						
City:	KALYAN, Taluka: Kaly	an, District: T	hane, State: Maha	rashtra, PIN: 421201						
Tele	ohone no.:		Mot	ile no: 918369383288		Emai	l : dhruvmang	e04@gr	mail.com	
DOB	: Nov 28, 2000	Cat	tegory: Open		Physically Handicap: No					
Prev	ious Latest Examination	n Details: Sei	m I(Regular-Rev16	5)	Exam Even	t: Nov-2019	Seat	: No: 70	14686 (Status: ATKT)	
Exan	n form appearance type	: Fresher								
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	A - 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 Accounting				٩[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountin	g		Th-U	٩[]		
3		Business Ec					Th-U			
4		Commerce V						Th-UA []		
5			direct Taxation Pa	per II			Th-C/			
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:	mount Rece	ived <sup>.</sup>	Co	llege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/Na	ame):	<u> </u>				I			
Venu	ie Preference (Code/Na	ame):								
To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examination	on,			Place:	Vidyavihar	
	uest permission to pres									
	are that all statement m gone through the sylla							Date:		
	est for any special cond									
	ground. I understand telled or rejected.	hat in the eve	ent of any informat	on being found false o	r incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							St	udent's Signature	
Decl	eclaration by Principal/HOD/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) ac	cording to ur	niversity 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.

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

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	PRN:	Eligi <sup>r</sup>	ibility Status:	Examination form 110081	m No.:	Division/Section:	Roll No.	u.:	200		
2	2018016400937951		Eligible						Drave.		
nstru	uction Medium:					Nationality:	India				
				Student's Perso	onal Informati	on					
Stude	ent's Name: DONG	RE SANSKRI	UTI PRASHANT			Mother's Name: YO	OGITA	G	Gender: Female		
lame	e in Vernacular Langua	age:डोंगरे संस	-कृती प्रशांत								
Addre	ess: 302 PARIJAT PUS	SHP BEHIND	MAYUR HOTEL C	OLD MUMBAI PUNE RO	OAD KHARE	GAON KALWA WES	T				
_	THANE, Taluka: Thane	e, District: The									
	phone no.:			pile no: 918828098199			l : sonalbhatka	ande022	21@gmail.com		
ОВ	: Apr 12, 2000	Cat	tegory: Open		<del></del>	Handicap: No					
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33227 (Status: Pass)		
xan	n form appearance type										
<u> </u>	er Details: Plea	ase select Par	per details which y	ou want to appear ( UA	ι - University A	ssessment,CA - Co	llege Assessm	nent)			
SN	Paper Code	<u> </u>		Paper Name				AM - AT			
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	unting	Th-UA	A[]				
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	<b>J</b>		Th-UA	A[]			
3	83013	Business Eco	onomics VI						Th-UA []		
4	83014	Commerce V	/1				Th-UA	A[]			
5	83015	Direct and In-	ndirect Taxation Pap	per II			Th-CA	A [ ]			
6	83016	Export Marke	eting Paper II				Th-CA	A [ ]			
Conv	ocation Fee		Exam Form Late I	Fee	ee Exam Form Super Late Fee			mination	Fees		
/lark	Statement Fee		Total:								
) avm	nent Details:	Amount Recei	inoq.		College Receipt No. and Date:						
DD N			MICR No:		College Receipt No. and Date:						
	er Preference (Code/N		IVIICITIVO.		DD Date.		Dank				
	ue Preference (Code/Na										
	`		Evaluations / The C	Controller Of Examinatio	on,			Place:	Vidyavihar		
				nination. I have remitted		ed fee for the same.	I hereby		Vidyaviilai		
Iecla	are that all statement m	nade in this ap	pplication are true,	complete and correct to	o the best of m	ny knowledge and be	elief. I	Date:			
				ibed for the examination or day fixed for universi							
ther	r ground. Í understand t			ion being found false or							
ance	elled or rejected.							Stu	udent's Signature		
ecla	aration by Principal/HO	D/Chairperso	on								
This espo	form is carefully scruting	inized by the C rectification of	College staff and by f the information. He	y me. The information p le/she is regular student							
Place	<b>→</b> :										
)ate:	:			College Staff Signature Seal and			and Signa				
						Princi	ipal/HOD	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 for 110082	m No.:	Division/Section:	Roll No	).:	A. Sorahii
:	2018016400937966	Eligible			l			T.A alvo
Instr	uction Medium:				Nationality:	India		Į.
		· <del>-</del>	Student's Pers	sonal Information	on			
Stud	ent's Name: SANGH	IAVI TANAY ASHOK			Mother's Name: KA	ALPANA	(	Gender: Male
Nam	e in Vernacular Langua	ge:तनय						
Addr	ess: VARDHAMAN NAC	GAR C/6/89 GOKUL ASHISH	CHS,DR.R.P.ROAD M	ULUND WEST	MUMBAI 400080			
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	State: Maharashtra, PIN	1: 400080				
Tele	phone no.:	Mol	oile no: 919167459540		Emai	l : tanaysangl	hvi1020(	@gamil.com
DOB	: Apr 10, 2001	Category: Open		Physically	Handicap: No			
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019							t No: 728	83528 (Status: Pass)
Exan	n form appearance type	Fresher						
Pape	er Details: Pleas	se select Paper details which y	ou want to appear ( UA	A - University A	ssessment,CA - Col	lege Assessr	ment)	
SN	Paper Code		Paper Name					AM - AT
1	83001 F	Financial Accounting and Audi	ting IX - Financial Acco	unting		Th-U	A[]	
2	83007 F	Financial Accounting and Audi	ng X - Cost Accounting			Th-U	A[]	
3	83013 E	Business Economics VI				Th-U	A[]	
4		Commerce VI				Th-U	A [ ]	
5	83015	Direct and Indirect Taxation Pa	per II			Th-C	A []	
6	83016 E	Export Marketing Paper II				Th-C	A []	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee	Total:						
Pavr	nent Details:	mount Received:	Cc	ollege Receipt N	No. and Date:			
DD N		MICR No:		DD Date:	10. 4.14 2410.	Bank	C:	
	er Preference (Code/Na			1				
	ue Preference (Code/Na							
To, [	Director, Board of Exami	ination and Evaluations / The (	Controller Of Examination	on,			Place:	Vidyavihar
		ent myself for the ensuing exar					D	•
		ade in this application are true, bus and the list of books presc					Date:	
reque	est for any special conce	ession such as change in time	or day fixed for univers	sity Examination	n etc. on religious or	any		
		hat in the event of any informat	ion being found false o	r incorrect, my	candidature is liable	to be		
Canc	elled or rejected.						St	tudent's Signature
Deck	aration by Principal/HOI	D/Chairperson						
respo	onsibility of fulfillment/re	ized by the College staff and bectification of the information. Feording to university rules.						
		<u> </u>						
Place	<b>ə</b> :							
Date								
Date	•		College S	taff 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: Eligibility Status:				Examination form 110083	n No.:	Division/Secti	on: R	Roll No.:	Trakton		
:	2018016400937982		Eligible		III				O M Thaman		
Instru	uction Medium:	•	-			Nationality:	India				
				Student's Perso	onal Informati	on					
Stud	ent's Name: THAKK	AR DRISHTI	MAYUR			Mother's Nar	ne: VAISHAL	.I	Gender: Female		
Nam	e in Vernacular Langua	ge:ठक्कर द्रीष	न्टी मयूर								
Addr	ess: 102 DEVI NIWAS	B P SINGH (	CROSS ROAD, ML	JLUND WEST NEELKA	NTH NAGAF	<u> </u>					
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	State: Maharashtra, PIN:	: 400080						
	ohone no.: 25905829		Mob	pile no: 918655755195			Email : lohar	nastm2@g	mail.com		
	: Mar 08, 2000		tegory: Open		<del>, ' ' '</del>	Handicap: No		T			
Previ	ious Latest Examination	n Details: Sei	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat No:	: 7283629 (Status: Pass)		
	n form appearance type	e: Fresher									
	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA	A - College As	ssessment)			
SN	Paper Code			Paper Name					AM - AT		
1	83001	Financial Acc	counting and Audit	ng IX - Financial Accounting							
2	83007	Financial Acc	counting and Audit						Th-UA[]		
3		Business Ec						Th-UA[]			
4	83014	Commerce V	1					Th-UA[]			
5			direct Taxation Pa	per II				Th-CA[]			
6	83016	Export Marke	eting Paper II					Th-CA[]			
Conv	vocation Fee		Exam Form Late	Fee	Exam Form Super Late Fee E			Examina	tion Fees		
Mark	Statement Fee		Total:								
	D-4-!  A		•	0.1	la a Danaia	No. and Date					
		mount Rece	1		<del></del>	No. and Date:		Danle			
DD N			MICR No:		DD Date:			Bank:			
	er Preference (Code/Na										
	ie Preference (Code/Na			anteniles Of Francis atio	_						
				Controller Of Examinatio				Pla	ce: <b>Vidyavihar</b>		
				nination. I have remitted complete and correct to				Dat	te:		
				ibed for the examination				$\vdash$			
				or day fixed for universition being found false or							
	ncelled or rejected.										
		D/OL :							Student's Signature		
This respo		ized by the C ectification of	College staff and by the information. H	y me. The information pr e/she is regular student					edge. I also undertake the endance and practical		
Place	э:										
<b>-</b>	_										

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:	Eligib	oility Status:	Examination f		Division/Section:	Roll No	.:	Stuff Snah	
:	2018016400937997	E	Eligible							
Instru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informat	on				
Stud	ent's Name: SHAH S	TUTI HARES	3H			Mother's Name: SA	ANJANA SHA	Н	Gender: Female	
Nam	e in Vernacular Langua	ge:शाह स्तुति	हरेश							
Addr	ess: A/13,3RD FLOOR,	HEMRESHA,	,INSIDE GUPTA (	COMPOUND V.P.RC	DAD,MULUND-(	WEST) MUMBAI-80,	MAHARASHI	ΓRA		
City:	MUMBAI, Taluka: Mum	bai, District: N	Mumbai City, State	e: Maharashtra, PIN:	400080					
Tele	ohone no.: 25604376		Mob	ile no: 91916791715	54	Emai	I : STUTISHA	H3613@	GMAIL.COM	
DOB	: Apr 01, 2000	Cate	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examination	Details: Sem	n III(Regular-Rev1	6)	Exam Ever	t: Nov-2019	Seat	: No: 728	33555 (Status: Pass)	
Exan	n form appearance type	: Fresher								
Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - Col								nent)		
SN	Paper Code			Paper Nan	ne			AM - AT		
1	83001 F	inancial Acc	ounting and Audit	ing IX - Financial Acc	counting		Th-U	Th-UA[]		
2	83007 F	inancial Acc	ounting and Audit	ing X - Cost Account	ting	Th-U	۹[]			
3	83013 E	Business Eco	nomics VI					Th-UA[]		
4	83014	Commerce VI	l				Th-U	۹[]		
5	83015 I	Direct and Inc	direct Taxation Pa	per II			Th-CA	۹[]		
6	83016 E	Export Market	ting Paper II					۹[]		
Conv	ocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exar	mination	Fees	
Mark	Statement Fee		Total:							
Dove	cont Dotoile:	mount Receiv	uod:	1	College Receipt	No. and Data:				
DD N			MICR No:		DD Date:	No. and Date.	Bank			
	er Preference (Code/Na		MICK NO.		DD Date.		Dalik	•		
	le Preference (Code/Na									
	Director, Board of Exami		valuations / The C	Controller Of Examina	ation			Diagram	\ // de escriber es	
	uest permission to prese					ad fee for the same	l hereby	Place:	Vidyavihar	
decla	are that all statement ma	ade in this app	plication are true,	complete and correc	t to the best of r	ny knowledge and be	elief. I	Date:		
	gone through the syllat est for any special conc									
	ground. I understand the									
	elled or rejected.		•	-				C.,	udent's Signature	
Dool	aration by Principal/HOI	7/Chairnama						Sil	udent's Signature	
	form is carefully scrutini	-		, mo. The information	n printed in the f	orm is correct to the	hast of my kny	owlodgo	Lalco undortako tho	
	onsibility of fulfillment/re									
cour	se/term work (if any) acc	cording to uni	versity rules.	-						
Place	<del>)</del> :									
Date:				0.11		<b>.</b>	0'			
				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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PRN: Eligibility Status:				Examination for 110085		Division/Section:	Roll No	).:	43	
:	2018016400938006		Eligible						donet	
Instru	uction Medium:	•				Nationality:	India			
				Student's Pe	rsonal Informati	ion				
Stud	ent's Name: DAGLI	SHREY HEM	IAL			Mother's Name: M	EENA		Gender: Male	
Nam	e in Vernacular Langua	age:डगली श्रेय	हेमल							
Addr	ess: 236/6149, Naidu (	Colony Pantna	agar Ghatkopar (E	≣)						
City:	Mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN	N: 400075					
Telep	ohone no.:		Mob	oile no: 91981917930	8	Emai	il : shreydagli7	7@gmail	.com	
DOB	: Apr 02, 2000	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	16)	Exam Even	it: Nov-2019	Sea	t No: 728	3212 (Status: ATKT)	
Exan	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 - Co	llege Assessr	nent)		
SN	Paper Code			Paper Nam	e			AM - AT		
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	ounting		Th-U	A [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounti	ng	Th-U	A [ ]			
3	83013	Business Ec	onomics VI			Th-U	A [ ]			
4	83014	Commerce V	<b>′</b> I			Th-U	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 [ ]		
Conv	ocation Fee	-	Exam Form Late	Fee	ee Exam Form Super Late Fee				Fees	
Mark	Statement Fee		Total:		,					
					1					
Payn	nent Details:	Amount Rece	ived:	C	College Receipt No. and Date:					
DD N	lo:		MICR No:		DD Date:		Bank	Bank:		
Cent	er Preference (Code/N	ame):								
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To, C	Pirector, Board of Exam	nination and E	Evaluations / The C	Controller Of Examina	tion,			Place:	Vidyavihar	
decla	uest permission to pres are that all statement m gone through the sylla	iade in this ap	plication are true,	complete and correct	to the best of n	ny knowledge and be	elief. I	Date:		
	est for any special cond									
	ground. I understand t	that in the eve	ent of any informat	ion being found false	or incorrect, my	candidature is liable	e to be			
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Place	<b>9</b> :									
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Date	:									
				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]

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 form 110086	1 No.:	Division/Section:	Roll No	).:	2 V	
	2018016400938014		Eligible		II				8-K	
nstrı	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: KATIRA	A SIDDHI AT	UL			Mother's Name: G	EETA	(	Gender: Female	
Nam	e in Vernacular Langua	ige:कतिरा सि	ध्दी अतुल							
	ess: 11,1st floor, Sadhr									
City:	Mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400080					
	ohone no.:			ile no: 919967971289		Emai	l : siddhikatira	a@gmai	l.com	
	: Nov 05, 2000		tegory: Open		<del>, , , ,</del>	Handicap: No				
	ious Latest Examination		m II(Regular-Rev1	6)	Exam Even	t: Apr-2019	Sea	t No: 014	41415 (Status: Pass)	
	n form appearance type									
		ise select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			Paper Name				AM - AT		
1	-		<u>-</u>	ing IX - Financial Accou			Th-U	Th-UA[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting			Th-U	A[]		
3	83013	Business Ec	onomics VI			Th-U	Th-UA[]			
4		Commerce \				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 [ ]		
Conv	rocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exa	mination	Fees	
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Pavn	nent Details:	Amount Rece	ived:	Coll	ege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	Bank:		
	er Preference (Code/Na	ame):		l			1			
	ie Preference (Code/Na									
Го, С	Director, Board of Exam	ination and E	Evaluations / The C	controller Of Examination	n,			Place:	Vidyavihar	
				nination. I have remitted				Date:		
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equ	est for any special cond	ession such	as change in time	or day fixed for universit	ty Examination	on etc. on religious of	r any			
	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			
Jano	oned of rejected.							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 kn	owledge	e. 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	
Place	e:									
Date	:									
				College Staff Signature		Seal and Signature of				
							Princ	ipal/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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	PRN:	Eligi	ibility Status:	Examination fo 110087		Division/Section:	Roll No	o.:	Asmeen
:	2018016400938022		Eligible						Almer
nstru	uction Medium:					Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: KHAN	ASMEEN BA	NO MOHD ANIS			Mother's Name: N	agina Banc	) (	Gender: Female
Nam	e in Vernacular Langua	age:खान अि	ह्मन बानो मोहद	अनिस					
	ess: new gautam ngr p								
City:	MUMBAI, Taluka: Kurl	la, District: Mi	umbai Suburban, S	tate: Maharashtra, Pl	N: 400043				
ГеІер	ohone no.:			il : omsaixero	x22@gm	nail.com			
DOB: Aug 01, 2000 Category: Open Physically Handicap: No									
Previ	ous Latest Examinatio	on Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83339 (Status: Pass)
	n form appearance type	e: Fresher							
	r Details: Plea	ase select Pa	per details which y	ou want to appear ( U	IA - University A	Assessment,CA - Co	llege Assessi	ment)	
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1	83001	Financial Ac	counting and Audit	ing IX - Financial Acco	ounting		Th-U	A[]	
2	83007	Financial Ac	counting and Audit	ing X - Cost Accountir	ng X - Cost Accounting				
3	83013	Business Ec	onomics VI				Th-U		
4	83014	Commerce \					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	rocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Rece	ived:	С	ollege Receipt	No. and Date:			
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	e Preference (Code/N								
	Director, Board of Exam		Evaluations / The C	Controller Of Examinat	tion,			Place:	Vidyavihar
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other	ground. I understand								
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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	ibility Status:	Examination for 110088		Division/Section:	Roll No.	i	Anhal	
2	2018016400938037		Eligible						Barchal	
nstru	uction Medium:					Nationality:	India			
				Student's Pers	sonal Informat	ion				
Stude	ent's Name: PANCH	AL SHREYA	ANS JAYANTILAL			Mother's Name: HI	EMLATA		Gender: Male	
lame	e in Vernacular Langua	эge:पांचाळ श्रे	।यांस जयंतीलाल							
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	thane, Taluka: Thane,	District: Than								
	ohone no.:			oile no: 917700091957			il : moharamar	ne11@g	jmail.com	
	: Aug 15, 2000		tegory: Open		<del></del>	y Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Ever	nt: Nov-2019	Seat	: No: 728	83452 (Status: Pass)	
	n form appearance type									
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2				ting X - Cost Accountin	ig	Th-UA				
3		Business Eco				Th-UA				
4		Commerce V					Th-UA			
5			ndirect Taxation Pa	-			Th-CA			
6		Computer sy	stems and Applica	•	<del></del>		<del></del>	A [ ] ;Th-		
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	ie Preference (Code/Na									
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	ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false o	or incorrect, my	y candidature is liable	e to be			
anc	med of rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
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Place	÷:									
)ate:				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			
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S. K. Somaiya College of Arts, Science and Commerce (540)

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PRN: Eligibility Status:			bility Status:	Examination f 11008		Division/Section:	Roll No	o.:	N.R. Patel
	2018016400938045		Eligible						
Instr	uction Medium:	-				Nationality:	India	-	
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: PATEL	NEHAL RAM	1ESH			Mother's Name: JA	AVER	C	Gender: Female
Nam	e in Vernacular Langua	ıge:पटेल नेह	— ल रमेश						
Addr	ress: 2/12 BHAVESHWA	AR NAGAR F	RAJA WADI GHA	TKOPER EAST					
City:	MUMBAI, Taluka: Mum	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN	: 400077				
Tele	phone no.:		Mob	oile no: 91829110805	52	Emai	il : NEHAL@C	GMAIL.C	MC
DOB	3: Jan 19, 2001	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatior	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	ıt No: 728	33721 (Status: ATKT)
Exar	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Par	per details which y	ou want to appear (	UA - University A	Assessment,CA - Col	llege Assessr	ment)	
SN	Paper Code			Paper Nar	ne				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Ac	g IX - Financial Accounting Th g X - Cost Accounting Th				
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	g X - Cost Accounting				
3	83013	Business Eco	onomics VI				Th-U	JA [ ]	
4		Commerce V					Th-U		
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	JA [ ] ;Th-0	CA[]
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Pavr	ment Details:	Amount Recei	ived:		College Receipt I	No. and Date:			
DD N			MICR No:		DD Date:		Bank	 k:	
Cent	ter Preference (Code/Na	ame):			I				
Venu	ue Preference (Code/Na	 ame):							
To, [	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar
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requ	est for any special conc	ession such a	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any		
othe	r ground. I understand t								
canc	elled or rejected.							Stı	udent's Signature
Declaration by Principal/HOD/Chairperson									
resp	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	ectification of	the information. H						
Place	e:						_		
Date: College Staff								and Sign	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.

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

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	PRN:	Eligi	ibility Status:	Examination fo 110090		Division/Section:	Roll No.	).:	A. XI. Gohil.	
:	2018016400938061		Eligible							
Instru	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: GOHIL	. ASMITA NAI	RAN			Mother's Name: HA	ARSHABEN		Gender: Female	
Nam	e in Vernacular Langua	age:GOHIL A	SMITA NARAN							
Addr	ess: 5/ bhagyodaya niw	was bhattwad	i, kishan nagar no	03, thane						
City:	thane, Taluka: Thane,	District: Thar	ne, State: Maharas	htra, PIN: 400604						
Telep	phone no.:		Mob	oile no: 919869639989	9	Emai	il : asmitagohil	l3@gma	ail.com	
DOB	: Nov 05, 2000	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83255 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( U	JA - University A	ssessment,CA - Col	lege Assessn	nent)		
SN	Paper Code			Paper Nam	e			AM - AT		
1	83001	Financial Acc	counting and Audit	ting IX - Financial Acco	ounting		Th-UA	A [ ]		
2	83007	Financial Ac	counting and Audit	ting X - Cost Accounting	ng		Th-UA	A [ ]		
3	83013	Business Eco	onomics VI				Th-U/	Th-UA[]		
4	83014	Commerce V	/I					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	
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	ue Preference (Code/Na	<u> </u>								
	Director, Board of Exam						1	Place:	Vidyavihar	
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reque	est for any special cond	cession such	as change in time	or day fixed for univer	rsity Examinatio	on etc. on religious or	r any			
	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	to be			
Can ic	alled of rejected.							St	udent's Signature	
Decla	aration by Principal/HO	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	ə: 									
Date	:			_ College :	Staff Signature			and Sign		
					Conogo otan oignataro			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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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status:				Examination form 110091	n No.:	Division/Sect	ion: R	Roll No.:	Koupali
2	2018016400938076		Eligible						
Instru	uction Medium:		-			Nationality:	India		•
				Student's Perso	onal Informati	ion			
Stude	ent's Name: KRUPA	LI RAMESH	FATAK			Mother's Na	me: NEETA		Gender: Female
Nam	e in Vernacular Langua	ige:कृपाली रमे	शि फटक						
Addr	ess: 302/310 90feet roa	ad pantnagar	ghatkopar						
City:	mumbai, Taluka: Muml	bai, District: N	Mumbai City, State	: Maharashtra, PIN: 400	0075				
	phone no.:		Mob	pile no: 919699708333			Email : bharr	maldarad@g	gmail.com
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	ous Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat No: 7	7283238 (Status: Pass)
	n form appearance type								
		se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,C	A - College As	ssessment)	
SN	Paper Code			Paper Name					AM - AT
1				ing IX - Financial Accou		Th-UA[]			
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Cent	er Preference (Code/Na	ame):							
	e Preference (Code/Na								
				Controller Of Examinatio				Place	e: <b>Vidyavihar</b>
decla	ire 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 belief. I	) Date	:
				ibed for the examinatior or day fixed for universi					
other	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								
canc	elled or rejected.								Student's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
respo		ectification of	f the information. H	y me. The information pr e/she is regular student					ge. I also undertake the ndance and practical
Place	):								
D-1-									

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 110092	2	Division/Section:	Roll No.	.:	Charm:		
2	2018016400938084		Eligible								
nstrı	uction Medium:	-				Nationality:	India				
				Student's Pe	ersonal Informati	on					
Stude	ent's Name: DARAD	D CHARMI MU	UKESH			Mother's Name: M	EENA		Gender: Female		
Name	e in Vernacular Langua	age:दराडे चार्मी	मुकेश						1		
	ess: 148/4062, VALLAE										
<u> </u>	MUMBAI, Taluka: Mum	nbai, District:									
	phone no.:			oile no: 91887946849	1		il : nitinbhusha	ın13@gı	mail.com		
	: Oct 13, 2000		tegory: Open	Handicap: No							
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	83216 (Status: ATKT)		
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		se select Par	per details which y	ou want to appear ( U		ssessment,CA - Co	ilege Assessm	nent)			
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Place	<b>X</b>						l				
Date:				College Staff Signature		Soal	and Siar	antia of			
				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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Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 110093		Division/Section:	Roll No	.:	Kaiti		
2018016400938092 Eligible							SAS			
nstrı	uction Medium:				Nationality:	India	•			
			Student's Perso	nal Informati	on					
Stud	ent's Name: MONDK	AR ADITI SUNIL			Mother's Name: SH	IWETA	C	Gender: Female		
Nam	e in Vernacular Langua	ge:मोंडकर अदिती सुनील								
Addr	ess: A 101 EKVIRA DAI	RSHAN SECTOR 8A AIROLI N	IAVI MUMBAI							
City:	NAVI MUMBAI, Taluka:	Thane, District: Thane, State:	Maharashtra, PIN: 4007	708						
ГеІер	phone no.:	Mot	ile no: 919619914794		Email	: suniil7@red	diffmail.c	om		
ООВ	: Sep 16, 2000	Category: Open		Physically Handicap: No						
Previ	ious Latest Examination	Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3417 (Status: ATKT)		
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 F	Financial Accounting and Audit	ing IX - Financial Accou	nting		Th-U	A[]			
2	83007 I	Financial Accounting and Audit	ing X - Cost Accounting			Th-U	A[]			
3	83013 E	Business Economics VI			Th-U	A[]				
4	83014	Commerce VI				Th-U	A[]			
5 83015 Direct and Indirect Taxation Paper II Th							-CA[]			
6	83023 I	nvestment Analysis and Portfo	lio Management Paper l	I		Th-C	A[]			
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	amination Fees			
Mark	Statement Fee	Total:								
Davn	nent Details: A	mount Received:	Call	ege Peceint	No. and Date:					
DD N		MICR No:		DD Date:	No. and Date.	Bank				
	er Preference (Code/Na			DD Date.		Dank				
	ue Preference (Code/Na									
	`	nation and Evaluations / The C	Controller Of Examination	 า.			Place:	Vidyavihar		
		ent myself for the ensuing exan			ed fee for the same. I	hereby	li lace.	Viuyaviilai		
decla	are that all statement ma	nde in this application are true,	complete and correct to	the best of n	ny knowledge and be	lief. I	Date:			
		ous and the list of books prescression such as change in time								
other	r ground. I understand th	nat in the event of any informat								
canc	ncelled or rejected. Student's Signature									
Decl	claration 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									
esp	onsibility of fulfillment/re	ctification of the information. H								
cours	se/term work (if any) acc	cording to university rules.								
	_									
Place	<b>e</b> :									
) o ± -	_									

College Staff Signature



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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 110094	1 No.:	Division/Section:	Roll No.	).: <sup>!</sup>	Jameda	
:	2018016400938103		Eligible		.				9	
nstrı	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stude	lent's Name: CHHED	DA SAHIL RA	MJI			Mother's Name: PF	REETI		Gender: Male	
lam	ne in Vernacular Langua	ıge:छेडा साहित	ल रामजी							
ddr	ress: A/802 Lokmanya S	Society Ram	maruti road opp ici	ci bank Thane w						
<u> </u>	Thane, Taluka: Thane,	District: Tha								
	phone no.: 25330322			pile no: 917977059845	no: 917977059845					
	3: Sep 12, 2000		tegory: Open		Physically Handicap: No					
	rious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83200 (Status: Pass)	
exam 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	Ilege Assessn	nent)		
SN	Paper Code			Paper Name	Paper Name				AM - AT	
1	83001 I	Financial Acc	counting and Audit	ting IX - Financial Accou	nting		Th-UA	A[]		
2	83007 I	Financial Acr	counting and Audit	ting X - Cost Accounting			Th-UA	A[]		
3	83013 I	Business Eco	onomics VI			Th-UA	A [ ]			
4	83014	Commerce V	/I				Th-U/	Th-UA[]		
5	83015 I	Direct and In	ndirect Taxation Pa	per II			Th-CA	A [ ]		
6	83016 I	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		<u> </u>		No. and Date:	<del></del>			
)D N			MICR No:		DD Date:		Bank	<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 ibed for the examination	the best of n	ny knowledge and be	elief. I	Date:		
	0 0			or day fixed for universit		11 0				
ther	r ground. Í understand tl			ion being found false or						
anc	celled or rejected.							St	tudent's Signature	
)ecl:	aration by Principal/HOI	D/Chairperso	on						<u> </u>	
This 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 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:									
—				_						
)ate	r.									
			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.

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:	Eliç	gibility Status:	Examination form 110095	n No.:	Division/Section:	Roll No.	:	y125	
2018016400938111		Eligible		III					
nstruction Medium:					Nationality:	India			
			Student's Perso	onal Informati	on				
Student's Name: PAR	AB YASH TUS	SHAR			Mother's Name: SH	IUBHANGI	C	Gender: Male	
Name in Vernacular Lang	Juage:परब यश	श तुषार							
Address: SHREE RAJ LA	XMI PARK B1	003 KHAREGAON	KALWA SHREE RAJ I	AXMI PARK	B1 003 KHAREGAO	N KALWA			
City: MUMBAI, Taluka: Ti	nane, District:	Thane, State: Maha	ırashtra, PIN: 400605						
Telephone no.:		Mot	oile no: 919004288756		Email	I : YASH1591	990@GN	MAIL.COM	
DOB: Sep 15, 2000	Ca	ategory: Open		Physically	Handicap: No				
Previous Latest Examinat	tion Details: Se	em III(Regular-Rev1	16)	Exam Even	nt: Nov-2019	Seat	ι No: 728	33718 (Status: ATKT)	
xam form appearance type: Fresher									
Paper Details:	lease select Pa	aper 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 Ad	ccounting and Audit	ting IX - Financial Accou	unting		Th-UA	A[]		
2 83007	Financial Ad	ccounting and Audit	ting X - Cost Accounting	J		Th-UA	A[]		
3 83013	Business Ed	conomics VI				Th-UA	A[]		
4 83014	Commerce '	VI				Th-UA	A[]		
5 83015	Direct and I	Indirect Taxation Pa	per II			Th-CA	A[]		
6 83016	Export Mark	keting Paper II				Th-CA	A [ ]		
Convocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark Statement Fee		Total:							
	T								
Payment Details:	Amount Rece		Col	<del>,                                     </del>	No. and Date:				
DD No:		MICR No:		DD Date:		Bank	<u>:</u>		
Center Preference (Code	· · · · · · · · · · · · · · · · · · ·								
Venue Preference (Code	•								
To, Director, Board of Exa						1	Place:	Vidyavihar	
I request permission to pr declare that all statement							Date:		
have gone through the sy									
request for any special co	oncession such	h as change in time	or day fixed for universi	ity Examinatio	on etc. on religious or	r any	1		
other ground. I understan cancelled or rejected.	d that in the ev	/ent of any informati	ion being found faise of	incorrect, my	candidature is liable	to be	1		
•	Student's Signature								
Declaration by Principal/H	10D/Chairpers	son							
This form is carefully scru responsibility of fulfillmen course/term work (if any)	nt/rectification o	of the information. H							
Place:									
Nate:									

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.

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	PRN:	Eligi	ibility Status:	Examination for 110096	6	Division/Section:	Roll No	).:	AT Kham	
	2018016400938126		Eligible						A	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	1				
Stude	ent's Name: KHAN	ABUTALIB Z	AFAR			Mother's Name: TA	AUQIRA		Gender: Male	
Name	e in Vernacular Langua	age:खान अब्त	ालीब जफर							
Addr	ess: ROOM NO 4 NEA	AR NURANI M	ASJID KHADI NO	3 RAJIV NGR MOH	ILI VLG SAKINA	AKA MUMBAI				
	Mumbai, Taluka: Kurla	a, District: Mur								
	phone no.:			oile no: 91993089634			il : ridaan98@	gmail.co	om	
	: Jun 15, 1997		tegory: Open			Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83336 (Status: Fail)	
Exam form appearance type: Fresher  Paper 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 - Co	Ilege Assessm	nent)		
SN	Paper Code		A	· · · · · · · · · · · · · · · · · · ·	Paper Name				AM - AT	
1	83001				g IX - Financial Accounting T					
2	83007			ting X - Cost Accounti	ing		Th-U/			
3	83013 83014	Business Eco Commerce V						Th-UA [ ] Th-UA [ ]		
5	83015		* *	nor II			Th-C/			
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_	ocation Fee	Export Marke	Exam Form Late	Foo	Evam Form	Super Late Fee	Th-CA	Mination	Fees	
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VIG.1.	- Claterion 1 CC		10.0							
Payn	nent Details:	Amount Recei	ived:		College Receipt I	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	C.		
Cente	er Preference (Code/N	lame):								
Venu	ue Preference (Code/N	lame):								
	Director, Board of Exam						ı	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 unive	ersity Examinatio	on etc. on religious or	r any			
	r ground. I understand i elled or rejected.	that in the eve	ent of any informate	on being found talse	or incorrect, my	candidature is liable	e to be			
								St	tudent'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	me. The information e/she is regular stude	n printed in the for ent of this Collect	orm is correct to the je and has complete	best of my knowd the required	owledge d attenda	e. I also undertake the ance and practical	
Place	<b>&gt;</b> :									
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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	PRN:	Eligi	ibility Status:	Examination 11009		Division/Section:	Roll No	).:	Dist.	
2	2018016400938134		Eligible						8	
nstrı	uction Medium:	-				Nationality:	India			
				Student's P	ersonal Informati	on				
Stude	ent's Name: JAIN DI	IXITA NIRMA	AL			Mother's Name: Al	NOKHA	(	Gender: Female	
Name	e in Vernacular Langua	ge:dixita								
Addr	ess: Bldg:53, Room no	:-1824 N.G. <i>F</i>	AACHARYA MARC	à, SUBHASH NAG/	AR,					
City:	MUMBAI , Taluka: Kurl	a, District: M	umbai Suburban, S	State: Maharashtra,	PIN: 400071					
Teler	ohone no.:		Mob	oile no: 9175061366	no: 917506136664 Email : Dixujain09112000@gmail.com					
DOB	: Nov 09, 2000	Cat	tegory: Open		Physically Handicap: No					
Previ	ious Latest Examination	າ Details: Ser	m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83684 (Status: Pass)	
Exam form appearance type: Fresher										
Pape	er Details: Pleas	se select Pa	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Na	Paper Name				AM - AT	
1	83001 I	Financial Acr	counting and Audit	ting IX - Financial Ac	counting	Th-UA	A []			
2	83007 F	Financial Acr	counting and Audit	ting X - Cost Accoun	iting	Th-U	A [ ]			
3	83013 E	Business Eco	onomics VI		Т			A[]		
4	83014	Commerce V	/1		1			Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C/	A[]		
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:							
		Amount Recei	T		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	<u> </u>		
	er Preference (Code/Na									
	ie 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 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 conc	ession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
	r ground. I understand the elled or rejected.	nat in the eve	ent of any informati	on being found false	e or incorrect, my	candidature is liable	e to be	1		
Jano	med of rejected.							St	tudent's Signature	
Decla	aration by Principal/HOI	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	»:									
Date:	:			College	o Staff Signature		Seal	and Sign	nature of	
				College	College Staff Signature			-	D/Chairperson	



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	PRN:	Eligi	ibility Status:	Examination fo 110098		Division/Section:	Roll No.		Agine-	
2	2018016400938142		Eligible		.1111111					
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: KINLE	KAR SHREYA	A LAXMAN			Mother's Name: NI	ĒΗΑ		Gender: Female	
Name	e in Vernacular Langua	age:किनळेकर	श्रेया लक्ष्मण							
Addr	ess: A-701,Poonam Ap	partment, Sub	hash Road , Janta	Market Bhandup (Wo	est)					
<u> </u>	Mumbai, Taluka: Kurla	a, District: Mu								
	phone no.:			oile no: 918082443780			il : shreukinlek	:ar139@	gmail.com	
	: Sep 13, 2000		tegory: Reserved (	,	Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Seat	No: 728	83361 (Status: ATKT)	
	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 Assessm	nent)		
SN	Paper Code	<u> </u>		<b>'</b>	Paper Name				AM - AT	
1	83001	Financial Acc	counting and Audit	0				A [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	ng X - Cost Accounting			A [ ]		
3	83013	Business Eco	onomics VI				Th-U <i>f</i>	Th-UA[]		
4	83014	Commerce V	/I				Th-UA	4[]		
5 83015 Direct and Indirect Taxation Paper II The								A [ ]		
6 83023 Investment Analysis and Portfolio Management Paper II Th-CA []										
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Davn	ment Details:	Amount Recei			College Receipt I	No and Date:				
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	er Preference (Code/N		INITOTY IVO.		DD Bate.					
	ue Preference (Code/Na									
	Director, Board of Exam		Evaluations / The C	Controller Of Examina	ition,			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	1 1000.	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. I	Date:		
	gone through the sylla est for any special cond									
other	r ground. I understand t									
cance	elled or rejected.							Stı	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
respo	form is carefully scrutir onsibility of fulfillment/re	rectification of	f the information. H							
	se/term work (if any) ac			- <u>-                                    </u>					·	
Place	a·									
				_			İ			
Date:	:						l			
				College Staff Signature Seal and Signature of						
					comage cram organization			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 110099	9	Division/Section:	Roll No	).:	Basen	
2	2018016400938157		Eligible						1300	
nstrı	uction Medium:	-				Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: BAGH I	PRITAM BIKA	ASH			Mother's Name: M	AYNA		Gender: Male	
Name	e in Vernacular Langua	₃ge:बघ प्रीतम	बिकास						1	
Addr	ess: CHAWL NO 5 RO	OM NO 11 M	ATOSHREE JANK	(I NAGAR MANISHA	NAGAR GATE	NO I KALWA WEST	<u> </u>			
City:	KALWA THANE , Talul	ka: Thane, D	istrict: Thane, Stat	e: Maharashtra, PIN:	400605					
Teler	phone no.:		Mot	oile no: 919594356828	8	Emai	il : pritambagh	04@gm	nail.com	
DOB	: Aug 10, 2000	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m II(Regular-Rev1	ô)	Exam Even	t: Nov-2019	Seat	t No: 719	90145 (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 Acr	counting and Audit	9				A[]		
2	83007	Financial Acr	counting and Audit	ting X - Cost Accounting	ng		Th-U	A[]		
3	83013	Business Eco	onomics VI				Th-UA	A[]		
4	83014	Commerce V	/1				Th-UA	A [ ]		
5 83015 Direct and Indirect Taxation Paper II								A[]		
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:	Amount Recei		<u></u>	College Receipt I	No and Date:				
DD N			MICR No:		DD Date:	10. and Date.	Bank			
	er Preference (Code/Na		INICIA NO.		DD Date.		Dank			
	ue Preference (Code/Na									
	Director, Board of Exam	•	 Evaluations / The C	Controller Of Examina	tion.			Place:	Vidvovibor	
	uest permission to pres					ed fee for the same.	I hereby	Piace.	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 conc							$\vdash$		
other	r ground. I understand t									
cance	elled or rejected.						I	St	tudent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on					<u>.                                    </u>		
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	<del>)</del> :									
				_			1			
Date:				College	Ctoff Cianatura		Soal	and Ciar	nature 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 forr 110100	n No.:	Division/Section:	Roll No	ı.:	Shagye	
	2018016400938165	Eligible							
nstrı	uction Medium:	•			Nationality:	India			
			Student's Pers	onal Informati	on				
Stud	ent's Name: PANDE	Y BHAGYASHRI SHRIRAM			Mother's Name: VE	EENA	C	Gender: Female	
Nam	e in Vernacular Langua	ge:Pandey bhagyashri shriram	वीणा						
٩ddr	ess: DIN BANDHU NA	GAR SALT PAN RAOD NEAR I	HUSAINIYA MASJID W	ADALA EAST	-				
City:	MUMBAI, Taluka: Mun	nbai, District: Mumbai City, State	e: Maharashtra, PIN: 40	00037					
Tele	ohone no.:	Mob	ile no: 919136595857		Emai	l : bhagyashri	pandey0	070301@gmail.com	
DOB	: Mar 07, 2001	Category: Open		Physically	Handicap: No				
⊃rev	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33454 (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 Accounting and Audit	ng IX - Financial Accounting				A [ ]		
2	83007	Financial Accounting and Audit	ng X - Cost Accounting			Th-U	A [ ]		
3	83013	Business Economics VI				Th-U	A [ ]		
4	83014	Commerce VI		Т			A [ ]		
5	83015	Direct and Indirect Taxation Pa	per 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	Exa	mination	Fees	
Mark	Statement Fee	Total:							
Davr	nent Details:	mount Received:	Col	llege Receipt I	No. and Date:				
DD N		MICR No:	001	DD Date:	vo. and Date.	Bank	,.		
	er Preference (Code/N			DD Date.			••		
	ie 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.	I 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.						Stu	udent's Signature	
Deck	aration by Principal/HO	D/Chairperson							
		ized by the College staff and by							
		ectification of the information. He cording to university rules.	e/she is regular studen	t of this Colleg	e and has complete	d the required	d attenda	ance and practical	
cours	serteilli work (ii aliy) at	cording to drilversity rules.	_						
Place	<b>-</b> .								
	··								
Date									
- 410	•		College St	aff Signature		Seal	and Sign	nature of	
			conogo ciam orginataro			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 for 110101	1	Division/Section:	Roll No.	).:	they want	
2	2018016400938173		Eligible			1		!	All se	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: JOSHI	BHAKTI SHA	AILESH			Mother's Name: JA	YSHREE		Gender: Female	
	e in Vernacular Langua									
Addr	ess: B/107 NAV RADH	IESHYAM DI	R RP ROAD DOM	3IVLI [EAST]						
<u> </u>	mumbai, Taluka: Than	ıe, District: Th								
	phone no.:		I	oile no: 91749875272			il : bhaktisjosh	ıi2542@	gmail.com	
	: Apr 25, 2000		tegory: Open		<del></del>	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16)									90672 (Status: ATKT)	
	n form appearance type									
Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Asses										
SN	Paper Code	<u> </u>		'	Paper Name				AM - AT	
1				ting IX - Financial Acc		Th-U/				
2		+		ing X - Cost Accounti				A[]		
3		Business Eco						Th-UA []		
4		Commerce V					Th-U/			
5		+	ndirect Taxation Pa	per II			Th-C/			
6		Export Marke	eting Paper II				Th-C/			
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	eived:		College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:	10.0	Bank	<u></u>		
	er Preference (Code/Na		1							
	ue Preference (Code/Na									
	Director, Board of Exam		Evaluations / The C	Controller Of Examina	ation,			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 unive	ersity Examinatio	on etc. on religious or	r any			
other	r ground. I understand t elled or rejected.									
Canc	elled or rejected.							St	tudent's Signature	
Deck	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	<b>3</b> :									
Date:							l			
Du.c.				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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	PRN:	Eligi	ibility Status:	Examination form 110102	n No.:	Division/Section:	Roll No.	).:	Maria.	
2	2018016400938181	P	Provisional		l III			!		
Instru	uction Medium:	_				Nationality:	India			
				Student's Perso	onal Informati	on	1			
Stude	ent's Name: POON	AWALA MAR	RIA ABBAS ABDUL	HUSSAIN		Mother's Name: MI	JNIRA		Gender: Female	
Nam	e in Vernacular Langua	age:पूनावाला ३	मारिया अब्बास अब्द्	लहुसेन						
Addr	ess: Room no 3 secon	d floor Aziz n	nanizil Barafwala (	Chawl Vartak road near	ansari chowk	kalyan West				
	Kalyan, Taluka: Kalyar	n, District: Th								
	ohone no.:			oile no: 917977019152	<u> </u>		l : mariapoona	awala51	@gmail.com	
	: Apr 05, 2000		tegory: Open		Physically	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	ι No: 728	83489 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape		ase select Par	per details which y	ou want to appear ( UA	- University A	ssessment,CA - Col	lege Assessm	nent)		
SN	Paper Code	<u> </u>		Paper Name					AM - AT	
1				ing IX - Financial Accou			Th-UA	.,		
2				ing X - Cost Accounting	1		Th-UA			
3 83013 Business Economics VI							Th-UA[]			
4 83014 Commerce VI Th							Th-U/	Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-								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:							
Dov.n	nent Details:	Amount Recei	d.	Cal	Isaa Pagaint i	No. and Date:				
DD N			MICR No:		DD Date:	No. and Date.	Bank			
	er Preference (Code/N		IVIICH NO.		DD Date.		Dank			
	er Preference (Code/Na									
	,	•	Evaluations / The (	Controller Of Examination	<u> </u>			T <sub>21</sub>		
				nination. I have remitted		ad foo for the same	l haraby	Place:	Vidyavihar	
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:		
				ibed for the examination				$\vdash$		
other	ground. I understand t			or day fixed for universit ion being found false or						
cance	elled or rejected.		,	J 11				<sub>c</sub> ,	danatura	
Caal		\\Chairners						Su	udent's Signature	
	aration by Principal/HO	-		The information n	details the fo	and the l	of mukn	lodge	I also undartaka tha	
				y me. The information pr le/she is regular student						
	se/term work (if any) ac			•	-	,	•		,	
				<del></del>						
Place	<b>)</b> :									
				_						
Date:	•				aff Signature				nature of	



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

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	PRN:	Eligil	bility Status:	Examination f		Division/Section:	Roll No	).:	×
	2018016400938196		Eligible						
Instr	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	lent's Name: ALAM N	MOHD ALI H/	ASSAN FIROZ			Mother's Name: NA	ASIM BANU	C	Gender: Male
Nam	ne in Vernacular Langua	ıge:आलं मोहद	🕻 अली हसन फिरोझ						
Addr	ress: SHAHAJI NAGAR	, KHADI MAC	CHINE LATIF CHA	WL R C MARG					
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	tate: Maharashtra, F	PIN: 400074				
Tele	phone no.:		Mob	oile no: 91797702234	10	Emai	l : farzanhasa	ın122@g	gmail.com
DOB	3: Feb 14, 2001	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33138 (Status: ATKT)
Exar	n form appearance type	e: Fresher							
Pape	er Details: Plea	ise select Par	per details which y	ou want to appear ( l	UA - University A	Assessment,CA - Col	llege Assessn	nent)	
SN	Paper Code			Paper Nan	ne				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	ng IX - Financial Accounting Th-				
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	iing		Th-U	A [ ]	
3	83013	Business Eco	onomics VI				Th-U	A []	
4 83014 Commerce VI T							Th-U	A []	
5 83015 Direct and Indirect Taxation Paper II Th-C								A []	
6	83029	Elements of (	Operational Resea	rch Paper II			Th-C/	A []	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Pavr	ment Details:	Amount Recei	ived.		College Receipt I	 No. and Date:			
DD N			MICR No:		DD Date:	Tto: dila Bato.	Bank		
	ter Preference (Code/Na							••	
	ue Preference (Code/Na								
	Director, Board of Exam	•	valuations / The C	Controller Of Examina	ation,			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	l idoo.	viayaviilai
	are that all statement managers through the sulle							Date:	
	e gone through the syllal est for any special cond								
othe	r ground. I understand t								
cancelled or rejected. Student's Signature							udent'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	e:								
Date:  College Staff Signature  Seal and Signature of Principal/HOD/Chairperson									



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	•		Consideration form	. Nie i						
	PRN:	Eligibility Status:	Examination form 110104		Division/Section:	Roll No.	:	Bhavik		
	2018016400938207	Eligible								
Instr	uction Medium:				Nationality:	India				
		_	Student's Perso	onal Information	on					
Stud	ent's Name: PANCH.	AL BHAVIK DINESH			Mother's Name: SI	HARDA	C	Gender: Male		
Nam	e in Vernacular Langua	ge:पांचाळ भाविक दिनेश								
Addr	ess: own house room no	2 shivnagari mohone								
City:	mohone, Taluka: Kalya	n, District: Thane, State: Mahar	ashtra, PIN: 421102							
Tele	phone no.:	Mobi	le no: 917977459493		Emai	l : bhavik2018 <sub>l</sub>	panchal	@gmail.com		
DOB	: May 21, 2000	Category: Open		Physically	Handicap: No					
Prev	ious Latest Examination	Details: Sem III(Regular-Rev1	6)	Exam Event	t: Nov-2019	Seat	No: 728	33448 (Status: Pass)		
Exar	n form appearance type									
Pape	er Details: Pleas	se select Paper details which yo	ou want to appear ( UA	- University A	ssessment,CA - Co	llege Assessm	ent)			
SN	Paper Code		Paper Name					AM - AT		
1	83001 F	inancial Accounting and Auditi	ng IX - Financial Accounting				\[]			
2	83007 F	inancial Accounting and Auditi	ng X - Cost Accounting			Th-UA	\[]			
3	83013 E	Business Economics VI				Th-UA	\[]			
4	83014	Commerce VI					\[]			
5 83015 Direct and Indirect Taxation Paper II Th-								h-CA[]		
6	83016 E	Export Marketing Paper II				Th-CA	١[]			
Conv	ocation Fee	Exam Form Late F	ee	Exam Form S	Super Late Fee	Exam	nination	Fees		
Mark	Statement Fee	Total:								
Dove	ment Deteiler	mount Descived:	Coll	laga Dagaint N	No. and Data:					
DD N		mount Received: MICR No:	Coll	DD Date:	No. and Date:	Bank:				
	er Preference (Code/Na			DD Date.		Dalik.				
	ue Preference (Code/Na									
_	· · · · · · · · · · · · · · · · · · ·	nation and Evaluations / The C	ontroller Of Examination	n		I	Place:	Viel roy ile ou		
		ent myself for the ensuing exam			ed fee for the same		Place.	Vidyavihar		
decla	are that all statement ma	de in this application are true, o	complete and correct to	the best of m	y knowledge and be	elief. I	Date:			
		ous and the list of books prescri								
othe	r ground. I understand th	at in the event of any information	on being found false or	incorrect, my	candidature is liable	e to be				
cano	elled or rejected.						Stı	udent's Signature		
Decl	Declaration by Principal/HOD/Chairperson									
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	:									
			College Staff Signature					ature of D/Chairperson		



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	PRN:	Eligi	bility Status:	Examination for 110105		Division/Section:	Roll No	u:	mercut 8.	
	2018016400938215		Eligible						00	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	sonal Informati	on				
Stud	ent's Name: BACCH	HE SUSHANT	Γ GANPAT			Mother's Name: K	ALPANA	(	Gender: Male	
Nam	e in Vernacular Langua	age:बच्चे सुशां	त गणपत							
Addr	ess: jai bajrang chawl o	dattmandir kra	anti nagar bail baz	ar wadia estate						
City:	mumbai, Taluka: Kurla	, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN	: 400070					
Tele	ohone no.:		Mot	ile no: 919867904168		Emai	l : sushantbac	che200	0@gmail.com	
DOB	: Jan 22, 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	33150 (Status: ATKT)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear ( U/	A - University A	ssessment,CA - Co	llege Assessn	Assessment)		
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 Accountin	g		Th-U	A[]		
3	83013	Business Ec	onomics VI				Th-U	Th-UA[]		
4	83014	Commerce \	/I				Th-UA[]			
5	83015	Direct and In	direct Taxation Pa				Th-C	A [ ]		
6	83023	Investment A	and Portfo	io Management Paper II			Th-CA	A[]		
Conv	ocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exar	mination	Fees	
Mark	Statement Fee		Total:							
Davr	nent Details:	Amount Rece	ived:		ollege Receipt	No. and Date:				
DD N		anount rece	MICR No:	100	DD Date:	No. and Date.	Bank			
	er Preference (Code/N	ame).	IMIOTOTO.		DD Date.		Bullik			
	ue Preference (Code/Na									
	Director, Board of Exam		Evaluations / The C	controller Of Examinati	on.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same	l hereby	riace.	viuyaviilai	
decla	are that all statement m	ade 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									
othe	ground. I understand t									
canc	elled or rejected.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on .						audini di diginatan	
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	e:									
				_						
Date:										
				College S	taff Signature				nature of D/Chairperson	



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Application Form for Examination of Summer Session 2021 event.

Examination form No.:

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	PRN:	Eligi	bility Status:	Examination form	m No.:	Division/Section:	Roll No	.:	schender	
	2018016400938223	Р	rovisional						Mahendra	
nstrı	uction Medium:	·				Nationality:	India	•		
				Student's Pers	onal Informati	on				
Stud	ent's Name: PATEL	. MAHENDRA	KARMAN			Mother's Name: S	HYMA	C	Gender: Male	
Nam	e in Vernacular Langua	age:पटेल महेंद्र	, कर्मण							
٩ddr	ess: D-203,ATHARVA	PARK, SHIV	'AI NAGAR, THAN	E(w)						
City:	MUMBAI, Taluka: Tha	ne, District: T	hane, State: Maha	rashtra, PIN: 400606						
Tele	ohone no.:		Mob	ile no: 919766068101		Ema	il : paswans26	66@gma	il.com	
OOB	: Apr 15, 2000	Cat	tegory: Open		Physically	Handicap: No				
⊃rev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	3471 (Status: ATKT)	
Exan	n form appearance typ	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	sessment)		
SN	Paper Code			Paper Name	!				AM - AT	
1	•			ing IX - Financial Acco	unting		Th-U	Th-UA[]		
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	<u>/I</u>				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	rocation Fee		Exam Form Late	Fee Exam Form Super Late Fee			Exa	mination	Fees	
Mark	Statement Fee		Total:							
			<u> </u>			N 15 :				
_		Amount Rece		Co	Ilege Receipt	No. and Date:	ln			
OD N			MICR No:		DD Date:		Bank			
	er Preference (Code/N									
	e 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 examinatio	o the best of n	ny knowledge and be	elief. I	Date:		
				or day fixed for univers						
		that in the eve	ent of any informati	ion being found false or	r incorrect, my	candidature is liable	e to be			
canc	elled or rejected.							Stu	udent's Signature	
Deck	aration by Principal/HC	D/Chairperso	on					•		
resp		ectification of	the information. H	y me. The information pe/she is regular studen						
Place	e:									
				_						
Date	:									
				College St	taff 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 fo 110107	7	Division/Section:	Roll No.	).:	To short
	2018016400938246	l	Eligible		, <b>      </b>				the sure
nstrı	uction Medium:					Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: SHAH I	HESHANT KI	IRTI			Mother's Name: Sh	HOBHANA		Gender: Male
Name	e in Vernacular Langua	age:शाह हेशांत	ा कीर्ती						
	ess: 08/A, SUNETRA C								
<u> </u>	DOMBIVLI, Taluka: Ka	alyan, District							
	phone no.:			pile no: 919320988790			il : shobhanasl	hah00@	)gmail.com
	: Jun 06, 2000		tegory: Open		<del></del>	Handicap: No			
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83545 (Status: Pass)
	n form appearance type								
		ase select Par	per details which y	ou want to appear ( U		ssessment,CA - Col	lege Assessm	nent)	
SN	Paper Code	<b></b>		Paper Nam					AM - AT
1		-		ing IX - Financial Acc			Th-UA	.,	
2				ng X - Cost Accounting			Th-UA		
3		Business Eco					Th-UA		
4		Commerce V						A[]	
5			ndirect Taxation Pa	per II	er II			A[]	
6		Export Marke	eting Paper II				Th-CA		
	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
Payn	nent Details:	Amount Recei	eived:	c	College Receipt I	No. and Date:			
DD N			MICR No:		DD Date:		Bank	<del></del>	
Cent	er Preference (Code/Na	lame):							
	ue Preference (Code/Na								
To, C	Director, Board of Exam	nination and F	Evaluations / The C	ontroller Of Examina	tion,			Place:	Vidyavihar
	uest permission to pres								
	are that all statement mage							Date:	
reque	est for any special cond	cession such	as change in time	or day fixed for univer	rsity Examinatio	on etc. on religious or	r any		
other	r ground. I understand t elled or rejected.								
Carro	alled of rejected.						!	St	udent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
respo	is form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the sponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical urse/term work (if any) according to university rules.								
Place	 e:								
				_			I		
Date:	:								
				College 5	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:	Eligi	bility Status:	110108	I INO	Division/Section:	Roll No	.:	Aux.	
	2018016400938277		Eligible		III				Color	
Instr	uction Medium:	<u> </u>				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: PANDI	EY JAYA LAL	JI			Mother's Name: N	IRMALA	(	Gender: Female	
Nam	e in Vernacular Langua	age:पांडेय जया	। लालजी							
Addr	ess: Row House - 3, K	asturi Garden	, Plot-25 Sector-8,	Airoli,						
City:	Navi Mumbai, Taluka:	Thane, Distri	ct: Thane, State: M	laharashtra, PIN: 40070	)8					
Tele	ohone no.:		Mob	ile no: 919664760335		Emai	il : laljipandey.	lic@gma	ail.com	
DOB	: Jul 26, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33455 (Status: Pass)	
Exar	n form appearance typ	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessn	ssessment)		
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		Th-U	۹[]			
3	83013	Business Eco	onomics VI			Th-U	۹[]			
4	83014	Commerce V	<b>/</b> 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[]		
Con	ocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Recei	ived:	Coll	lege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	 Bank:		
	er Preference (Code/N	lame):								
	ie Preference (Code/N									
	,		Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
				nination. I have remitted				<b>_</b>	,	
				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 o	r any			
		that in the eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
canc	elled or rejected.							St	udent's Signature	
Decl	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 responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical									
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2410	•			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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'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination fo 110109		Division/Section:	Roll No.	:	2 200°	
	2018016400938285		Eligible						2%	
Instru	uction Medium:					Nationality:	India			
				Student's Per	sonal Informati	on				
Stud	ent's Name: UTEKA	R SNEHA D	ATTARAM			Mother's Name: D	EEPALI	(	Gender: Female	
Nam	e in Vernacular Langua	ge:उतेकर स्ने	हा दत्ताराम							
	ess: st road opp akbar									
	mumbai, Taluka: Kurla	, District: Mui	mbai Suburban, St	ate: Maharashtra, PIN	l: 400074					
	ohone no.:		Mob	ile no: 919892492340	)	Emai	l : utekars329	@Gmai	l.com	
	: Jan 28, 2001		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283762 (Status: Pass)					
	n form appearance type									
_		se select Pa	per details which y	ou want to appear ( U		ssessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Nam				AM - AT		
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2				ing X - Cost Accounting				<b>\[]</b>		
3		Business Ec					Th-UA			
4		Commerce V					Th-UA			
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6		Computer sy	stems and Applica				<del>'</del> '	\ [ ] ;Th-		
	vocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exan	nination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	mount Rece	ived:	С	ollege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank:			
Cent	er Preference (Code/Na	ame):			•					
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To, E	Director, Board of Exam	ination and E	valuations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres								.,	
	are that all statement magene through the sylla							Date:		
	est for any special cond									
	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			
Caric	elled of rejected.							St	udent's Signature	
Declaration by Principal/HOD/Chairperson										
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.									
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Place	e:									
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Jaio	•			College Staff Signature			Seal and Signature of 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 110110	No.:	Division/Section:	Roll No	.:	and Muse	
	2018016400938293		Eligible						Sur live	
nstr	uction Medium:					Nationality:	India	-		
				Student's Perso	nal Informati	on				
Stud	ent's Name: KHUMS	E MANSI RA	AHUL			Mother's Name: F	REVATI	C	Gender: Female	
Nam	e in Vernacular Langua	ge:KHUMSE	MANSI RAHUL			•		·		
Addı	ess: 1601-VITHIKA B D	osti vihar VA	ARTAK NAGAR							
City:	Thane, Taluka: Thane,	District: Tha	ne, State: Maharas	shtra, PIN: 400601						
ГеІе	phone no.:		Mob	ile no: 918454959888		Ema	nil : mansikhum	nse1402(	@gmail.com	
DOE	: Feb 14, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatior	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33360 (Status: ATKT)	
	n form appearance type	: Fresher								
Pap€	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	ollege Assessn	, , , , , , , , , , , , , , , , , , ,		
SN	Paper Code			Paper Name				AM - AT		
1	83001	Financial Ac	counting and Audit	ing IX - Financial Accou	nting	Th-U	۹[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting		Th-U/	٩[]			
3	83013	Business Ec	onomics VI			Th-U/	٩[]			
4	83014	Commerce V	/1				Th-U/	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C/	٩[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U/	۲ [];Th-۱	CA[]	
Con	ocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exar	mination	Fees	
Mark	Statement Fee		Total:							
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		mount Rece	T			No. and Date:	Donle			
1 DC		\	MICR No:		DD Date:		Bank	. <u>.</u>		
	er Preference (Code/Na									
	ue Preference (Code/Na		Trakvetiens / The C	entreller Of Eveninetics	_					
				ontroller Of Examination			I la a vala	Place:	Vidyavihar	
decla	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 b	elief. I	Date:		
				ibed for the examination or day fixed for universit						
othe	r ground. I understand tl			on being found false or						
canc	elled or rejected.							Stu	udent's Signature	
Decl	aration by Principal/HO	D/Chairnerso	on					0	adoni o oignataro	
This resp	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical purse/term work (if any) according to university rules.									
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				_						
Date	:			Outless Ole (Const. or			Seal and Signature of			
				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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	PRN:	Eligi	ibility Status:	Examination form 110111	n No.:	Division/Section:	Roll No.	.: '	(Wishoot	
:	2018016400938304		Eligible		III				(NILSTONS	
nstrı	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stude	ent's Name: KALEK	(AR NISHAN	Γ GAJANAN			Mother's Name: M	ALTI		Gender: Male	
Nam	e in Vernacular Langua	₃ge:कालेकर नि	नेशांत गजानन							
Addr	ess: NEAR BAVKER A	LI, GANPAT	DUKAL HOUSE, T	TROMBAY KOLIWADA						
		ı, District: Mu	mbai Suburban, St	tate: Maharashtra, PIN: 4	400088					
	ohone no.:			pile no: 918433879322	1	Emai	il : nishantkalel	kar11@	)gmail.com	
	: Dec 06, 2000		tegory: Reserved (	,	<del>, ' ' '</del>	Handicap: No				
	ious Latest Examinatior		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	. No: 728	83694 (Status: Pass)	
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		ase select Par	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	Ilege Assessm	nent)		
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1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting		Th-UA	۹[]		
2	83007	Financial Aco	counting and Audit	ing X - Cost Accounting	l	Th-UA	۹[]			
3	83013	Business Eco	onomics VI			Th-UA	Th-UA[]			
4	83014	Commerce V	/I				Th-UA	۹[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	4[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U <i>F</i>	A [ ] ;Th-	-CA [ ]	
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Mark	Statement Fee		Total:							
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	ue Preference (Code/Na			Controller Of Examination				<u>.                                    </u>		
						ad foo for the came		Place:	Vidyavihar	
decla	are that all statement ma	nade in this ap	pplication 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						
other	ground. I understand t			ion being found false or						
canc	elled or rejected.							St	tudent's Signature	
Decl	aration by Principal/HO	D/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 burse/term work (if any) according to university rules.									
Place	<u> </u>									
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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.

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	PRN:	Eligi	bility Status:	Examination form	n No.:	Division/Section:	Roll N	0.:	4 1	
;	2018016400938312		Eligible		III				Ankel	
Instru	uction Medium:	-				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: SHIRKA	R ANIKET [	OILIP			Mother's Name: G	EETA		Gender: Male	
Nam	e in Vernacular Langua	ge:अनिकेत								
Addr	ess: 402/A WING BING	GO PLAZA B	LDG NO. 2 SHRE	E KHANDE WADI						
City:	DOMIVLI, Taluka: Kaly	an, District:	Γhane, State: Mah	arashtra, PIN: 421201						
Tele	ohone no.:		Mot	ile no: 917715026041		Emai	l : aniketshir	kar1712(	@hotmail.com	
	: Dec 17, 2000		tegory: Open		Physically	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	at No: 72	83749 (Status: Fail)	
	n form appearance type									
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2				ing X - Cost Accounting			JA [ ]			
3		Business Ec					Th-UA[]			
4		Commerce V						JA [ ]		
5			direct Taxation Pa	per II				CA []		
6		Export Marke	eting Paper II	_				CA[]	_	
	rocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Exa	aminatior	n Fees	
Mark	Statement Fee		Total:							
Payr	nent Details:	mount Rece	ived:	Col	lege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Ban	ank:		
Cent	er Preference (Code/Na	ame):					•			
Venu	ie Preference (Code/Na	ıme):								
				Controller Of Examination				Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
have	gone through the syllal	bus and the I	ist of books prescr	ibed for the examination	n for which I a	m appearing. I shall	not			
requ othe	est for any special conc raround. I understand t	ession sucn hat in the eve	as cnange in time ent of anv informat	or day fixed for universi ion being found false or	ty Examinatio incorrect. mv	on etc. on religious of candidature is liable	r any e to be			
	elled or rejected.				,				tudantla Cianatura	
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	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical									
cour	se/term work (if any) ac	cording to ur	niversity rules.	-						
Dles	\									
Place	<del>5</del> .									
Dete										
Date			College Staff Signature			Seal and Signature of				
				Conege Stan Olynature			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	bility Status:	Examination 1101		Division/Section:	Roll No.	:	$\mathcal{L}$	
	2018016400938327		Eligible						Poüti	
Instru	uction Medium:	•				Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: SHUKL	A PRITI CHA	NDRIKA PRASAL	)		Mother's Name: KI	JSUM	(	Gender: Female	
Nam	e in Vernacular Langua	age:शुक्ला प्रीत	ी चंद्रिका प्रसाद							
Addr	ess: 304, A-9 PAVANI	PUTRA RESI	DENCY KALHER							
City:	KALHER , Taluka: Bhi	wandi, Distric	t: Thane, State: M	aharashtra, PIN: 42	1302					
Tele	ohone no.:		Mob	ile no: 9186552979	74	Emai	l : pritishukla2	80@gm	ail.com	
DOB	: May 18, 2001	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: 728	33600 (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	Assessment,CA - Co	llege Assessm	nent)		
SN	Paper Code			Paper Na	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 Accoun	iting		Th-UA	A[]		
3	83013	Business Ec	onomics VI				Th-UA	A[]		
4	83014	Commerce \	<b>′</b> I				Th-UA	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	A[]		
6	83029	Elements of	Operational Resea	rch Paper II			Th-CA	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	nination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Rece	ived:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/N	ame):	I		l					
Venu	ie Preference (Code/N	ame):								
To, C	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examin	ation,			Place:	Vidyavihar	
	uest permission to pres are that all statement m							Date:		
have	gone through the sylla	bus and the I	ist of books prescr	bed for the examina	ation for which I a	m appearing. I shall	not			
	est for any special cond ground. I understand									
	elled or rejected.		one or any imprinat	orr boiling round rails	o or moorroot, my	carraractar o lo habit	, 10 00			
								St	udent's Signature	
	aration by Principal/HC	=		<b>-</b> 1 . 6						
resp	form is carefully scrutir onsibility of fulfillment/r	ectification of	the information. H							
cour	se/term work (if any) ac	ccording to ur	niversity rules.							
Place	<u></u>									
	-			_						
Date:										
Date.				College Staff Signature Seal and Signature of						
					Principal/HOE		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: Eligibility Status:			Examination for 110114		Division/Section:	Roll No	::	Pengatar		
	2018016400938335		Eligible						1 Hites	
Instr	uction Medium:	<u> </u>				Nationality:	India	<u>'</u>		
				Student's Per	sonal Informati	on				
Stud	ent's Name: PEGAT	TAR HITESH	BABUBHAI			Mother's Name: V	ANDANA	(	Gender: Male	
Nam	e in Vernacular Langua	age:पेंगताई हि	तेश बाबुभाई							
Addr	ess: naik nagar agra ro	ad sion								
City:	mumbai, Taluka: Mum	bai, District: N	/lumbai City, State	: Maharashtra, PIN: 40	00022					
Tele	ohone no.:		Mob	ile no: 917045598209		Emai	l : indiantechr	niques7@	@gmail.com	
DOB	: Apr 23, 1999	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Ser	n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33724 (Status: ATKT)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	oer details which y	ou want to appear (U	A - University A	ssessment,CA - Co	llege Assessn	Assessment)		
SN	Paper Code			Paper Name				AM - AT		
1	83001	Financial Acc	counting and Audit	ng IX - Financial Acco	ounting		Th-U	۹[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting				۹[]		
3	83013	Business Eco	onomics VI				Th-U/	۹[]		
4 83014 Commerce VI							Th-UA[]			
5	83015	Direct and In	direct Taxation Pa	oer II			Th-C/	۹[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U	4 [ ] ;Th-	CA[]	
Conv	ocation Fee		Exam Form Late	Fee Exam Form Super Late Fee			Exar	mination	Fees	
Mark	Statement Fee		Total:							
Dovr	nent Details:	Amount Recei	wod:	Ic	ollege Receipt	No. and Data:				
DD N			MICR No:		DD Date:	No. and Date.	Bank			
	er Preference (Code/N		WICK NO.		DD Date.		Dank			
	ie Preference (Code/N									
	Director, Board of Exam		valuations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	l lacc.	Vidyaviilai	
decla	are that all statement m	ade in this ap	plication 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									
canc	elled or rejected.							St	udent's Signature	
Decl	aration by Principal/HC	D/Chairperso	on .						and a signature	
This	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									
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular stude	nt of this Collec	ge and has complete	d the required	d attenda	ance and practical	
Cour	serteriii work (ii ariy) at	cording to di	iversity rules.							
Place	e:									
				_						
Date:										
				College Staff Signature					nature of	
							Princi	pai/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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Examination form No.:

Disciple 16



	PRN:	Eligi	ibility Status:	110115	II NO	Division/Section:	Roll No.	.:	H3 +3+	
2	2018016400938351		Eligible		l III			-	<del></del>	
Instru	uction Medium:					Nationality:	India	-		
				Student's Perso	onal Informati	on				
Stude	ent's Name: JAIN HI	IITIT SANJAY	,			Mother's Name: RE	EKHA	Ge	ender: Male	
Name	e in Vernacular Langua	age:जैन हितीत	1 संजय 							
Addr	ess: 1803 balaji height	gavdevi road	bhandup west mu	mbai 400078						
City:	mumbai, Taluka: Than	e, District: Th	ane, State: Mahar	ashtra, PIN: 400078						
Teler	phone no.: 25157078		Mob	oile no: 919768575313		Email	l : hititjain1@g	mail.comپ		
DOB	: Jul 03, 2000	Cat	tegory: Open		Physically	Handicap: No				
	ious Latest Examinatior		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	No: 72832	290 (Status: Pass)	
	n form appearance type	e: Fresher								
<del>-</del>	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessm	sessment)		
SN	Paper Code	<b></b>		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	l	Th-UA				
3	83013	Business Eco	onomics VI			Th-UA	۹[]			
4	83014	Commerce V	/1				Th-UA	۹[]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	۹[]		
6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th-CA	۱ [ ]		
Conv	vocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee				ees	
Mark	Statement Fee		Total:							
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			MICR No:		DD Date:		Bank:	<u>:</u>		
	er Preference (Code/Na									
	ue Preference (Code/Na	-						<u></u>		
				Controller Of Examination mination. I have remitted		ad foo for the same		Place:	Vidyavihar	
decla	are that all statement ma	nade in this ap	pplication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
				ibed for the examination or day fixed for universit						
other	r ground. I understand t			ion being found false or				1		
cance	elled or rejected.							Stud	lent's Signature	
Deck	aration by Principal/HO	nD/Chairpers							ent a dignatara	
		-		y me. The information pr	rinted in the f	orm is correct to the	hest of mv knr	owledae. I	also 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	<b>3</b> :									
Date:				College Staff Signature			Seal and Signature of			
				College Staff Signature					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	m No.:	Division/Section:	Roll No	).:	Manan.S
	2018016400938366		Eligible		III				
Instru	uction Medium:	<del>.</del>				Nationality:	India		
				Student's Pers	onal Informati	on			
Stud	ent's Name: SHAH I	MANAN VIKA	ıs			Mother's Name: Cl	HAITALI	(	Gender: Male
Nam	e in Vernacular Langua	age:शाह मन	न विकास						
Addr	ess: 301,Royal touch A	/1,A/2 yogi h	ills Near swapna n	agri					
City:	Mulund, Taluka: Mumb	oai, District: M	lumbai City, State:	Maharashtra, PIN: 400	080				
Tele	ohone no.:		Mob	ile no: 917020428782		Emai	l : shahmana	n799@g	mail.com
DOB	: Aug 01, 2000	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33547 (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	- University A	llege Assessr	sessment)		
SN	Paper Code			Paper Name					AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acco	unting	Th-U	A [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	9	Th-U	A [ ]		
3	83013	Business Eco	onomics VI			Th-U	A [ ]		
4	83014	Commerce V	<b>′</b> I			Th-U	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[]	
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			mination	Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	Amount Recei	ived:	Co	llege Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bank	ς:	
Cent	er Preference (Code/N	ame):			1		ı		
	ie Preference (Code/Na								
	Director, Board of Exam		valuations / The C	Controller Of Examination	on,			Place:	Vidyavihar
	uest permission to pres								•
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	est for any special cond								
	ground. I understand t	that in the eve	ent of any informat	ion being found false o	r incorrect, my	candidature is liable	e to be		
canc	elled or rejected.							St	udent's Signature
Decl	aration by Principal/HO	D/Chairperso	on					-	
resp	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	ectification of	the information. H						
DI -	_								
Place	9:								
Date	:			College Stoff Signature			Sool	Seal and Signature of	
				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: Eligibility Status:		Examination form 110117	1 No.:	Division/Section:	Roll No	).:	4			
	2018016400938374		Eligible						Darwar.	
Instru	uction Medium:	•				Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: SARW	AN ANKITA S	MAYH			Mother's Name: Al	NURADHA	(	Gender: Female	
Nam	e in Vernacular Langua	age:सारवान अं	किता शाम							
Addr	ess: MALI BHAVAN, P	LOT NO. 97 I	ROOM NO.3 JB NA	AGAR ANDHARI EAST						
City:	MUMBAI , Taluka: Mu	mbai, District:	Mumbai City, Stat	e: Maharashtra, PIN: 40	00059					
Tele	ohone no.:		Mob	ile no: 919082758159						
	: Nov 04, 2000		tegory: Open	Physically Handicap: No						
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33736 (Status: Pass)	
	n form appearance type									
		ase select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessr	ment)		
SN	Paper Code			<u>'</u>	Paper Name				AM - AT	
1	83001			ing IX - Financial Accou		Th-U				
2	83007			ing X - Cost Accounting			Th-U			
3	83013	Business Eco					Th-U			
4	83014	Commerce V						Th-UA []		
5	83015		direct Taxation Pa	·			Th-C			
6	83020	Computer sy	stems and Applica	-			<del></del>	A [ ] ;Th-		
	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	Amount Recei	ived:	Coll	lege Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	<b>C</b> :		
Cent	er Preference (Code/N	ame):								
Venu	ie Preference (Code/N	ame):								
				ontroller Of Examination				Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
				ibed for the examination						
				or day fixed for universit						
	elled or rejected.	ınaı in ine eve	ent of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
							St	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 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) a			e/sile is regular studerit	or trus cone	je and has complete	a the required	u allenua	ance and practical	
Place	<b>e</b> :									
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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 for 110118		Division/Section:	Roll	No.:	R.
:	2018016400938382		Eligible						
nstrı	uction Medium:	•				Nationality:	India		
				Student's Per	rsonal Informati	on			
Stud	ent's Name: KUBAI	DIYA NIHIR C	HANDRAKANT			Mother's Name:	SHILPA		Gender: Male
Nam	e in Vernacular Langua	age:कुबडीया न	गहीत चंद्रकांत						
Addr	ess: m g complex ,sect	tor 14 amar jy	oti society ,c 44						
City:	navimumbai, Taluka: 1	Thane, Distric	t: Thane, State: Ma	aharashtra, PIN: 4007	03				
	ohone no.:		Mob	oile no: 919930237368	3	Em	ail : shall.kub	adiya2003	3@gmail.com
	: Sep 06, 2000	Cat	Handicap: No						
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	S	eat No: 72	83368 (Status: Pass)
	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	e			AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acco	ounting	Th	-UA [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountin	ng		Th	-UA [ ]	
3 83013 Business Economics VI							Th	-UA [ ]	
4	83014	Commerce V						-UA [ ]	
5	83015	Direct and In	direct Taxation Pa	per II			Th	-CA[]	
6	83023	Investment A	Analysis and Portfo	lio Management Pape	er II		Th	-CA[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	E	xamination	r Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Recei	ived:	Co	ollege Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Ва	ınk:	
Cent	er Preference (Code/N	lame):	<u> </u>						
	ie Preference (Code/N								
Γο, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar
	uest permission to pres								
	are that all statement magent gone through the sylla							Date:	
	est for any special cond								
other	ground. I understand								
canc	elled or rejected.							St	tudent's Signature
Declaration by Principal/HOD/Chairperson									
	form is carefully scrutir								
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular stude	nt of this Collec	je and has comple	ted the requi	red attend	ance and practical
Cour	——————————————————————————————————————						1		
Place	ā.								
	··								
Date	<u>.</u>								
				College Staff Signature		Seal and Signature of			
				Conlogo Clair Oighalano			Principal/HOD/Chairperson		D/Chairperson



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

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

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

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PRN: Eligibility Status:		bility Status:	Examination for 110119		Division/Section:	Roll No	.:		
	2018016400938401		Eligible						
Instru	uction Medium:					Nationality:	India		
				Student's Pers	sonal Informati	on			
Stud	ent's Name: SHRIV	AS TANAYKI	JMAR VINAYKUM	AR		Mother's Name: Sa	APANA	(	Gender: Male
Nam	e in Vernacular Langua	ige:श्रीवास तन	<b>ग्यकुमार</b>						
Addr	ess: A/B-405,6th floor,	Swapna Nag	ri Godrej hill Kalya	n west					
City:	Kalyan, Taluka: Kalyar	n, District: Th	ane, State: Mahara	shtra, PIN: 421301					
Tele	ohone no.: 2233093		Mot	ile no: 919820523462		Emai	il : tapanshriva	as1316@	gmail.com
DOB	: Nov 05, 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	No: 728	83597 (Status: ATKT)
Exan	n form appearance type	e: Fresher							
Pape	er Details: Plea	ise select Pa	per details which y	ou want to appear ( UA	A - University A	ssessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Name	)			AM - AT	
1	83001	Financial Ac	counting and Audit	ng IX - Financial Accounting				۹[]	
2		Financial Ac	counting and Audit	ing X - Cost Accountin	g		Th-U	٩[]	
3	83013	Business Ec	onomics VI				Th-UA		
4		Commerce \					Th-U	٩[]	
5			direct Taxation Pa	per II			Th-CA		
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:						
Pavr	nent Details:	Amount Rece	ived:	Co	ollege Receipt	No and Date:			
DD N			MICR No:	100	DD Date:	Tto: and Bato.	Bank		
	er Preference (Code/N	ame):	1		22 24.0.				
	ie Preference (Code/Na								
	Director, Board of Exam	•	Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	l'idee.	Vidyaviilai
	are that all statement m							Date:	
	gone through the sylla est for any special cond					11 0			
othe	ground. I understand t								
canc	elled or rejected.							St	udent's Signature
Decl	eclaration by Principal/HOD/Chairperson								
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	e:								
Date	:								
				College Staff Signature				nature of D/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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	PRN:	Eligi	ikility Status:	Examination for		Division/Section:	Poll No		
			ibility Status:	11012	20	Division/Section:	Roll No	).i	Anuja
	2018016400938416		Eligible		.10110111011				
nstru	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	1			
Stude	ent's Name: APTE	ANUJA AJIT				Mother's Name: Al	NJALI	(	Gender: Female
Name	e in Vernacular Langua	age:आपटे अनु	जा अजित ————						
	ess: 16 ganesh co op l								
	mumbai, Taluka: Kurla	a, District: Mur	mbai Suburban, St	ate: Maharashtra, PI	IN: 400078				
Telephone no.: Mobile no: 918369295967 Email : anjalia									mail.com
DOB: Nov 07, 2000 Category: Open Physically Handicap: No									
Previ	ious Latest Examinatio	on Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83146 (Status: Pass)
Exam	n form appearance type	e: Fresher							
Pape	er Details: Plea	ase select Par	per details which y	ou want to appear ( l	UA - University A	ssessment,CA - Co	llege Assessr	ment)	
SN	Paper Code			Paper Nan	ne				AM - AT
1	83001	Financial Acr	counting and Audit	ing IX - Financial Acc	counting		Th-U	A[]	
2	83007	Financial Acr	counting and Audit	ing X - Cost Account	ting		Th-U	A[]	
3	83013	Business Eco	onomics VI				Th-U		
4	83014	Commerce V					Th-U	A[]	
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C	A[]	
6	83016	Export Marke	eting Paper II	<u></u>		<u></u>	Th-C	A [ ]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
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	ue Preference (Code/N								
	Director, Board of Exam		= ::clustions / The (	`antroller Of Everning				T	
	uest permission to pres					nd fee for the same	l harahy	Place:	Vidyavihar
decla	are that all statement m	nade in this ap	pplication are true,	complete and correc	ct to the best of m	ny knowledge and be	elief. l	Date:	
	gone through the sylla est for any special cond							<u> </u>	
other	r ground. Í understand								
	elled or rejected.		· -	·				l st	tudent's Signature
امورا	aration by Principal/HC	2D/Chairners						0.	udent's Signature
	form is carefully scruting			mo. The information	en printed in the f	orm is correct to the	hast of my kr	- owledge	a Lalco undertake the
respo	onsibility of fulfillment/r	rectification of	f the information. H	e/she is regular stud	dent of this Collec	ge and has complete	ed the required	d attenda	ance and practical
	se/term work (if any) a								
								-	
Place	<b>э</b> :								
				-		ļ	l		
Date:	:			Callege	O: "Ci-noturo	ļ	Cool	- J Cia	
				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.

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

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 for 110121	rm No.:	Division/Section:	Roll No	ı.:	Dehuini
	2018016400938424	Eligible						
Instru	uction Medium:				Nationality:	India		
		_	Student's Per	sonal Information	on			
Stud	ent's Name: DALBHA	ANJAN AHWINI CHANDRAK	ANT		Mother's Name: Pl	JSHPA	(	Gender: Female
Nam	e in Vernacular Languaç	ge: दलभंजन अश्विनी चंद्रकांत						
Addr	ess: ROOM NO. 65, 3R	D FLOOR HALAV POOL, GO	AL BUILDING BHAGA	VAT BHAVAN				
City:	MUMBAI, Taluka: Kurla	, District: Mumbai Suburban,	State: Maharashtra, PI	N: 400070				
	phone no.:	Mo	bile no: 919769473489	)	Emai	l : dalbhanjan	ashwini4	4@gmail.com
DOB: Oct 24, 2000 Category: Open Physically Handicap: No								
Prev	ious Latest Examination	Details: Sem III(Regular-Rev	16)	Exam Event	:: Nov-2019	Sea	t No: 728	83213 (Status: Pass)
	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		inancial Accounting and Auc	ting IX - Financial Acco	ng IX - Financial Accounting				
2	83007 F	Financial Accounting and Auc	ting X - Cost Accounting	ng		Th-U	A[]	
3		Business Economics VI				Th-U		
4		Commerce VI				Th-U	.,	
5	83015	Direct and Indirect Taxation P	aper II			Th-C	A[]	
6	83023 li	nvestment Analysis and Port	olio Management Pape	er II		Th-C	A [ ]	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee	Total:						
Pavn	nent Details: Ar	mount Received:	C	ollege Receipt N	No. and Date:			
DD N		MICR No:		DD Date:	10. 0.10 2010.	Bank		
	er Preference (Code/Na			1		1	-	
	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·						
To, E	Director, Board of Exami	nation and Evaluations / The	Controller Of Examinat	ion,			Place:	Vidyavihar
		ent myself for the ensuing exa					<u>.</u>	•
		ade in this application are true ous and the list of books prese					Date:	
requ	est for any special conce	ession such as change in time	or day fixed for univer	sity Examination	n etc. on religious or	any		
		nat in the event of any informa	tion being found false of	or incorrect, my	candidature is liable	e to be		
Caric	elled or rejected.						St	udent's Signature
Declaration by Principal/HOD/Chairperson								
		ized by the College staff and ectification of the information.						
		cording to university rules.			,			μ
Place	ə:							
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]

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PRN: Eligibility Status:				Examination f 11012		Division/Section:	Roll No	).:	Rakesh
	2018016400938432		Eligible						
Instr	uction Medium:	•				Nationality:	India	-	
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: YADAV	/ RAKESH VI	JAYSHANKAR			Mother's Name: SI	HAKUNTLA	G	ender: Male
Nam	e in Vernacular Langua	age:यादव राव	तेश विजयशंकर						
Addr	ess: purohit chawl pl	lokhande mai	rg near krishna dai	ry chembur mumba	i				
City:	chembur mumbai, Talı	uka: Kurla, Dis	strict: Mumbai Sub	urban, State: Mahar	ashtra, PIN: 400	089			
Tele	ohone no.:		Mob	ile no: 91816959005	55	Emai	l : rahulyadav	0057@gr	nail.com
DOB	: Aug 10, 2000	Cat	egory: Open		Physically	Handicap: No			
									3775 (Status: ATKT)
Exam form appearance type: Fresher									
Pape	er Details: Plea	ase select Par	oer details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			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	ting		Th-U	A[]	
3	83013	Business Eco	onomics VI				Th-U	A []	
4	83014	Commerce V	Ί				Th-U	A []	
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[]
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination F	ees
Mark	Statement Fee		Total:						
Payr	nent Details:	Amount Recei	ved:		College Receipt	No. and Date:			
DD N	lo:		MICR No:		DD Date:		Bank	Ξ.	
Cent	er Preference (Code/N	ame):							
Venu	ie Preference (Code/Na	ame):							
To, [	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar
	uest permission to pres								,
	are that all statement mages							Date:	
	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		
canc	elled or rejected.							Stu	dent's Signature
Decl	eclaration by Principal/HOD/Chairperson								
resp	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	ectification of	the information. H	ne. The information e/she is regular stud	n printed in the fo ent of this Collec	orm is correct to the ge and has complete	best of my kn d the required	owledge. d attendar	I also undertake the nce and practical
Place	э:								
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:	Eligi	ibility Status:	Examination for 110123	3	Division/Section:	Roll No	).:	Marchas
2	2018016400938447		Eligible						
nstrı	uction Medium:					Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: DVSV I	NAGASAI MA	ANOHAR DVSV PF	RASAD		Mother's Name: DN	1 PADMASRI	<u> </u>	Gender: Male
	e in Vernacular Langua								
	ess: FLAT NO:301, RU								
	MUMBAI, Taluka: Mun	mbai, District:							
Telephone no.: Mobile no: 919320483553 Email : dvsvprasad@me.com  DOB: Nov 23, 2001 Category: Open Physically Handicap: No									
	: Nov 23, 2001								
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seaf	t No: 728	83678 (Status: ATKT)
	n form appearance type								
		ase select Par	per details which y	rou want to appear ( U		ssessment,CA - Col	lege Assessn	nent)	
SN	Paper Code	<u> </u>		Paper Name					AM - AT
1	83001	+		ting IX - Financial Acco			Th-U	.,	
2	83007	-	<u>-</u>	ting X - Cost Accounting	ng		Th-U/		
3	83013	Business Eco					Th-U/		
4	83014	Commerce V					Th-U/		
5	83015		ndirect Taxation Pa	-			Th-C/		
6	83020	Computer sy	stems and Applica	-			Th-U	A [ ] ;Th-	·CA[]
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:		ollege Receipt I	No and Date:	<u> </u>		
DD N			MICR No:	1-	DD Date:	10. 0 2 2	Bank	<u></u>	
	er Preference (Code/N								
	ue Preference (Code/Na								
	Director, Board of Exam		Evaluations / The C	Controller Of Examinat	tion.			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	l lacc.	Viuyaviiiai
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:	
	gone through the sylla est for any special cond								
other	r ground. I understand t								
cance	elled or rejected.							St	tudent's Signature
Decla	aration by Principal/HO	DD/Chairperso	on						
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	<b>:</b>								
Date:  College Staff Signature  Seal and Signature of Principal/HOD/Chairperson									



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

Application Form for Examination of Summer Session 2021 event.

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

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	PRN:		bility Status:	Examination for 110124		Division/Section:	Roll No	0.:	Caifali
	2018016400938463	PI	rovisional		ii I III		<u> </u>		U
Instru	uction Medium:					Nationality:	India		
<u> </u>	· · · · OHAIE			Student's Pers	sonal Informati	1			
		ALI N WANG				Mother's Name: R	JSHALI		Gender: Female
	e in Vernacular Langua								
	ress: b103, swagat chs								
	navi mumbai, Taluka:	Thane, Distric							
	phone no.:			oile no: 919594000995			l : nilesh_war	ngikar@r	ediffmail.com
DOB: Dec 24, 2000 Category: Open Physically Handicap: No							<del></del>		
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	at No: 728	33660 (Status: Pass)
Exam form appearance type: Fresher									
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assess								ment)	
SN	Paper Code	Tirrisial Ass		Paper Name		Th. I		AM - AT	
1				3				JA []	
2				ing X - Cost Accountin	g		Th-U		
3		Business Eco Commerce V					Th-U		
5			direct Taxation Pa	nor II			Th-C		
6				lio Management Pape	e II		Th-C		
-	vocation Fee	IIIVESIIIIEIII A	Exam Form Late			Super Late Fee		amination	Eggs
	Statement Fee		Total:		LAGIIII OIIII	Super Late 1 cc	LAG	111111111111111111111111111111111111111	1 665
	- Otatomont 1 00								
Payn	ment Details:	Amount Recei	ived:	Co	ollege Receipt	No. and Date:			
DD N	10:		MICR No:		DD Date:		Banl	k:	
Cent	ter Preference (Code/Na	ame):							
	ue Preference (Code/Na	•						,	
	Director, Board of Exam							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	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 univers	sity 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 o	or incorrect, my	candidature is liable	e to be		
Cario	elled of rojectod.							Stı	udent's Signature
Declaration by Principal/HOD/Chairperson									
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) ac	ectification of	the information. H						
Place	e: 								
Date:					Staff Signature			and Sign	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:		Eligibility Status:	Examination form 110125	n No.:	Division/Section:	Roll N	o.:	
2	2018016400938471	Eligible		III				3
Instru	uction Medium:				Nationality:	India	•	
			Student's Perso	onal Informati	on			
Stude	ent's Name: HANGA	RGI HARISH HANMANTH			Mother's Name: G	EETHA	G	ender: Male
Nam	e in Vernacular Langua	ge:हंगार्गी हरीश हनुमंत						
Addr	ess: 505,C wing 18 no.	BUILDING (OPP) KOHINOOR	HOSPITAL,KURLA(WE	EST), Mumba	i 400070			
City:	MUMBAI, Taluka: Kurla	, District: Mumbai Suburban, S	State: Maharashtra, PIN:	400070				
	ohone no.:	Mot	pile no: 919167149381		Ema	il : harishhan	igargi123@	gmail.com
	: Dec 09, 2000	Category: Open		<del>, ' ' ' '</del>	Handicap: No			
		Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	at No: 728	3274 (Status: ATKT)
	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		Financial Accounting and Audit					JA [ ]	
2		Financial Accounting and Audit	ing X - Cost Accounting				JA [ ]	
3		Business Economics VI					JA [ ]	
4		Commerce VI					JA [ ]	
5		Direct and Indirect Taxation Pa	per II				CA []	
6	83016	Export Marketing Paper II				Th-C	CA[]	
	ocation Fee	Exam Form Late	Fee	Exam Form Super Late Fee Examina				Fees
Mark	Statement Fee	Total:						
Payn	nent Details: A	mount Received:	Coll	lege Receipt	No. and Date:			
DD N	lo:	MICR No:		DD Date:		Ban	nk:	
Cent	er Preference (Code/Na	ime):				•		
Venu	e Preference (Code/Na	me):						
To, D	Director, Board of Exami	nation and Evaluations / The C	Controller Of Examinatio	n,			Place:	Vidyavihar
decla	are that all statement ma	ent myself for the ensuing exar ade in this application are true, ous and the list of books prescr	complete and correct to	the best of n	ny knowledge and b	elief. I	Date:	·
reque other	est for any special conc	ession such as change in time nat in the event of any informat	or day fixed for universi	ty Examination	on etc. on religious o	r any		
							Stu	ident's Signature
This respo	onsibility of fulfillment/re	O/Chairperson  ized by the College staff and by octification of the information. Hopording to university rules.						
Place	e:							
Dot-								

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 fo 110126		Division/Section:	Roll No	).:	Mohit	
2	2018016400938486		Eligible			1		1	3.10111	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: THAKK	CAR MOHIT F	HARIKRISHNA			Mother's Name: Rl	JPAL	(	Gender: Male	
	e in Vernacular Langua								1	
Addr	ess: JANTA NAGAR, G	GOLIBAR RO	AD, GHATKOPAR	WEST, MUMBAI						
<u> </u>	MUMBAI, Taluka: Kurl	a, District: Μι								
Telephone no.: Mobile no: 919653281988 Email : mohitthakk									இgmail.com	
DOB: Nov 18, 2000 Category: Open Physically Handicap: No										
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	83759 (Status: ATKT)	
	n form appearance type									
Pape		ase select Par	per details which y	ou want to appear ( U	JA - University A	ssessment,CA - Col	ilege Assessn	nent)		
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 Accounting	ng		Th-U/	A[]		
3		Business Eco	onomics VI					Th-UA[]		
4		Commerce V	<u>/I</u>				Th-U/			
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C/	A[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U/	A [ ] ;Th-	-CA[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details:	Amount Recei	ived.		College Receipt I	No and Date:				
DD N			MICR No:	1-	DD Date:	10. 0 2 2 2 2 2	Bank			
	er Preference (Code/Na		1		1					
	ue Preference (Code/Na									
	Director, Board of Exam	,	Evaluations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres							I_	,	
	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 univer	rsity Examinatio	n etc. on religious or	r any			
other	r ground. I understand t									
canc.	elled or rejected.							St	tudent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutin									
	onsibility of fulfillment/re se/term work (if any) ac			e/she is regular stude	ent of this colleg	e and has complete	d the required	1 atteriua	ance and practical	
Place	e:						l			
				_			İ			
Date:	:					ļ	l			
							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:			ibility Status:	Examination form	ı No.:	Division/Section:	Roll No.		
			•	110127 	ı	Division/Section.	Noil No.		JaNaik.
	2018016400938494		Eligible		III	<b></b>	<u> </u>		
nstru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	1			
Stude	ent's Name: NAIK S	AGARIKA CI	HANDRAKANT			Mother's Name: St	NEHA		Gender: Female
Nam	e in Vernacular Langua	ıge:नाईक साग	ारिका चंद्रकांत						
Addr	ess: A/401,OSHO KRIS	SHNA,GHAN	TALI BAJI PRABH	IU MARG THANE (WES	,T)				
City:	THANE, Taluka: Thane	e, District: Th	ane, State: Mahar	ashtra, PIN: 400602					
Teler	ohone no.: 25451515		Mot	oile no: 919869477215		Emai	il : naikcm123(	@gmail.	com
DOB	: Dec 22, 2000	Cat	tegory: Open		Physically	Handicap: No			
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	. No: 728	33711 (Status: ATKT)
Exam form appearance type: Fresher									
Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College As								nent)	
SN	Paper Code	<b></b>		Paper Name	Paper Name				AM - AT
1				ting IX - Financial Accour			Th-UA		
2		Financial Acc	counting and Audit	ting X - Cost Accounting			Th-UA	۹[]	
3		Business Eco					Th-UA		
4		Commerce V	•				Th-UA	۹[]	
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA		
6	83023	Investment A	nalysis and Portfo	lio Management Paper I	11		Th-CA	۹[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees
Mark	Statement Fee		Total:		<u> </u>				
	nent Details:	Amount Recei	d.	Call	Isaa Bassint	No. and Date:			
DD N		Mount nece	MICR No:		DD Date:	No. and Date.	Bank:		
	er Preference (Code/Na	lama):	MICK NO.		DD Date.		Dalik.	<u> </u>	
	er Preference (Code/Na								
	•		Evaluations / The (	Controller Of Examination				<u> </u>	
				nination. I have remitted		ad foo for the same		Place:	Vidyavihar
decla	are that all statement ma	nade in this ap	oplication 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				$\vdash \!$	
				or day fixed for university ion being found false or i					
	elled or rejected.		•	· ·				St	udent's Signature
Dack	aration by Principal/HO	\D/Chairnere/						0	Juent's Signature
				y me. The information pr	rinted in the f	orm is correct to the	boot of my kny	owledge	Lalco undertake the
respo	onsibility of fulfillment/re	ectification of	f the information. H	le/she is regular student	of this Colle	ge and has complete	d the required	d attenda	ance and practical
cours	se/term work (if any) ac	cording to un	iversity rules.						
_						ı	1		
Place	Y.								
				_					
Place				- Callage Ste	aff Signature		Socie	and Sign	



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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 110128		Division/Section:	Roll No	.:	Japany	
:	2018016400938505	Eligible							
nstrı	uction Medium:	•			Nationality:	India			
			Student's Perso	onal Information	on				
Stud	ent's Name: JAISW	AL SAPNA PAPPU			Mother's Name: PO	DONAM	C	Gender: Female	
Nam	e in Vernacular Langua	ige:सपना							
٩ddr	ess: L.B.S marg agra ro	oad pream nagar sion west mur	nbai 400022						
City:	mumbai, Taluka: Mum	bai, District: Mumbai City, State	: Maharashtra, PIN: 400	0022					
ГеІер	ohone no.:	Mob	ile no: 918169149344		Emai	l : sapnaj526(	@gmail.o	com	
OOB	: Sep 29, 2000	Category: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33689 (Status: Pass)	
Exan	n form appearance type	e: Fresher							
Pape	r Details: Plea	nent)							
SN	Paper Code		Paper Name	Paper Name				AM - AT	
1	83001	Financial Accounting and Audit	ng IX - Financial Accou	nting		Th-U	۹[]		
2	83007	Financial Accounting and Audit	ng X - Cost Accounting			Th-U	۹[]		
3	83013	Business Economics VI				Th-U	۹[]		
4		Commerce VI				Th-U	Th-UA[]		
5	83015	Direct and Indirect Taxation Pa	oer II			Th-C/	۹[]		
6	83020	Computer systems and Applica	tions Paper II			Th-U/	۲ [ ] ;Th-۱	CA[]	
Conv	rocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Pavn	nent Details:	Amount Received:	Coll	lege Receipt I	No. and Date:				
DD N		MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):	l			I			
/enu	ie Preference (Code/Na	ame):							
	•	ination and Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
		ent myself for the ensuing exan			ed fee for the same.	l hereby		viayaviilai	
		ade in this application are true,					Date:		
		bus and the list of books prescr session such as change in time							
other	ground. I understand t	hat in the event of any informat							
canc	elled or rejected.						Stu	udent's Signature	
Decla	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 sponsibility 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. Haccording to university rules.	e/she is regular student	of this Colleg	e and has complete	d the required	d attenda	ance and practical	
Jours	Solicini work (ii ariy) ac	coraling to university rules.			Т				
Place	e:								
	-		_						
Date	<u>.</u>								
			College Sta	aff Signature			and Sign		
			ů ů			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]

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:		Elig	ibility Status:	Examination for 110129		Division/Section:	Roll No	.:	@3mgle	
	2018016400938513		Eligible						(g)	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	ion				
Stud	ent's Name: BHOG	LE GAURAN	G SADANAND			Mother's Name: V	IDYA	(	Gender: Male	
Nam	e in Vernacular Langua	age:गौरांग सट	प्रनंद भोगले							
٩ddr	ess: BUILDING NO.18	0,B-WING,R	OOM NO.6407 JAI	BAJRANG MITRA M	IANDAL KANNA	AMWAR NAGAR -2				
City:	MUMBAI, Taluka: Kurl	a, District: M	umbai Suburban, S	tate: Maharashtra, P	IN: 400083					
Tele	ohone no.:		Mob	ile no: 91986783495	0	Ema	il : gandresir5(	@gmail.	com	
DOB	: Jan 09, 2001	Ca	tegory: Open		Physically	Handicap: No				
	ous Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	: No: 728	33183 (Status: ATKT)	
	n form appearance type	e: Fresher								
	r Details: Plea	ase select Pa	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	83001	Financial Ac	counting and Audit	ing IX - Financial Acc	counting		Th-U/	۹[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Account	ing		Th-U/	۹[]		
3	83013	Business Ec	onomics VI		Т					
4	83014	Commerce \	/I		-					
5 83015 Direct and Indirect Taxation Paper II								٩[]		
6	83016	Export Mark	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:							
Davr	nent Details:	Amount Rece	ived:	1	College Receipt	No. and Date:				
DD N		AIIIOUIII INECE	MICR No:		DD Date:	IVO. and Date.	Bank			
	er Preference (Code/N	ame).	INITOTY IVO.		DB Date.		Dank			
	ie Preference (Code/N									
	Director, Board of Exam	,	Evaluations / The C	controller Of Examina	ntion,			Place:	Vidyavihar	
	uest permission to pres								·	
	are that all statement m gone through the sylla							Date:		
	est for any special con									
	ground. I understand	that in the ev	ent of any informat	on being found false	or incorrect, my	candidature is liable	e to be			
Janic	elled or rejected.							Sti	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 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) a	ccording to ur	niversity rules.							
Place	e:									
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Date	:			0 "	Or- (( O; )			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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	PRN:	Eligi	ibility Status:	Examination fo 110130		Division/Section:	Roll No	0.:	
;	2018016400938521		Eligible						Varsol
nstru	uction Medium:			ļ		Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: DODH	IIA VATSAL V	'IJAY			Mother's Name: P	REETI	(	Gender: Male
Nam	e in Vernacular Langua	age:वत्सल							
Addr	ess: 22-B 3rd Floor 30	4 Ashok Naga	ar Kalyan Road						
City: andi, Taluka: Bhiwandi, District: Thane, State: Maharashtra, PIN: 421302									
Telephone no.: Mobile no: 917972312239 Email : vijaydodhia									nail.com
DOB: Dec 10, 2000 Category: Open Physically Handicap: No									
	ious Latest Examinatio		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Sea	at No: 72	90669 (Status: Fail)
	n form appearance type								
	er Details: Plea	ase select Pa	per details which y	ou want to appear ( U	A - University A	ssessment,CA - Co	ollege Assess	ment)	
SN	Paper Code			Paper Name					AM - AT
1	83001		<u>~</u>	ing IX - Financial Acco	<u>-</u>		Th-U		
2 83007 Financial Accounting and Auditin 3 83013 Business Economics VI				ing X - Cost Accounting	ng		Th-U		
3	83013						Th-U		
4	83014	Commerce V					Th-U		
5	83015	+	ndirect Taxation Pa	•			Th-C		
6	83023	Investment A		lio Management Pape			Th-C		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	n Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Rece		- Ic	College Receipt I	No. and Date:			
DD N			MICR No:		DD Date:		Ban	k:	
Cent	er Preference (Code/N	lame):	.1						
√enu	ie Preference (Code/N	lame):	-			<del>,</del>			
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 many gone through the sylla							Date:	
eque	est for any special cond	cession such	as change in time	or day fixed for univer	rsity Examinatio	on etc. on religious o	or any		
other	ground. I understand	that in the eve	ent of any informati	ion being found false	or incorrect, my	candidature is liab	e to be		
cancelled or rejected. Stude							tudent'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								
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular stude	nt of this Colleg	je and has complet	ed the require	ed attenda	ance and practical
Place	ə:								
				_					
Date:	:								
				College Staff Signature Seal and 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 110131	1 No.:	Division/Section:	Roll No	).:	27 delhars		
	2018016400938536	Eligible		· III				nazz		
Instr	uction Medium:				Nationality:	India				
			Student's Perso	onal Informati	on					
Stud	ent's Name: NAIKAR	RE SIDDHISH SANTOSH			Mother's Name: DV	NARKA		Gender: Male		
Nam	e in Vernacular Languaç	ge:नाईकरे सिद्धेश संतोष								
Addr	ess: A-602 GANGAWA	DI,GOPAL BHUVAN LBS MAR	G GHATKOPAR WEST	<b>-</b> I						
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	State: Maharashtra, PIN:	400086						
	phone no.:		oile no: 918689919871	<u> </u>		I : adeshnehe	re123@	)gmail.com		
	3: Nov 16, 2000	Category: Open		<del>, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '</del>	Handicap: No					
		n Details: Sem III(Regular-Rev1	16)	Exam Even	t: Nov-2019	Seat	t No: 728	83712 (Status: ATKT)		
	m 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				Th-UA				
2		Financial Accounting and Audit	ing X - Cost Accounting			Th-U/				
3		Business Economics VI				Th-UA				
4		Commerce VI					Th-UA [ ]			
5		Direct and Indirect Taxation Pa	<u> </u>			Th-CA				
6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA []										
	vocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees		
Mark	Statement Fee	Total:								
Payr	ment Details: Ar	mount Received:	Coll	lege Receipt	No. and Date:					
DD N	lo:	MICR No:	· -	DD Date:		Bank	ς:			
Cent	ter Preference (Code/Na	ame):				•				
Venu	ue Preference (Code/Na	ime):								
		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,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:			
		bus and the list of books prescr ession such as change in time					$\vdash$			
othe	r ground. I understand th	hat in the event of any informat								
canc	elled or rejected.						St	tudent's Signature		
Decl	aration by Principal/HOD	D/Chairperson					<u> </u>			
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 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 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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	PRN:	Eligi	ibility Status:	Examination for 11013		Division/Section:	Roll No	0.:	~ . X= Y
:	2018016400938544		Eligible						433
nstrı	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: KARAI	NI RINKY JET	HALAL			Mother's Name: AS	SMITA		Gender: Female
Nam	e in Vernacular Langua	age:करणी रिंर्व	नेय जेठालाल						
Addr	ess: 401,SARASWATI	I CASTLE MA	LVIYA ROAD, RA	MNAGAR DOMBIVA	LI EAST				
City:									
Telephone no.: Mobile no: 919321018200 Email : karanijethalal@gmail.com									ail.com
	: Oct 27, 2000		tegory: Open		Physically	Handicap: No			
⊃revi	ious Latest Examinatio	on Details: Ser	m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Sea	at No: 728	83320 (Status: Pass)
	n form appearance typ								
⊃ape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( l	UA - University A	ssessment,CA - Co	llege Assess	ment)	
SN	Paper Code			Paper Nan					AM - AT
1	83001	Financial Acc	counting and Audit	ting IX - Financial Acc	counting		Th-U		
2 83007 Financial Accounting and Auditing				ing X - Cost Account	ting		Th-U	JA [ ]	
3	83013	Business Eco	onomics VI				Th-U		
4	83014	Commerce V					Th-U		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C	:A[]	
6	83016	Export Marke	eting Paper II				Th-C	;A[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	ı Fees
Mark	Statement Fee		Total:						
 Pavr	ment Details:	Amount Recei			College Receipt I	No and Date:			
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	er Preference (Code/N		1						
	ue Preference (Code/N								
	Director, Board of Exan	,	Evaluations / The C	Controller Of Examina	ation,			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	1000	Viayaviilai
	are that all statement m							Date:	
	gone through the syllates gone through the syllates gone est for any special con-								
other	r ground. I understand							1	
cance	elled or rejected.							St	tudent's Signature
Decl	aration by Principal/HC	OD/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	э:								
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)

Application Form for Examination of Summer Session 2021 event.

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibi	ility Status:	110133	II NO	Division/Section:	Roll No	.:	Founda	
:	2018016400938552	E	iligible		III					
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: SINGH	KAVITA KISAI	N			Mother's Name: Bl	HAJAN	G	Gender: Female	
Nam	e in Vernacular Langua	ge:सिंग कवित	ना किसान							
Addr	ess: BEHIND MOTHER	DAIRY ,ROO	MNO 38 JAI HAN	UMAN NAGAR KURL	A EAST K	URLA EAST, NEHRI	J NAGAR			
City:	MUMBAI, Taluka: Mum	bai, District: M	lumbai City, State	: Maharashtra, PIN: 40	00024					
Telep	ohone no.:		Mobi	le no: 918850779240		Emai	I : ASHUSON	AR097@	GMAIL.COM	
DOB	: Aug 07, 1999	Cate	gory: Open			Handicap: No				
Previ	ious Latest Examinatior	Details: Sem	III(Regular-Rev16	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3609 (Status: ATKT)	
Exam form appearance type: Fresher										
Pape	er Details: Plea	se select Pape	er details which yo	ou want to appear ( UA	- University A	Assessment,CA - Co	lege 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							Th-U	A[]		
3 83013 Business Economics VI Th							Th-U	Гh-UA [ ]		
4 83014 Commerce VI Th							Th-U	h-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th							Th-C	A[]		
6	83016 I	Export Marketi	ing Paper II				Th-C	A[]		
Conv	ocation Fee	E	Exam Form Late F	ee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	1	Total:							
Pavn	nent Details: A	mount Receive	ed:	Col	llege Receipt	No. and Date:				
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	er Preference (Code/Na				22 24.0.			••		
	ue Preference (Code/Na									
_	Director, Board of Exami	-	aluations / The Co	ontroller Of Examination	n.			Place:	Vidyavihar	
l requ	uest permission to presented that all statement ma	ent myself for t	the ensuing exam	ination. I have remitted	the prescrib			Date:	Vidyaviilai	
have	gone through the syllab	ous and the list	t of books prescril	bed for the examination	n for which I a	m appearing. I shall	not			
	est for any special conc ground. I understand the									
	elled or rejected.		,						de alla O'casala as	
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									
respo	form is carefully scrutin onsibility of fulfillment/re se/term work (if any) acc	ectification of th	he information. He							
Place	ə:									
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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	PRN:	Eligi	bility Status:	Examination for 11013		Division/Section:	Roll No.	.:	1	
	2018016400938575	P	rovisional						Tester las	
Instru	uction Medium:	•				Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: <b>KOTE</b> C	CHA JAY RAJ	IESH			Mother's Name: S.	ANGITA	(	Gender: Male	
Nam	e in Vernacular Langua	age:कोटेचा जर	य राजेश							
Addr	ess: 12/954 BEHIND F	RAIPUR ICE F	ACTORY BUILDIN	IG,FAFADIH RAIPI	UR(C.G.) 12/954	1				
City:	RAIPUR, Taluka: RAIF	PUR, District:	Raipur, State: Chh	attisgarh, PIN: 4920	09					
Tele	ohone no.:		Mob	ile no: 91951608945	no: 919516089456 Email : JAYKOTECHA30@GM					
DOB	: Nov 30, 2000	Cat	tegory: Open		Physically Handicap: No					
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33363 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	Assessment,CA - Co	llege Assessm	nent)				
SN	Paper Code			Paper Nan	ne				AM - AT	
1	83001	Financial Acc	counting and Audit	ng IX - Financial Acc	counting		Th-UA	4[]		
2	83007	Financial Acc	counting and Audit	ng X - Cost Account	ing		Th-UA	4[]		
3 83013 Business Economics VI							Th-UA	A[]		
4 83014 Commerce VI						Th-UA	۹[]			
5	83015	Direct and In	direct Taxation Pa	oer II			Th-CA	Гh-СА [ ]		
6 83023 Investment Analysis and Portfolio Managemer					er II		Th-CA	A[]		
Convocation Fee Exam Form Late Fee					Exam Form	Super Late Fee	Exar	nination	Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ived:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N	lame):								
	ue Preference (Code/N									
To, E	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres are that all statement m							Date:		
	gone through the sylla									
	est for any special cond ground. I understand									
	elled or rejected.		,	J	. ,				da.ada Cianatuna	
Daal									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 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) ad	ccording to un	niversity rules.	_						
Place	a·									
	<b></b>			_						
Date	•									
Dutc.				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 forr 110135	n No.:	Division/Section:	Roll No	::	- into	
	2018016400938583	Eligible		III				<u> </u>	
nstrı	uction Medium:	•			Nationality:	India			
			Student's Pers	onal Informati	on				
Stud	ent's Name: VIRA V	ENIL KAMLESH			Mother's Name: U	SHA	(	Gender: Male	
Nam	e in Vernacular Langua	ıge:विरा विनील कमलेश							
٩ddr	ess: rm no 102 MATRU	JPITRU CHAYYA KOPAR CRO	SS ROAD BEHIND KD	MC HOSPITA	\L				
City:									
Tele	ohone no.:	l : viravenil@(	gmail.co	m					
OOB: Aug 13, 2001 Category: Open Physically Handicap: No									
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33766 (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	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code		Paper Name				AM - AT		
1	83001	Financial Accounting and Audit	ng IX - Financial Accou	unting	Th-U	۹[]			
2	83007	Financial Accounting and Audit	ng X - Cost Accounting	ng X - Cost Accounting					
3	83013	Business Economics VI				Th-U	۹[]		
4	83014	Commerce VI					Th-UA[]		
5	83015	Direct and Indirect Taxation Pa	per II			Th-C/	۹[]		
6	83020	Computer systems and Applica	tions Paper II			Th-U	4 [ ] ;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 Received:	Col	llege Receipt I	No. and Date:				
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	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·							
Го, [	Director, Board of Exam	ination and Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar	
		ent myself for the ensuing exan						,	
		ade in this application are true, bus and the list of books prescr					Date:		
		cession such as change in time							
		hat in the event of any informati	on being found false or	incorrect, my	candidature is liable	e to be			
canc	elled or rejected.						St	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. He cording to university rules.	e/she is regular studen	t of this Colleg	e and has complete	d the required	d attenda	ance and practical	
Jours	oortoini work (ii ariy) ac	coraing to university rules.							
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	-		College Staff Signature		Seal and Signature of				
			o sinege o tam o ignatano			Princi	ipal/HÓΓ	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 110136		Division/Section:	Roll No.	:	N. S.
	2018016400938602		Eligible						2
Instru	uction Medium:	•				Nationality:	India	<u>'</u>	
				Student's Per	sonal Informati	on			
Stud	ent's Name: <b>DESAI</b>	KINJAL UDA	Υ			Mother's Name: A	ARTI	(	Gender: Female
Nam	e in Vernacular Langua	ge:किंजल देर	गई						
Addr	ess: FLAT NO. 503, B	VING CARN	ATION BUILDING	PRESTIGE RESIDEN	ICY, WAGBIL I	NAKA THANE, MAH	IARASHTRA-4	400607	
City:	THANE, Taluka: Thane	e, District: Th	ane, State: Mahara	shtra, PIN: 400607					
Tele	ohone no.: 25976674		Mob	ile no: 919892135149		Emai	il : 1221kinjal@	gmail.d	com
DOB	: Jul 28, 2000	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83221 (Status: ATKT)
Exan	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Pa	per details which y	ou want to appear ( U	A - University A	Assessment,CA - Co	llege Assessm	nent)	
SN	Paper Code			Paper Name	9				AM - AT
1	83001	Financial Acc	counting and Audit	ng IX - Financial Accounting				4[]	
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountir	ng		Th-UA	۹[]	
3 83013 Business Economics VI							Th-UA		
4 83014 Commerce VI								۹[]	
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	nination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	mount Rece	ived:	Co	ollege Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bank	<u> </u>	
	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							l_	,
	are that all statement magene 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 of	or incorrect, my	candidature is liable	e to be		
canc	elled or rejected.							St	udent's Signature
Decl	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									
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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PRN: Eligibility Status:		Examination form	n No.:	Division/Section:	Roll No	.:	(No. also		
	2018016400938617	Eligible		l <b>I</b> II				Jamas	
nstrı	uction Medium:	•			Nationality:	India			
			Student's Pers	onal Informati	on				
Stud	ent's Name: GOWD	A AKSHATA RANGA			Mother's Name: M.	AHALAXMI		Gender: Female	
Nam	e in Vernacular Langua	ige:गौडा अक्षता रंगा							
Addr	ess: IIT MARKET POW	/AI SHIVNERI HILL COLONY G	ARIB NAGAR OLD PI	PELINE POW	ΑI				
City:	MUMBAI, Taluka: And	heri, District: Mumbai Suburban	, State: Maharashtra, F	PIN: 400076					
Tele	ohone no.:	Mob	ile no: 919594158289		Emai	l : akshatagov	wda82@	gmail.com	
OOB	: Jun 18, 2001	Category: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33681 (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	ssessment,CA - Co	lege Assessn	nent)		
SN	Paper Code		Paper Name				AM - AT		
1	83001	Financial Accounting and Audit	ing IX - Financial Accor	unting	Th-U	A [ ]			
2	83007	Financial Accounting and Audit	ing X - Cost Accounting						
3	83013	Business Economics VI				Th-U	A [ ]		
4	83014	Commerce VI					Th-UA[]		
5	83015	Direct and Indirect Taxation Pa	oer II	r II			Th-CA[]		
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:							
Davr	nent Details:	Amount Received:	Co	llege Receipt I	No. and Date:				
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	er Preference (Code/N			DD Date.		Bank			
	ue 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.	l hereby	1 1000.	Vidyaviilai	
decla	are that all statement m	ade in this application are true,	complete and correct to	the best of m	y knowledge and be	elief. I	Date:		
		bus and the list of books prescr cession 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	
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								
		ectification of the information. H	e/she is regular studen	t of this Colleg	e and has complete	d the required	dattenda	ince and practical	
cour	se/term work (ii ariy) at	cording to university rules.							
Place	a·								
iact	<b>J.</b>								
Date	-								
Jaie	•		College Staff Signature Sea		Seal a	and Sign	ature of		
				College Stall Signature				)/Chairperson	



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

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	PRN:	Eligibility Status:	Examination for 110138	m No.:	Division/Section:	Roll No.	.:	Lega 1		
:	2018016400938625	Eligible						**		
Instru	uction Medium:				Nationality:	India				
		_	Student's Pers	onal Information	on					
Stud	ent's Name: ANSARI	MOHD AARIS MOHD RAFIQ	UE		Mother's Name: RA	ASHIDA	(	Gender: Male		
Nam	e in Vernacular Languaç	je:अन्सारी मोहम्मद आरिस मोहर	म्मद रिफक							
Addr	ess: 402/24, MAHADA C	COLONY GAUTAM NAGAR G	OVANDI							
City:	MUMBAI, Taluka: Kurla	, District: Mumbai Suburban, S	State: Maharashtra, PIN	I: 400043						
Telep	ohone no.:	Mob	oile no: 919768281112		Emai	I : AARISANS	ARI321	@GMAIL.COM		
DOB	: May 04, 2000	Category: Open		Physically	Handicap: No					
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283141 (S										
Exam form appearance type: Fresher										
Pape	er Details: Pleas	se 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		inancial Accounting and Audit	ing IX - Financial Accor	unting		Th-UA	••			
2	83007 F	inancial Accounting and Audit	ing X - Cost Accounting	9		Th-UA	۱[]			
3		Business Economics VI				Th-UA				
4 83014 Commerce VI						Th-U/				
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 S	Super Late Fee	Exar	nination	Fees		
Mark	Statement Fee	Total:								
Pavn	nent Details: An	mount Received:	Co	llege Receipt N	No. and Date:					
DD N		MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/Na	me):		1		I				
Venu	ie Preference (Code/Nar	me):								
To, C	Director, Board of Examin	nation and Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar		
		ent myself for the ensuing exam					D. I.	•		
		de in this application are true, us and the list of books prescr					Date:			
reque	est for any special conce	ession such as change in time	or day fixed for univers	ity Examination	n etc. on religious or	any				
	ground. I understand the elled or rejected.	at in the event of any informat	ion being found false of	r incorrect, my	candidature is liable	e to be				
Student's Signature							udent's Signature			
Decla	aration by Principal/HOD	)/Chairperson								
respo	This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility 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) acc	cording to university rules.								
Place	<b>э</b> :									
Doto										
Date	•		College S	taff Signature		Seal a	and Siar	nature of		
				<b>.</b>				D/Chairperson		



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

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

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Examination form No.:



	PRN:	Eligi'	ibility Status:	110139	II INO	Division/Section:	Roll No.	.:	Jarisha
2	2018016400938633		Eligible		III I				
Instru	uction Medium:					Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: CHUDA	ASAMA KRIS	HA ATUL			Mother's Name: Ch	HAYA	(	Gender: Female
Name	e in Vernacular Langua	₃ge:चुडासमा	क्रीशा अतुल						
Addre	ess: A/17, sejal apartm	ent Devi daya	al road , mulund (v	vest) Mumbai 400080					
City:	Mumbai, Taluka: Kurla	ı, District: Mur	mbai Suburban, St	tate: Maharashtra, PIN: 4	400080				
Telep	ohone no.:			oile no: 918291255808		Emai	il : krishachuda	asama2	6@gmail.com
	: Aug 26, 2000		tegory: Open		Physically	Handicap: No			
	ious Latest Examination		m III(Regular-Rev1	ı6)	Exam Even	nt: Nov-2019	Seat	No: 728	83211 (Status: Pass)
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2				ting X - Cost Accounting	J		Th-UA		
3		Business Eco					Th-UA		
4		Commerce V	<u>/I</u>			Th-U <i>F</i>	Th-UA[]		
5			ndirect Taxation Pa	per II			Th-CA	۱] ۲	
6	83016	Export Marke	eting Paper II				Th-CA	۱] ۲	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees
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	ie Preference (Code/Na								
	•	-	Evaluations / The C	Controller Of Examination	<u> </u>			<u></u>	
				nination. I have remitted		ad fee for the same		Place:	Vidyavihar
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:	
have	gone through the sylla	ibus and the li	ist of books prescri	ribed for the examination or day fixed for universit	n for which I a	m appearing. I shall	not r anv		
other	ground. I understand t			tion being found false or					
	elled or rejected.		-	-				St	udent's Signature
Deck	aration by Principal/HO	\D/Chairners(						<u> </u>	udent's orginature
	•	-		y me. The information pr	rinted in the f	orm is correct to the	best of my kno	مساعظمه	a Lalso undertake the
respo	onsibility of fulfillment/re	rectification of	f the information. H	le/she is regular student					
course/term work (if any) according to university rules.									•
Di				T			ı		
Place:							I		
Date:				College Staff Signature			Sool and Signature of		
				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 for 110140		Division/Section:	Roll No	0.:		
:	2018016400938641		Eligible						Bhak E	
nstru	uction Medium:					Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: <b>DEDH</b> I	A BHAKTI JIT	ГЕSH			Mother's Name: AF	RCHANA	(	Gender: Female	
Nam	e in Vernacular Langua	эge:देढिया भक	ती जितेश							
Addr	ess: b-13 manu prasad	l bldg sange	eta wadi shiv man	dir road dombivli eas	st					
City:	dombivli, Taluka: Kalya	an, District: T	hane, State: Maha	rashtra, PIN: 421201						
	ohone no.:		Mot	oile no: 917045204479	)	Emai	il : bhaktidedh	nia05@g	mail.com	
	: Oct 05, 2000		tegory: Open		Physically	Handicap: No				
	ious Latest Examination		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	it No: 728	83218 (Status: Pass)	
	n form appearance type									
		ase select Pa	per details which y	ou want to appear ( U		ssessment,CA - Co	llege Assessi	ment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001 83007			ing IX - Financial Acco			Th-U			
2				ing X - Cost Accountin	ng		Th-U			
3	83013 83014	Business Eco Commerce V					Th-U			
5			direct Taxation Pa	nor II				Th-UA [ ] Th-CA [ ]		
6				lio Management Pape	or II		Th-C			
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	er Preference (Code/N									
	ie 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	oplication are true,	complete and correct	to the best of m	ny knowledge and be	elief. I	Date:		
eque	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			
	ground. I understand telled or rejected.	that in the eve	ent of any informat	ion being found false o	or incorrect, my	candidature is liable	to be			
							udent's Signature			
Declaration by Principal/HOD/Chairperson										
respo	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical purse/term work (if any) according to university rules.									
Place	<b>ə</b> :						l			
)ate							ı			
Date:				College S	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.

Examination form No.:

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

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PRN: Eligibility Status:			ibility Status:	Examination form	n No.:	Division/Section:	Roll No.	).:	W:1-1-1	
- 2	2018016400938656		Eligible		l III				Shishiek	
ารtrเ	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
tude	ent's Name: GODAS	SE ABHISHE	K BHAGWAN			Mother's Name: SA	ANGITA		Gender: Male	
	e in Vernacular Langua									
	ess: r no-11 matru chay									
city:	mumbai, Taluka: Kurla	, District: Mur	mbai Suburban, St	tate: Maharashtra, PIN: 4	400042					
	phone no.:			oile no: 917039353001		Emai	il : sanketgoda	ase123@	ฏgmail.com	
	3: Aug 01, 2000		tegory: Open		<del>, '                                   </del>	y Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	,6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83680 (Status: Pass)	
xan	n form appearance type	e: Fresher								
<u> </u>	er Details: Plea	se select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	llege Assessn	nent)		
SN	Paper Code	<u> </u>		Paper Name					AM - AT	
1	83001	Financial Acr	counting and Audit	ting IX - Financial Accou	ınting		Th-UA	A[]		
2	83007	Financial Acr	counting and Audit	ting X - Cost Accounting	<u> </u>		Th-UA	A []		
3	83013	Business Eco	onomics VI				Th-UA	A [ ]		
4	83014	Commerce V	/I				Th-U/	Th-UA []		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U/	A [ ] ;Th-	-CA[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
/lark	Statement Fee		Total:							
_		Amount Recei			College Receipt No. and Date:					
DD N			MICR No:		DD Date: Ba			:		
	ter 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,	mination. I have remitted complete and correct to ribed for the examination	the best of n	my knowledge and be	elief. I	Date:		
				or day fixed for universit						
		that in the eve	ent of any informati	tion being found false or	incorrect, my	/ candidature is liable	e to be			
ance	elled or rejected.						Ī	St	tudent's Signature	
)ecla	aration by Principal/HO	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 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:									
)ate:	:			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:	Eligi	ibility Status:	Examination for 110142	2	Division/Section:	Roll No.	).:	Lalani	
:	2018016400938664		Eligible						4	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: JAIN SA	ALONI MANO	OHARLAL			Mother's Name: Al	NITA		Gender: Female	
Name	e in Vernacular Langua	₃ge:जैन सलो	ानी मनोहरलाल						1	
Addr	ess: SHOP NO 1, RUN	WAL CENT	RE, DEONAR DE\	/SHI MARG GOVAN	DI STATION RC	AD				
	MUMBAI, Taluka: Kurla	a, District: Μι								
	phone no.:			oile no: 91810851250	ı		il : SALONIJAI	.IN121@	GMAIL.COM	
	: Oct 10, 2000		tegory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 S								t No: 728	83292 (Status: ATKT)	
	n form appearance type									
Paper Details: Please select Paper details which you want to appear (UA - University Assessment,CA - College Assessr								nent)		
SN	Paper Code	<b></b>			Paper Name				AM - AT	
1				ting IX - Financial Acc		Th-UA				
2				ting X - Cost Accounti	ing		Th-UA			
3 83013 Business Economics VI							Th-UA			
								Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-0										
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:							
Pavr	nent Details:	Amount Recei	eived:	(	College Receipt	No and Date:				
DD N			MICR No:		DD Date:		Bank			
	er Preference (Code/Na		1							
	ue Preference (Code/Na									
Гο, Γ	Director, Board of Exam	ination and F	Evaluations / The C	controller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres							<u></u>		
	are that all statement mag							Date:		
reque	est for any special conc	cession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
other	r ground. I understand t elled or rejected.	that in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be			
Janu-	alled of rejected.		<u></u>				!	St	tudent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutin									
	se/term work (if any) ac			0,0,12 12 1 20 1	• · · · · · · · · · · · · · · · · · · ·	,5 3			2.00	
Place	e:									
				_			1			
Date:	:									
				College Staff Signature			Seal and Signature of			
					o o			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 fo 110143		Division/Section:	Roll No	<b>)</b> .:	Fair	
:	2018016400938687		Eligible			l		ļ	Fraichen	
nstrı	uction Medium:			-		Nationality:	India			
				Student's Per	rsonal Informati	on				
Stude	ent's Name: RAICH	IURA CHARM	II PANKAJ			Mother's Name: KI	RAN		Gender: Female	
	e in Vernacular Langua									
	ess: B/203,TIRUPATI (									
	THANE, Taluka: THAN	NE, District: T								
	phone no.:			oile no: 918356020228	1		il : charmiraich	nura11@	ŷgmail.com	
	3: May 19, 2001		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Seat	t No: 728	83496 (Status: Pass)	
	n form appearance type									
Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College As							Ilege Assessn	nent)		
SN	Paper Code	<u> </u>		Paper Nam					AM - AT	
1				ting IX - Financial Acco			Th-U/	.,		
2		<del> </del>		ting X - Cost Accounting	ng		Th-U/			
3 83013 Business Economics VI								Th-UA []		
6 Conv		EXPOIL IVIAING	Exam Form Late	F	Fyom Form	Our ard ato Eoo	<u> </u>		- F	
	vocation Fee Statement Fee		Total:	<u>Fee</u>	Exam rom	Super Late Fee	- Lvai	mination	i Fees	
Viain	Statement i ee		Total.							
Payn	ment Details:	Amount Recei	ived:	C	College Receipt	No. and Date:				
DD N	lo:		MICR No:		DD Date:		Bank	с:		
Cent	er Preference (Code/N	lame):								
Venu	ue Preference (Code/Na	ame):								
To, C	Director, Board of Exam	nination and F	Evaluations / The C	controller 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:	-	
	e gone through the sylla est for any special cond									
other	r ground. I understand t									
сапь	celled or rejected.							St	tudent's Signature	
Deck	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 ourse/term work (if any) according to university rules.									
Place	э:									
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]

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PRN: Eligibility Status:				Examination to 11014		Division/Section:	Roll No	u:	Samikaha		
:	2018016400938695		Eligible						Samiksha		
Instru	uction Medium:	•				Nationality:	Nationality: India				
				Student's Pe	rsonal Informati	on					
Stud	ent's Name: SAVLA	SAMIKSHA	DOLLAR			Mother's Name: A	NJALI	(	Gender: Female		
Nam	e in Vernacular Langua	age:सावला सर	मीक्षा डॉलर								
Addr	ess: L/404, NAVNEET	NAGAR LOD	HA HERITAGE DO	OMBIVLI (EAST)							
City:	DOMBIVLI, Taluka: Ka	lyan, District	: Thane, State: Mal	harashtra, PIN: 4212	01						
Telep	ohone no.:		Mob	ile no: 91767807056	o: 917678070562 Email : samikshasavla2@gmail.com						
DOB	: Nov 06, 2000	Cat	tegory: Open		Physically	Handicap: No					
Previ	ous Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33537 (Status: Pass)		
Exan	n form appearance type	e: Fresher									
Pape	r 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 Nam	ne				AM - AT		
1	83001	Financial Ac	counting and Audit	ing IX - Financial Acc	counting		Th-U/	A [ ]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounti	ing		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 83016 Export Marketing Paper II Th-CA []											
Conv	ocation Fee	Exam Form Late	Super Late Fee	Exar	mination	Fees					
Mark	Statement Fee		Total:								
					'						
		Amount Recei		C	College Receipt No. and Date:						
DD N	lo:		MICR No:		DD Date:		Bank	:			
Cent	er Preference (Code/N	ame):									
	e Preference (Code/Na										
To, E	Pirector, Board of Exam	ination and E	Evaluations / The C	controller Of Examina	ition,			Place:	Vidyavihar		
decla	uest permission to pres are that all statement m gone through the sylla	iade in this ap	oplication are true,	complete and correct	t to the best of n	ny knowledge and b	elief. I	Date:			
	est for any special cond										
	ground. I understand	that in the eve	ent of any informati	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 .					•			
respo	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	ectification of	f the information. H	/ me. The informatior e/she is regular stude	n printed in the fent of this Collec	orm is correct to the ge and has complete	best of my knowed the required	owledge d attenda	e. I also undertake the ance and practical		
Place	<b>)</b> :										
				_							
Date	:										
				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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

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PRN:	Eligi	bility Status:	Examination 1101	45	Division/Section:	Roll No	).:	Maurit	
2018016400938706		Eligible						Mark	
Instruction Medium:			,		Nationality:	India			
			Student's F	Personal Informat	ion				
Student's Name: NERU	RKAR AKASH	1 SATISH			Mother's Name: S	MITA		Gender: Male	
Name in Vernacular Langu	age:नेरुरकर अ	ाकाश सतीश							
Address: B/01 amber dhara									
City: Dombivli, Taluka: Kaly	yan, District: T								
Telephone no.:			oile no: 9198330260			il : akashneru	rkar@gm	nail.com	
DOB: Aug 04, 2000		tegory: Reserved (	,	<del></del>	Handicap: No				
Previous Latest Examination		n III(Regular-Rev1	16)	Exam Ever	nt: Nov-2019	Sea	t No: 728	83431 (Status: Pass)	
Exam form appearance typ									
	ase select Par	per details which y			Assessment,CA - Co	llege Assessr	nent)		
SN Paper Code			Paper Na					AM - AT	
1 83001	+		ting IX - Financial A			Th-U			
2 83007			ting X - Cost Accour	nting		Th-U			
3 83013	Business Eco Commerce V			Th-U					
4 83014	Th-U								
5 83015	A[]								
6 83020	Computer sy	stems and Applica	itions Paper II			Th-U	A [ ] ;Th-	CA[]	
Convocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark Statement Fee		Total:							
Payment Details:	Amount Recei	ived:	-	College Receipt	No. and Date:				
DD No:		MICR No:		DD Date:		Bank	<b>c</b> :		
Center Preference (Code/N	Name):			· ·					
Venue Preference (Code/N	lame):								
To, Director, Board of Exar	mination and E	valuations / The C	Controller Of Examir	nation,			Place:	Vidyavihar	
I request permission to pres							<u>.</u>		
declare that all statement n have gone through the sylla							Date:		
request for any special con	ncession such	as change in time	or day fixed for univ	ersity Examination	on etc. on religious o	r any			
other ground. I understand cancelled or rejected.	that in the eve	ent of any informat	ion being found fals	se or incorrect, my	candidature is liable	e to be			
cancelled of rejected.							St	udent's Signature	
Declaration by Principal/HO	OD/Chairperso	n							
This form is carefully scruti	nized by the C	College staff and b	y me. The information	on printed in the f	orm is correct to the	best of my kn	owledge	. 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								
						Princ	ipal/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:	Eligibility Status:	Examination form 110146		Division/Section:	Roll No.	).:	120		
2018016400938714	Eligible		## <u>_</u> _				4		
Instruction Medium:				Nationality:	India				
		Student's Perso	onal Information	on					
Student's Name: <b>NETERV</b>	WALA NOMAN NAVED			Mother's Name: NA	ASEEM	G	Gender: Male		
Name in Vernacular Languag	je:नेतेरवाला नोमान नावेद								
	GHASWALA COMPOUND KA								
<u> </u>	, District: Thane, State: Mahara								
Telephone no.:	Category: Open	oile no: 919819873795		Handicap: No	ii : NETERWAI	LA08@0	GMAIL.COM		
DOB: Oct 28, 2000									
Previous Latest Examination	Seat	t No: 728	33433 (Status: Pass)						
Exam form appearance type:									
	se select Paper details which y			.ssessment,CA - Col	lege Assessm	nent)			
SN Paper Code		Paper Name					AM - AT		
	Financial Accounting and Audit	· · · · · · · · · · · · · · · · · · ·				••			
	Financial Accounting and Audit	ing X - Cost Accounting	3		Th-UA				
	Business Economics VI Commerce VI				Th-UA				
	Th-UA								
5 83015 D	Th-CA								
	Export Marketing Paper II				Th-CA				
Convocation Fee	Exam Form Late	Fee	Exam Form 9	Super Late Fee	Exan	mination	Fees		
Mark Statement Fee	Total:								
Payment Details: An	mount Received:	Col	llege Receipt N	No. and Date:					
DD No:	MICR No:		DD Date:		Bank:	<del></del>			
Center Preference (Code/Nar	me):		1						
Venue Preference (Code/Nar	· · · · · · · · · · · · · · · · · · ·								
•	nation and Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar		
I request permission to prese	ent myself for the ensuing exar	mination. I have remitted	d the prescribe		I hereby	_	· · · · · · · · · · · · · · · · · · ·		
	ade in this application are true, ous and the list of books prescr					Date:			
request for any special conce	ession such as change in time	or day fixed for universit	ity Examination	n etc. on religious or	r any				
other ground. I understand the	nat in the event of any informat								
cancelled or rejected.						Stu	udent's Signature		
Declaration by Principal/HOD	D/Chairperson								
responsibility of fulfillment/red	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 St	taff Signature			and Sign	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.

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 forr 110147	n No.:	Division/Section:	Roll No	).:	- 1- 11A		
:	2018016400938722	Eligible		III				- Agrow		
nstrı	uction Medium:	-			Nationality:	India				
			Student's Pers	onal Informati	on					
Stud	ent's Name: KHAN	SANA AFREEN OBEDUR REH	MAN		Mother's Name: KE	ESAR JAHAN	ı	Gender: Female		
Nam	e in Vernacular Langua	ige:खान सना आफरीन ओबेदुर रह	मान							
٩ddr	ess: D/7, JAI AMBEY S	SOCIETY, SUNDAR BAUGH KA	MANI, KURLA (W)							
City:	MUMBAI, Taluka: Mun	nbai, District: Mumbai City, State	e: Maharashtra, PIN: 40	00070						
ГеІер	phone no.:	Mob	ile no: 919930897557		Emai	l : 7557junaid	l@gmail.	com		
OOB: Mar 12, 2000 Category: Open Physically Handicap: No										
Previ	ous Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33352 (Status: Pass)		
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	se select Paper details which y	ou want to appear ( UA	- University A	ssessment,CA - Co	llege Assessn	nent)			
SN	Paper Code		Paper Name					AM - AT		
1	83001	Financial Accounting and Audit	ng IX - Financial Accounting			Th-U	A[]			
2	83007	Financial Accounting and Audit	ng X - Cost Accounting	ng X - Cost Accounting			A[]			
3	83013	Business Economics VI				Th-U	A[]			
4	83014	Commerce VI		er II			Th-UA[]			
5 83015 Direct and Indirect Taxation Paper II										
6	83016	Export Marketing 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:	mount Received:	Col	lege Receipt	No. and Date:					
DD N		MICR No:		DD Date:		Bank	 (:			
Cent	er Preference (Code/N	ame):				I				
/enu	e Preference (Code/Na	ame):								
Го, С	Director, Board of Exam	ination and Evaluations / The C	ontroller Of Examination	n,			Place:	Vidyavihar		
		ent myself for the ensuing exan					Doto			
decla nave	are that all statement m gone through the sylla	ade in this application are true, bus and the list of books prescr	complete and correct to bed for the examination	o the best of m o for which I a	ny knowledge and be m appearing. I shall	eliet. I not	Date:			
eque	est for any special cond	ession such as change in time	or day fixed for universi	ty Examination	n etc. on religious or	any				
	ground. I understand t elled or rejected.	hat in the event of any informati	on being found false or	incorrect, my	candidature is liable	e to be				
Jane	cilca of rejected.						Stu	udent's Signature		
Deck	aration by Principal/HO	D/Chairperson								
		nized by the College staff and by								
	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.									
					Т					
Place	<b>ə</b> :									
			_							
Date										
			College Staff Signature			Seal and Signature of				
			Conego Ciam Oignatare			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.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	Examination form 110148	n No.:	Division/Section:	Roll No	.: [	Cayatis 8		
	2018016400938737	Eligible						0 =		
Instru	uction Medium:				Nationality:	India				
			Student's Perso	onal Informati	on					
Stud	ent's Name: SHARM	A GAYATRI DEVIDUTT			Mother's Name: KA	MLA	G	Gender: Female		
Nam	e in Vernacular Langua	ge:शर्मा गायत्री डेव्हिडत								
Addr	ess: GR FLOOR ROOM	1 NO 4,SHREE GANESH ASI	HIRWAD CO OP HSG SC	OCIETY PK R	ROAD, MULUND WE	ST, MUMBAI	400080			
City:	MUMBAI, Taluka: Mum	bai, District: Mumbai City, Sta	te: Maharashtra, PIN: 40	0800						
Tele	phone no.:	Mo	bile no: 919867722917		Email	: BHAGIRAT	HIBAND	E@GMAIL.COM		
DOB	: Jun 14, 2001	Category: Open		Physically	Handicap: No					
Prev	ious Latest Examination	Details: Sem III(Regular-Rev	16)	Exam Even	t: Nov-2019	Seat	: No: 728	3580 (Status: Pass)		
Exan	n form appearance type	: Fresher								
Pape	er Details: Pleas	se select Paper details which	you want to appear ( UA	- University A	Assessment,CA - Col	lege Assessn	nent)			
SN	Paper Code		Paper Name					AM - AT		
1 83001 Financial Accounting and Auditing IX - Financial Accounting						Th-U	••			
2 83007 Financial Accounting and Auditing X - Cost Accounting						Th-U/	۹[]			
						Th-U	Γh-UA [ ]			
4	4 83014 Commerce VI Th-UA []									
5	5 83015 Direct and Indirect Taxation Paper II Th-CA []									
6	83016 E	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:								
	.=	.5	lo "							
		mount Received:	<u> </u>		No. and Date:	- In .				
DD N		MICR No:		DD Date:		Bank	<u>:</u>			
	er Preference (Code/Na									
	ue Preference (Code/Na	•								
		nation and Evaluations / The					Place:	Vidyavihar		
decla	are that all statement ma	ent myself for the ensuing exa ade in this application are true ous and the list of books preso	, complete and correct to	the best of m	ny knowledge and be	lief. I	Date:			
requ	est for any special conc	ession such as change in time	or day fixed for universit	ty Examination	on etc. on religious or	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									
Decl	Declaration by Principal/HOD/Chairperson									
resp	onsibility of fulfillment/re	ized by the College staff and loctification of the information. cording to university rules.								
Place	e:									
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.

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'e-Suvidha' account on



PRN: Eligibility Status:		Examination 1101		Division/Section:	Roll I	No.:	Aries.			
	2018016400938745		Eligible							
Instru	uction Medium:	•				Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: JOSHI	ANIKET VIJA	Υ			Mother's Name: Na	AMRATA	(	Gender: Male	
Nam	e in Vernacular Langua	ge:जोशी आ	नेकेत विजय							
Addr	ess: ROOM NO. 2 DUD	HNATH YA	DAV CHAWL DHA	RMVEER SAMBHA	JI ROAD PARSH	IIWADI GHATKOPA	R WEST			
City:	MUMBAI, Taluka: Kurla	a, District: Mu	ımbai Suburban, S	State: Maharashtra,	PIN: 400086					
Tele	ohone no.:		Mot	ile no: 9196196727	25	Emai	l : aniketjos	shiaj444@ç	gmail.com	
DOB	: Apr 23, 2001	Cat	egory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatior	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Se	eat No: 728	33302 (Status: ATKT)	
Exan	n form appearance type	: Fresher								
Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Asse								ssment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Aco	counting and Audit	ng IX - Financial Accounting				-UA [ ]		
2	83007	Financial Aco	counting and Audit	ing X - Cost Accour	iting		Th-	-UA [ ]		
3	83013	Business Eco	onomics VI				Th-	-UA [ ]		
4	83014	Commerce V	1				Th-	-UA [ ]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-	-CA[]		
6	83016	Export Marke	eting Paper II				Th-	-CA [ ]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Ex	xamination	Fees	
Mark	Statement Fee		Total:							
		mount Recei			College Receipt No. and Date:					
DD N			MICR No:		DD Date:		Ва	ınk:		
	er Preference (Code/Na									
	e Preference (Code/Na									
	Director, Board of Exami							Place:	Vidyavihar	
decla	uest permission to preso are that all statement ma gone through the syllal	ade in this ap	plication are true,	complete and corre	ct to the best of m	ny knowledge and be	elief. I	Date:		
requ	est for any special conc	ession such	as change in time	or day fixed for univ	ersity Examination	n etc. on religious o	r any			
othei	ground. I understand tlelled or rejected.	hat in the eve	ent of any informat	ion being found fals	e or incorrect, my	candidature is liable	e to be			
caric	clica of 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	<b>e</b> :									
Date	:									
				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.

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:	Eligi	bility Status:	Examination form 110150	ı No.:	Division/Section:	Rol	l No.:	- For	
:	2018016400938753		Eligible		I				nest	
Instru	ıction Medium:	•				Nationality:	India		•	
				Student's Perso	nal Informati	on				
Stud	ent's Name: <b>MAKW</b>	ANA MEET N	MANISH			Mother's Name: SI	HRUTI		Gender: Male	
Nam	e in Vernacular Langua	age:मकवाना रि	मेत मनिष							
Addr 075	ess: BUILDING NO. 14	10, A WING, (	GANESH DARSHA	N, ROOM NO. 103 VAL	LABH BAUC	LANE, NEW PANT	NAGAR,	GHATKOP	AR EAST, MUMBAI - 400	
City:	MUMBAI, Taluka: Mur	nbai, District:	Mumbai City, State	e: Maharashtra, PIN: 40	0075					
Telep	phone no.:		Mob	ile no: 919892160206		Emai	l : makwa	nameet42@	gmail.com	
DOB: Nov 29, 1999 Category: Open Physically Handicap: No										
Previ	ous Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	;	Seat No: 72	83386 (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 Asse								essment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	nting		Т	h-UA [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			Т	h-UA [ ]		
3	83013	Business Eco	onomics VI				Т	h-UA [ ]		
4	83014	Commerce V	/I				Т	Th-UA [ ]		
5 83015 Direct and Indirect Taxation Paper II							Т	h-CA [ ]		
6	83016	Export Marke	eting Paper II				Т	h-CA [ ]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee		Examinatior	n Fees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ived:	Coll	eae Receipt	No. and Date:				
DD N			MICR No:	<u> </u>	DD Date:		E	Bank:		
Cent	er Preference (Code/N	ame):	I	l						
	e Preference (Code/N	-								
To, C	Pirector, Board of Exam	nination and E	Evaluations / The C	Controller Of Examination	n,			Place:	Vidyavihar	
decla	re that all statement m	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examination	the best of n	ny knowledge and be	elief. I	Date:		
reque	est for any special cond	cession such	as change in time	or day fixed for universit ion being found false or	y Examination	on etc. on religious or	any			
	elled or rejected.	uiai iii uie eve	ent of any informati	ion being lound laise of	incorrect, my	candidature is liable	to be			
D l		D (Ol l						5	tudent's Signature	
This respo	Declaration by Principal/HOD/Chairperson  This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	<b>3</b> :									
Date				College Sta	College Staff Signature			Seal and Signature of		



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Application Form for Examination of Summer Session 2021 event.

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PRN: Eligibility Status:			Examination 1101		Division/Section:	Roll	No.:	South.		
	2018016400938761	Р	rovisional						Suite.	
Instru	uction Medium:	<del></del>				Nationality:	India		•	
				Student's P	ersonal Informati	on				
Stud	ent's Name: SAHA I	PREETI UTT.	AMKUMAR			Mother's Name: SI	MRAN	(	Gender: Female	
Name in Vernacular Language:सहा  प्रीती  उत्तमकुमार										
Addr	ess: RC barrack no.25,	, Room No.29	00, first floor Near	Sai Plaza Complex,	Gandhi Bazar C	hembur colony				
City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400074										
Telephone no.: Mobile no: 919324266688 Email : uttar								marsaha05	5041970@gmail.com	
DOB	: May 14, 2000	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev	6)	Exam Even	t: Nov-2019	Se	eat No: 72	83734 (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 Ass								sment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ng IX - Financial Accounting				-UA [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accour	ting		Th-	-UA [ ]		
3	83013	Business Ec	onomics VI				Th-	-UA [ ]		
4	83014	Commerce V	<b>1</b> 1				Th-	-UA [ ]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-	-CA[]		
6	83016	Export Marke	eting Paper II				Th-	-CA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	E	kamination	ı Fees	
Mark	Statement Fee		Total:							
					0 "					
		Amount Rece	Ι		College Receipt No. and Date:					
DD N			MICR No:		DD Date:		Ва	nk:		
	er Preference (Code/N									
	e 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 corre	ct to 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 univ	ersity Examination	on etc. on religious o	r any			
	r ground. I understand t elled or rejected.	that in the eve	ent of any informat	ion being found fals	e or incorrect, my	candidature is liable	e to be			
Caric	elled of rejected.							St	tudent'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	e:									
Date	:									
Date:				College	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)

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Seal and Signature of Principal/HOD/Chairperson



	<u>-</u>								
	PRN:	Eligib	oility Status:	Examination form 110152	n No.:	Division/Section:	Roll No.	.:	, de
2	2018016400938784	E	Eligible		l III				Angle
Instru	uction Medium:	_		-		Nationality:	India		
				Student's Perso	onal Informati	on			
Stude	ent's Name: <b>HEGDE</b>	ASHWATH S	SHEKAR			Mother's Name: SU	JNITHA	C	Gender: Male
Name	e in Vernacular Langua		प शेकर						
Addre	ess: room no 7 shriman	it nivas jai bh	avani nagar near	kannada school					
City:	thane, Taluka: Thane, [	District: Thane	e, State: Maharas	htra, PIN: 400601					
Telep	ohone no.:		Mob	oile no: 919702403683		Emai	l : ashwathheo	gde257@	ฏgmail.com
DOB:	: Jul 26, 2000	Cate	egory: Open			Handicap: No			
Previ	ious Latest Examination	າ Details: Sem	า III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33682 (Status: Pass)
Exam	n form appearance type	:: Fresher							
Pape	r Details: Pleas	se select Pap	er details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessm	nent)	
SN	Paper Code			Paper Name					AM - AT
1				ting IX - Financial Accou			Th-UA	۹[]	
2	83007 I	Financial Acco	ounting and Audit	ting X - Cost Accounting	l		Th-UA	4[]	
3	83013 E	Business Eco	nomics VI				Th-UA	۹[]	
4	83014	Commerce VI	1				Th-UA	۹[]	
5	83015	Direct and Ind	direct Taxation Pa	per II			Th-CA	۹[]	
6	83016	Export Market	ting Paper II				Th-CA	۹[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exan	mination	Fees
Mark	Statement Fee		Total:						
		mount Receiv			<del>.                                      </del>	No. and Date:			
DD N			MICR No:		DD Date:		Bank:	:	
	er Preference (Code/Na								_
	e Preference (Code/Na	-					<del></del>		
				Controller Of Examinatio				Place:	Vidyavihar
				nination. I have remitted complete and correct to				Date:	
have	gone through the syllab	bus and the lis	st of books prescri	ribed for the examination	n for which I a	m appearing. I shall	not	<u> </u>	
				or day fixed for universition being found false or					
	elled or rejected.	iat iii tiio o. c.	The Or drifty in its initial.	off boing found false 5.	1110011001, 1,	Canadataro lo lico.o	, 10 50		
		= 12. 1						Stu	udent's Signature
This t	Declaration by Principal/HOD/Chairperson  This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								
Place	<b>)</b> :								
Data.									

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.

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	PRN:	Eligi	bility Status:	Examination for 110153		Division/Section:	Roll No	:	White
	2018016400938792		Eligible						Mission
Instru	uction Medium:	•	,			Nationality:	India	-	
				Student's Pers	onal Informat	ion			
Stud	ent's Name: LINGA	YAT NIKHIL '	VISHWANATH			Mother's Name: V	ISHAKHA	G	Gender: Male
Nam	e in Vernacular Langua	age:लिंगायत ी	नेखिल विश्वनाथ						
Addr	ess: 101, MAHAKALI S	MRUTI BLD	G DINDAYAL CRO	SS ROAD SHASTRI N	IAGAR DOME	BIVLI WEST			
City:	DOMBIVLI, Taluka: Ka	lyan, District	: Thane, State: Ma	harashtra, PIN: 421202	<u> </u>				
Tele	ohone no.:		Mob	ile no: 918291799182		Ema	il : nikhiligayat	18@gma	ail.com
DOB	: Jul 20, 2000	Ca	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3375 (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 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	9		Th-U	A[]	
3	83013	Business Ec	onomics VI			Th-U	A[]		
4	83014	Commerce \	/I				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	Exar	mination	Fees
Mark	Statement Fee		Total:						
Pavn	nent Details:	Amount Rece	ived:	Co	llege Receipt	No. and Date:			
DD N		unount rece	MICR No:	100	DD Date:	140. drid Date.	Bank		
	er Preference (Code/N	ame).	INIOTYTO.		DD Date.		Barik	••	
	ue Preference (Code/Na								
	Director, Board of Exam		Evaluations / The C	ontroller Of Examination	on.			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	riace.	viuyaviiiai
decla	are that all statement m	ade in this ap	oplication are true,	complete and correct t	o the best of n	ny knowledge and b	elief. I	Date:	
	gone through the sylla								
othe:	r ground. Í understand t								
canc	elled or rejected.							Stu	ıdent's Signature
Decla	aration by Principal/HO	D/Chairperso	on .					9.0	ading eignata.
This resp	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	nized by the ( ectification of	College staff and by the information. H						
Place	ə:								
				_					
Date	:			Callaga Chaff Cinnatura			Sociand Signature of		
				College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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	PRN:	Eligibility Status:	Examination form 110154	n No.:	Division/Section:	Roll No.	::	01	
	2018016400938803	Eligible						Jenfo	
Instr	uction Medium:	•	!	١	Nationality:	India			
			Student's Perso	nal Informatio	n				
Stud	ent's Name: JAIN DE	VANSH LALIT			Mother's Name: Al	RUNA	(	Gender: Male	
Nam	e in Vernacular Languaç	ge:DEVANSH LALIT JAIN							
Addr	ess: Kalinga,1204 Neell	kanth kingdom vidyavihaar we	st						
City:	mumbai, Taluka: , Distri	ct: Mumbai City, State: Maha	ashtra, PIN: 400086						
Tele	ohone no.: 25020878	Mo	oile no: 917045600650		Emai	l : djain5676@	gmail.c	com	
DOB	: Jul 25, 1999	Category: Open		Physically I	Handicap: No				
Prev	ious Latest Examination	Details: Sem III(Regular-Rev	16)	Exam Event:	: Nov-2019	Seat	: No: 728	83288 (Status: Fail)	
Exar	n form appearance type:	Fresher							
Pape	er Details: Pleas	se select Paper details which	ou want to appear ( UA	<ul> <li>University As</li> </ul>	ssessment,CA - Co	llege Assessm	nent)		
SN	Paper Code		Paper Name					AM - AT	
1	83001 F	Financial Accounting and Audi	ting IX - Financial Accou	nting		Th-UA	۹[]		
2	83007 F	inancial Accounting and Audi	ting X - Cost Accounting		Th-UA	۹[]			
3	83013 E	Business Economics VI				Th-UA	۹[]		
4	83014	Commerce VI				Th-UA	۹[]		
5	83015	Direct and Indirect Taxation Pa	per II			Th-CA	۹[]		
6	83016 E	Export Marketing Paper II				Th-CA	۹[]		
Conv	ocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
	.=		lo .						
		mount Received:	Col	ege Receipt N	lo. and Date:	<u> </u>			
DD N		MICR No:		DD Date:		Bank	:		
	er Preference (Code/Na	<u>'</u>							
	ie Preference (Code/Na	, , , , , , , , , , , , , , , , , , ,							
		nation and Evaluations / The					Place:	Vidyavihar	
decla	are that all statement ma	ent myself for the ensuing exa de in this application are true	complete and correct to	the best of my	y knowledge and be	elief. I	Date:		
		ous and the list of books presc ession such as change in time							
othe	ground. I understand th	at in the event of any informa							
canc	elled or rejected.						St	udent's Signature	
Decl	aration by Principal/HOD	D/Chairperson							
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	э:								
D									
Date	:		College Sta	aff 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.:

'e-Suvidha' account on



	PRN:	Eligi	bility Status:	Examination f 11015		Division/Section:	Roll No	).:	
	2018016400938811		Eligible						haknag
Instr	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: THAKK	AR BHAVYA	DILIP			Mother's Name: IN	IDIRA	(	Gender: Male
Nam	e in Vernacular Langua	ge:भव्य ठक्क	<b>र</b>						
Addı	ess: ROOM NO 23 , FII	RST FLOOR	VASANT NIVAS	, NEAR AMBAJI DH	AM MULUND V	VEST			
City:	MUMBAI, Taluka: Mum	nbai, District:	Mumbai City, Stat	e: Maharashtra, PIN:	400080				
Tele	phone no.:		Mot	ile no: 91965336362	28	Ema	II : BHAVYATI	HAKKEF	R@GAMIL.COM
DOE	: Jul 04, 2001	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: 72	83626 (Status: Fail)
Exar	n form appearance type	: Fresher							
Pape	er Details: Plea	se select Pa	oer details which y	ou want to appear (	JA - University A	Assessment,CA - Co	llege Assessn	ment)	
SN	Paper Code			Paper Nar	ne				AM - AT
1	83001	Financial Acc	counting and Audit	ing IX - Financial Ac	counting		Th-U		
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	ing		Th-U	A[]	
3	83013	Business Eco	onomics VI				Th-U	Th-UA[]	
4	83014	Commerce V	7				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[]	
Con	ocation Fee		Exam Form Late	Fee	Fee Exam Form Super Late Fee			mination	Fees
Mark	Statement Fee		Total:						
Davr	ment Details:	mount Recei	wed:	1,	College Receipt	No. and Date:			
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	er Preference (Code/Na	ame).	morrito.		DD Bate.			•	
	ue Preference (Code/Na								
	Director, Board of Exam		valuations / The C	Controller Of Examina	ation,			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	1 1000.	Vidyaviilai
	are that all statement ma							Date:	
	egone through the syllal est for any special conc								
othe	r ground. I understand t	hat in the eve	ent of any informat	ion being found false	or incorrect, my	candidature is liable	e to be		
cano	elled or rejected.							St	udent's Signature
Decl	aration by Principal/HO	D/Chairperso	on .						Ü
This	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) ac			<b>J</b>					
Plac	e:								
Dot-									
Date				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:	Eligi	ibility Status:	110156	II INO	Division/Section:	Roll No	).:	Khyati"	
	2018016400938826		Eligible		III				10.29.00	
nstr	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stud	ent's Name: MARU	KHYATI MAH	HENDRA			Mother's Name: V	ARSHA	C	Gender: Female	
Nam	e in Vernacular Langua	age:मारू ख्यात	- 11 महेंद्र							
Addr	ess: O WING, 402,NA	VNEET NAGA	AR, DESALEPADA	, OPP.BHADRA COMP	PLEX, LODHA	A HERITAGE,				
City:	KALYAN, Taluka: Kaly	/an, District: 1	hane, State: Maha	arashtra, PIN: 421201						
Tele	phone no.:		Mob	ile no: 917045077747		Ema	il : khyati112m	naru@gn	nail.com	
OOB	: Dec 01, 2000	Ca	tegory: Open		Physically	Handicap: No				
⊃rev	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33398 (Status: ATKT)	
Exar	n form appearance typ	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Assessn	sessment)		
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	<u> </u>	Th-U	A[]			
3	83013	Business Ec	onomics VI			Th-U	A [ ]			
4	83014	Commerce \	/I				Th-U	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:							
Daver	nent Details:	Amount Rece	ivod:	Call	logo Possint	No. and Date:				
DD N		Alliount Nece	MICR No:		DD Date:	No. and Date.	Bank			
	er Preference (Code/N	lame):	IVIICITIVO.		DD Date.		Dank			
	ue Preference (Code/N									
	`			Controller Of Examinatio	.n			Diago	\fide covilhan	
				nination. I have remitted		ed fee for the same	I herehy	Place:	Vidyavihar	
decla	are that all statement m	nade in this ap	oplication are true,	complete and correct to	the best of n	ny knowledge and b	elief. I	Date:		
				ibed for the examinatior or day fixed for universi						
				ion being found false or						
canc	elled or rejected.							Stu	udent's Signature	
Decl	aration by Principal/HC	)D/Chairners						0.	adont 5 Oignature	
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to								owledae	Lalso undertake the	
resp	onsibility of fulfillment/r	ectification of	f the information. H	e/she is regular student						
cour	se/term work (if any) a	ccording to ur	niversity rules.							
Plac	e:									
Date	C.			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.:

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 form No.: 110157	Division/Section:	Roll No.	.:	P.M. Savla		
:	2018016400938842		Eligible		ı					
Instru	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	on				
Stude	ent's Name: SAVLA	A PANKTI MAI	NSUKH			Mother's Name: Sh	НОВНА	(	Gender: Female	
Nam	e in Vernacular Langua	age:Pankti								
	ess: 2/2, Ashok Bhava									
		a, District: Mur		tate: Maharashtra, PIN: 4	400078					
	phone no.: 25783775			oile no: 918291255647			il : panktisavla2	28@gm	nail.com	
	3: Sep 28, 2000		tegory: Open		<del> </del>	Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83536 (Status: Pass)	
	n form appearance type									
	1	ase select Par	per details which y	ou want to appear ( UA -	- University A	Assessment,CA - Co	lege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1		+		ting IX - Financial Accour			Th-UA			
2	83007			ting X - Cost Accounting		Th-UA				
3	83013	Business Eco	onomics VI			Th-UA	۱[]			
4	83014	Commerce V	<u>/I</u>				Th-UA			
5	83015		ndirect Taxation Pap				Th-CA	۱ [ ]		
6	83020	Computer sy	stems and Applica	·			Th-UA	A [ ] ;Th-	-CA[]	
Conv	vocation Fee		Exam Form Late I	Fee	ee Exam Form Super Late Fee			mination	ı Fees	
Mark	Statement Fee		Total:							
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		Amount Recei	1			No. and Date:	Dank			
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	ter Preference (Code/N									
	ue Preference (Code/Na		The C	II - Of Francis als						
				Controller Of Examination		to o the second		Place:	Vidyavihar	
decla	are that all statement m	nade 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 cond	cession such	as change in time	or day fixed for university	ty Examinatio	on etc. on religious or	r any			
		that in the eve	ent of any informati	tion being found false or i	incorrect, my	candidature is liable	to be			
Cano	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HO	D/Chairperso	on							
This respo	form is carefully scrutir	inized by the Crectification of	College staff and by f the information. He	y me. The information pr le/she is regular student						
Place	e:									
Date	:						l <u>.</u> .			
				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]

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	PRN:	Eligi	ibility Status:	Examination for 110158		Division/Section	on: F	Roll No.:	Sarrage -	
2	2018016400938857	Р	Provisional							
nstrı	uction Medium:	-				Nationality:	India	ı	•	
				Student's Per	rsonal Informati	on				
Stude	ent's Name: SANKF	PAL NIKHIL F	RAJENDRA			Mother's Nam	ne: SANDHY	/A	Gender: Male	
Name	e in Vernacular Langua	age:संकपाळ	नेखिल राजेंद्र							
۸ddr	ess: Shanti niketan cha	awl Suryanag	ar Lbs road							
<u> </u>	Vikroli, Taluka: Kurla,	District: Mum								
	phone no.:		Mot	oile no: 918108686941			Email : craz	yprankers07	@gmail.com	
	: May 25, 2000		tegory: Open		Physically	Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019		Seat No: 7	7283532 (Status: Pass)	
	n form appearance type									
	er Details: Plea	ase select Pa	per details which y	ou want to appear ( U	A - University A	ssessment,CA	· - College A	ssessment)		
SN	Paper Code			Paper Name				<u> </u>	AM - AT	
1	83001	+	<del>-</del>	ing IX - Financial Acco	<u>-</u>			Th-UA[]		
2	83007			ing X - Cost Accountin	ng			Th-UA[]		
3	83013	Business Ec	onomics VI					Th-UA[]		
4	83014	Commerce V						Th-UA[]		
5	83015	Direct and In	ndirect Taxation Pa	per II				Th-CA[]		
6	83016	Export Marke	eting Paper II		·			Th-CA[]		
Conv	vocation Fee		Exam Form Late	ee Exam Form Super Late Fee			Э	Examinati	ion Fees	
Mark	Statement Fee		Total:							
Payn	ment Details:	Amount Rece		Cr	ollege Receipt	No. and Date:				
DD N			MICR No:		DD Date:			Bank:		
	er Preference (Code/N		1							
	ue Preference (Code/N									
Го, С	Director, Board of Exam	nination and F	Evaluations / The C	ontroller Of Examinat	ion,			Place	e: <b>Vidyavihar</b>	
	uest permission to pres							oy	•	
	are that all statement me gone through the sylla							Date	): 	
eque	est for any special cond	ncession such	as change in time	or day fixed for univers	sity Examinatio	on etc. on religio	ous or any			
	r ground. I understand telled or rejected.	that in the eve	ent of any informat	ion being found false o	or incorrect, my	candidature is	liable to be			
anc									Student's Signature	
Deck	aration by Principal/HC	OD/Chairpers	on							
									dge. I also undertake the	
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular stude	nt of this Collec	je and has com	pleted the r	equired atter	ndance and practical	
Place	e:									
				_						
Date:	•									
				College S	Staff Signature			Seal and Signature of		
				l consignation				Principal/H	IOD/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 No.: 110159		Division/Section:	Roll No	).:	Rining	
	2018016400938865		Eligible						1 Jesse	
nstrı	uction Medium:	•				Nationality:	India	'		
				Student's Pers	sonal Informati	on				
Stud	ent's Name: BAGW	E RITIKA AV	INASH			Mother's Name: N	TISHA	(	Gender: Female	
Nam	e in Vernacular Langua	age:बागवे रिति	नेका अविनाश							
٩ddr	ess: 403 BALI TOWER	STATION R	OAD KALWA WES	ST						
City:	THANE, Taluka: Than	e, District: Th	ane, State: Mahara	ashtra, PIN: 400605						
Tele	ohone no.:		Mob	ile no: 919594473106		Emai	l : ritikabagwe	e2203@¢	gmail.com	
OOB	: Mar 22, 2000	Cat	tegory: Open		Physically	Handicap: No				
⊃rev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33154 (Status: ATKT)	
	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	ment)		
SN	Paper Code			Paper Name	<b>!</b>				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acco	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	/I				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-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:	Co	llege Receipt	No. and Date:				
DD N		1110011111000	MICR No:		DD Date:	Tto: and Bate.	Bank	 Sank <sup>.</sup>		
	er Preference (Code/N	ame).	1		1		1			
	ie Preference (Code/Na									
Го, С	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examination	on,			Place:	Vidyavihar	
	uest permission to pres							Data		
	are that all statement m gone through the sylla							Date:		
equ	est for any special cond	cession such	as change in time	or day fixed for univers	sity Examination	on etc. on religious of	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			
Student's Signature							udent's Signature			
Deck	aration by Principal/HO	D/Chairperso	on							
This	form is carefully scrutir	nized by the C	College staff and by	r me. The information μ	orinted in the fo	orm is correct to the	best of my kn	owledge	. I also undertake the	
	onsibility of fulfillment/r se/term work (if any) ac			e/she is regular studer	nt of this Colle	ge and has complete	d the required	d attenda	ance and practical	
Jours	Societiii work (ii ariy) at	Joording to ul								
Place	e:									
	-									
Date										
	<del>.</del>			College Staff Signature			Seal and Signature of			
				Sollogo 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 f 11016		Division/Section:	Roll No	::	. 2. 🛇	
	2018016400938873		Eligible						1 July 8	
Instru	uction Medium:	•				Nationality:	India	·		
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: SHARM	MA POOJA S	HIVKUMAR			Mother's Name: SI	HASHI	(	Gender: Female	
Nam	e in Vernacular Langua	age:शर्मा पूज	ा शिवकुमार							
Addr	ess: ROOM NO. 02 SA	INATH ROAI	D PANCHAM YAD	AV CHAWL GANES	SH MAIDAN GH	ATKOPAR WEST N	IUMBAI			
City:	MUMBAI, Taluka: Kurl	a, District: Μι	ımbai Suburban, S	tate: Maharashtra, F	PIN: 400086					
Tele	ohone no.:		Mot	ile no: 91965310964	18	Emai	il : abc@gmai	l.com		
DOB	: Apr 27, 2001	Cat	tegory: Open		Physically	Handicap: No				
Prev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33581 (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	ssessment,CA - Co	llege Assessn	nent)		
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	ting	Th-U	A[]			
3	83013	Business Ec	onomics VI					A[]		
4	83014	Commerce V	-				Th-U	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 [ ]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
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DD N		Amount Rece	MICR No:		College Receipt	No. and Date:	Donle			
		omo):	MICK NO.		DD Date:		Bank			
	er Preference (Code/N									
	ue Preference (Code/Na		Tralizations / The C	entreller Of Evenin	-4i			I		
	Director, Board of Exam					ad foo for the come	l harabı	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:		
	est for any special cond									
othe	ground. I understand t	that 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	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	ectification of	the information. H							
Place	ə:									
Date	<u> </u>									
				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]

Examination form No.:

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	PRN:	Eligi	bility Status:	Examination form	m No.:	Division/Section:	Roll No	.:	Alterga:	
	2018016400938881		Eligible		III				TA.	
Instru	uction Medium:					Nationality:	India			
				Student's Pers	onal Informati	on				
Stud	ent's Name: SURTI	AKANSHA J	AGRUTBHAI			Mother's Name: M	ANISHA	G	ender: Female	
Nam	e in Vernacular Langua	age:सुरती आक	जंशा जागृतभाई							
Addr	ess: 204, vard vinayak	moreshwar n	agar telco service	center mharal						
City:	kalyan, Taluka: Kalyar	n, District: Tha	ne, State: Mahara	shtra, PIN: 421301						
	ohone no.:		Mob	ile no: 918830030790	1	Ema	il : asurti801@	gmail.co	m	
	: Nov 22, 1999		egory: Open			Handicap: No				
	ious Latest Examinatio		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3616 (Status: Pass)	
Exan	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	oer details which y	ou want to appear ( UA	University A	Assessment,CA - Co	llege Assessn	ssment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001			ing IX - Financial Accor			Th-U	A [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting	9		Th-UA	A [ ]		
3	83013	Business Eco					Th-U			
4	83014	Commerce V	7				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-CA	A[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination l	ees	
Mark	Statement Fee		Total:							
Pavn	nent Details:	Amount Recei	ved:	Co	llege Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	ank:		
Cent	er Preference (Code/N	ame):			1					
	ie Preference (Code/N									
To, E	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examination	on,			Place:	Vidyavihar	
				nination. I have remitted complete and correct to				Date:		
have	gone through the sylla	bus and the li	ist of books prescr	ibed for the examinatio	n for which I a	m appearing. I shall	not			
				or day fixed for univers on being found false o						
	elled or rejected.		one of any informati	on boing round raise of						
								Stu	dent's Signature	
	aration by Principal/HC	•								
resp	form is carefully scrutir onsibility of fulfillment/r se/term work (if any) ac	ectification of	the information. H	r me. The information pe/she is regular studen	orinted in the f t of this Collec	orm is correct to the ge and has complete	best of my kno ed the required	owledge. d attendar	I also undertake the nce and practical	
Dloc	·									
Place	ਰ. 									
Dete				_						
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)

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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 f 11016		Division/Section:	Roll No	).:	May	
:	2018016400938896		Eligible							
nstrı	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stude	ent's Name: <b>KOTIA</b> l	N MEGHNA J	JAIKISHAN			Mother's Name: St	JNANDA		Gender: Female	
Nam	e in Vernacular Langua	age:कोटीण मेर	धना जयकिशन							
Addr	ess: OPP HANUMAN I	MANDIR 29/1	06, B WING, SUB	HASH NAGAR CHE	MBUR					
	MUMBAI, Taluka: Kurl	la, District: Mu	umbai Suburban, S	state: Maharashtra, F	PIN: 400071					
Teler	ohone no.:			oile no: 91773800864	44	Emai	il : meghnakot	tian7@g	mail.com	
DOB	: Sep 19, 2000	Cat	tegory: Open		Physically	Handicap: No				
	ious Latest Examinatio		m III(Regular-Rev1	.6)	Exam Event: Nov-2019 Seat No: 7283366 (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 - University A	Assessment,CA - Co	llege Assessn	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	ıting		Th-U/	A[]		
3	83013	Business Eco	onomics VI				Th-U/	Th-UA[]		
4	83014	Commerce V	/I				Th-U/	A[]		
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	Exar	mination	Fees	
Mark	Statement Fee		Total:							
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	Director, Board of Examuses permission to pres					ad foo for the same	Lharahy	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									
other	ground. I understand t									
canc	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HC	D/Chairperso	on					-		
This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the responsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.								e. I also undertake the ance and practical		
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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Instruction Medium: Student's Personal Information Student's Name: KOTIAN SONAM GANESH Mother's Name: SHEETAL Gender: Female  Name in Vernacular Language-कोटिंक सोनम्म गणेश  Address: AMANKUNJ NEAR CHAUGALE NIWAS ROOM NO.122, ARVIND PATIL WADI GHATLA VILLAGE  City: MUMBAI, Taluka: Kurla, District: Mumbal Suburban, State: Maharashtra, PIN: 400071  Felephone no.: Mobile no: 918369948798  [Email: kotiansonam@gmail.com  DOB: Feb 88, 2000 [Category: Open Previous Latest Examination Details: Sem Ill(Regular-Rev16) [Exam Event: Nov-2019 [Seat No: 7283367 (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 Accounting and Auditing IX - Financial Accounting Th-UA []  3 83013 [Business Economics VI Financial Accounting and Auditing X - Cost Accounting Th-UA []  4 83014 [Commerce VI Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect Taxation Paper II Financial Indirect		PRN:	Eligil	bility Status:	Examination for 110163	m No.:	Division/Section:	Roll No	0.:	LX
Student's Name: KOTIAN SONAM GANESH Mother's Name: SHEETAL Gender: Female  Name in Vernacular Language:कोटिन सोनम गणेश  Address: AMANKUNJ NEAR CHAUGALE NIWAS ROOM NO.122, ARVIND PATIL WADI GHATLA VILLAGE  City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PiN: 400071  Telephone no: Mobile no: 918369948798 Email: kotiansonam@gmail.com  DOB: Feb 08, 2000 Category: Open Physically Handicap: No  Previous Latest Examination Details: Sem Ill(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283367 (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 Accounting and Auditing IX - Financial Accounting Th-UA []  2 83007 Financial Accounting and Auditing IX - Fost Accounting Th-UA []  4 83014 Commerce VI Th-UA []  5 83015 Direct and Indirect Taxation Paper II Th-CA []  Convocation Fee Exam Form Late Fee Exam Form Super Late Fee Examination Fees  Mark Statement Fee Total:  Payment Details: Amount Received: College Receipt No. and Date:  DD No: MICR No: DD Date: Bank:  Center Preference (Code/Name):  Venue Preference (Code/Name):  Venue Preference (Code/Name):  To, Director, Board of Examination and Evaluations / The Controller Of Examination, Paper II place: Vidyavihar Inave gove through the sylabus and the list of books prescribed for the examination for the ensuing examination. I have remitted the prescribed fee for the same. I hereby leave through the sylabus and the list of books prescribed for the examination of the convocation of the previous of the paper in the ord of the convocation of the remaining of the form which I am appearing. Istall ord any special concession and the in the event of any information being found false or incorrect, my candidature is liable to be accorded to the scandar of the previous of the paper in the ord of yielded or niversery examination fee. Con relegioned.  Student's Signature  Declaration by	2	2018016400938915		Eligible		III				Some GK
Student's Name: KOTIAN SONAM GANESH   Mother's Name: SHEETAL   Gender: Female	Instru	iction Medium:	•				Nationality:	India		
Name in Vernacular Language जोटिन सोनम गणेश Address: AMANKUNJ NEAR CHAUGALE NIWAS ROOM NO.122, ARVIND PATIL WADI GHATLA VILLAGE  City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071  Telephone no.:    Mobile no: 918359948798   Email: kotiansonam@gmail.com   Physically Handicap: No   Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283367 (Status: ATKT)   Exam form appearance type: Fresher   Paper Potalis: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)   November   Paper Name   AM - AT     83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []     3 83013   Business Economics VI   Th-UA []     4 83014   Commerce VI   Th-UA []     6 83023   Investment Analysis and Portfolio Management Paper II   Th-CA []     Convocation Fee   Exam Form Late Fee   Exam Form Super Late Fee   Examination Fees     Mark Statement Fee   Total:   MilcR No:   DD Date:   Bank:     Control Paper Reference (Code/Name):     Venue Preference (Cod					Student's Pers	onal Informati	on			
Address: AMANKUNJ NEAR CHAUGALE NIWAS ROOM NO.122, ARVIND PATIL WADI GHATLA VILLAGE  City. MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071  Telephone no.:    Mobile no: 918369948798   Email: kotiansonam@gmail.com   Physically Handicap: No   Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283367 (Status: ATKT)   Stam form appearance type: Fresher   Paper Obtails: 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-UA []     3   83013   Business Economics VI   Th-UA []     4   83014   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 []     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):     Venue Preference (Code/Name):	Stude	ent's Name: <b>KOTIA</b>	N SONAM GA	NESH			Mother's Name: SI	HEETAL	(	Gender: Female
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400071  Telephone no.:   Mobile no: 918369948798   Email: kotiansonam@gmail.com  DOB: Feb 08, 2000   Category: Open   Physically Handicap: No  Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283367 (Status: ATKT)  Exam form appearance type: Fresher  Paper Datalis: 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-UA []  2   83007   Financial Accounting and Auditing IX - Cost Accounting   Th-UA []  3   83013   Business Economics VI   Th-UA []  4   83014   Commerce VI   Th-UA []  5   83015   Direct and Indirect Taxation Paper II   Th-CA []  Convocation Fee   Exam Form Late Fee   Exam Form Super Late Fee   Examination Fees    Mark Statement Fee   Total:   Th-CA []  Payment Details:   Amount Received:   College Receipt No. and Date:    DD No:   MICR No:   DD Date:   Bank:    Center Preference (Code/Name):    Venue Preference (Code/Name):	Name	e in Vernacular Langua	age:कोटिन सोव	नम गणेश						
Mobile no: 918369948798   Email: kotiansonam@gmail.com	Addre	ess: AMANKUNJ NEA	R CHAUGALI	E NIWAS ROOM N	IO.122, ARVIND PATI	L WADI GHAT	LA VILLAGE			
DOB: Feb 08, 2000   Category: Open   Physically Handicap: No   Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283367 (Status: ATKT)   Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)  November 1	City:	MUMBAI, Taluka: Kurl	la, District: Mu	ımbai Suburban, S	tate: Maharashtra, PIN	: 400071				
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Investment Analysis and Portfolio Management Paper II	4	83014	Commerce V	Ί				Th-U	JA []	
Convocation Fee	5	83015	Direct and In-	direct Taxation Pa	per II			Th-C	A[]	
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, 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 for which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination to reconstitution of which I am appearing. I shall not request for any special concession such as change in time or day fixed for university Examination to reconstitution of 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	6	83023	Investment A	nalysis and Portfo	lio Management Paper	II		Th-C	A[]	
Payment Details:    DD No:	Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
DD 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.  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	Mark	Statement Fee		Total:						
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Date:	Date:									
College Staff Signature  Seal and Signature of  Principal/HOD/Chairperson					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 11016		Division/Section:	Roll No.	).:	Khushbu
2	2018016400938923		Eligible					ļ	1
nstrı	uction Medium:			1		Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: VARIA	KHUSHBU N	VAROTTAM			Mother's Name: M	EENA		Gender: Female
Nam	e in Vernacular Langua	age:KHUSHB	,U						
Addr	ess: B/3,KRANTIVEER	₹ SOCIETY,G	ALI NO 29, KAMA	RAJ NAGAR,V.N.M/	ARG, GHATKOF	'AR (EAST)MUMBA	J-400077		
City:	MUMBAI, Taluka: Kurla	a, District: Mu	umbai Suburban, S	tate: Maharashtra, P	'IN: 400077				
Teler	ohone no.:		Mot	oile no: 91913781884	17	Ema	il : khushbuvar	ria9@gr	mail.com
DOB	: Jan 01, 1900	Cat	tegory: Open		Physically	Handicap: No			
	ious Latest Examination		m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Seat	ι No: 728	83647 (Status: ATKT)
Exan	n form appearance type	e: Fresher							
Pape	r Details: Plea	ase select Pa	per details which y	rou want to appear ( l	UA - University A	ssessment,CA - Co	llege Assessn	nent)	
SN	Paper Code			Paper Nan	ne				AM - AT
1	83001	Financial Acr	counting and Audit	ting IX - Financial Acc	counting		Th-UA	A [ ]	
2	83007	Financial Acr	counting and Audit	ting X - Cost Account	ing	Th-UA	Ā[]		
3	83013	Business Eco	onomics VI				Th-UA	A [ ]	
4	83014	Commerce V	/I				Th-UA	A [ ]	
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-CA	A [ ]	
6	83023	Investment A	Analysis and Portfo	lio Management Pap	oer II		Th-CA	A [ ]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees
Mark	Statement Fee		Total:						
			<u> </u>						
		Amount Recei	T		College Receipt	No. and Date:	<del></del>		
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	e Preference (Code/Na								
	Director, Board of Exam							Place:	Vidyavihar
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reque	est for any special conc	cession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious o	r any		
	ground. I understand t elled or rejected.	that in the eve	ent of any informate	on being found talse	or incorrect, my	candidature is liable	e to be		
Jano	med of rejected.							St	tudent's Signature
Decla	aration by Principal/HO	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.								I also undertake the ance and practical	
Place	e:								
Date:									
				College Staff Signature Seal and Signature of Principal/HOD/Chairpe					



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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 11016		Division/Section:	Roll No	).:	SAfral		
	2018016400938931		Eligible						VAIIS.
Instr	uction Medium:					Nationality:	India		
				Student's P	ersonal Informati	on			
Stud	ent's Name: SHAIKH	AFZAL MO	HD MANZAR			Mother's Name: S	ALAI KHATO	ON (	Gender: Male
Nam	e in Vernacular Langua	ge:शेख अफझ	ाल मोहम्मद मांजर						
Addı	ess: C/303 YOGESHW	AR APT MAI	N BAZAR						
City:	THANE, Taluka: Thane	, District: Tha	ane, State: Mahar	ashtra, PIN: 400612					
Tele	phone no.:		Mot	ile no: 9197696604	80	Emai	l : afzalmanza	arshaikh	2000@gmail.com
DOE	: Oct 01, 2000	Cat	egory: Open		Physically	Handicap: No			
Prev	ious Latest Examination	Details: Ser	m III(Regular-Rev	6)	Exam Even	t: Nov-2019	Sea	t No: 728	83562 (Status: Pass)
Exar	n form appearance type	: Fresher							
Pape	er Details: Pleas	se select Par	oer 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 F	inancial Acc	counting and Audit	ing IX - Financial Ac	ng IX - Financial Accounting T				
2	83007 F	inancial Acc	counting and Audit	ing X - Cost Accoun	ng X - Cost Accounting			A[]	
3	83013 E	Business Eco	onomics VI				Th-U	A[]	
4	83014	Commerce V	7				Th-U	A[]	
5	83015 I	Direct and Inc	direct Taxation Pa	per II			Th-C	A[]	
6 83020 Computer systems and Applications Paper II Th-UA								A [ ] ;Th-	·CA[]
Con	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
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	Director, Board of Exami	,	valuations / The C	Controller Of Examin	ation.			Place:	Vidyavihar
	uest permission to prese					ed fee for the same	I hereby	riace.	viuyaviilai
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othe	r ground. I understand th	nat in the eve	ent of any informat	ion being found false	e or incorrect, my	candidature is liable	e to be		
cano	elled or rejected.							St	udent's Signature
Decl	aration by Principal/HOI	D/Chairperso	en .					<u> </u>	adomo olgilataro
This	form is carefully scrutini	zed by the C	College staff and b						
	onsibility of fulfillment/re se/term work (if any) acc			e/she is regular stud	dent of this Collec	ge and has complete	d the required	d attenda	ance and practical
Plac	e:								
Date									
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]

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	PRN:	Eligibility Status:	Examination form 110166	n No.:	Division/Section:	Roll No	.:	Jectedani		
:	2018016400938946	Provisional						0 4		
nstru	ıction Medium:	•			Nationality:	India				
			Student's Perso	onal Informati	on					
Stud	ent's Name: ADANI	JEET VINESH			Mother's Name: Ma	ADHUBALA	C	Gender: Male		
Nam	e in Vernacular Langua	ıge:जीत विनेश अदानी								
Addr	ess: B/207. Kailash Da	rshan Appt Mahatma phule road	t							
City:	Dombivli, Taluka: Kaly	an, District: Thane, State: Maha	rashtra, PIN: 421202							
ГеІер	phone no.:	Mob	ile no: 919136397144		Emai	l : adanijeet7(	@gmail.d	com		
OOB	Oct 06, 2000	Category: Open		Physically	Handicap: No					
Previ	ous Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	33136 (Status: Pass)		
Exan	n form appearance type	e: Fresher								
Pape	r Details: Plea	se select Paper details which y	ou want to appear ( UA	- University A	ssessment,CA - Col	lege Assessn	nent)			
SN	Paper Code		Paper Name	·				AM - AT		
1	83001	Financial Accounting and Audit	ng IX - Financial Accounting				٩[]			
2	83007	Financial Accounting and Audit	ng X - Cost Accounting				٩[]			
3	83013	Business Economics VI				Th-U	٩[]			
4	83014	Commerce VI				Th-U	٩[]			
5 83015 Direct and Indirect Taxation Paper II								h-CA[]		
6	83023	Investment Analysis and Portfo	lio Management 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 Received:	Col	lege Receint I	No. and Date:					
DD N		MICR No:	001	DD Date:	to. and Bato.	Bank	-			
	er Preference (Code/N									
	e Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·								
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, bus and the list of books prescr					Date:			
		cession such as change in time								
		hat in the event of any informati	on being found false or	incorrect, my	candidature is liable	to be				
canc	elled or rejected.						Stu	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	d attenda	ance and practical		
Jour	screenii work (ii ariy) ac	cording to driiversity rules.								
Place	):									
			_							
Date										
			College Sta	aff Signature			and Sign			
			conogo cian cignatano			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 110167	n No.:	Division/Section:	Roll No.:	:	S.R.T
2	2018016400938954	Eligible		III				
Instru	uction Medium:	•	•		Nationality:	India		
			Student's Perso	onal Informati	on			
Stude	ent's Name: THAKK	AR SHUBH RAMESH			Mother's Name: PR	ABHA	G	Gender: Male
Name	e in Vernacular Langua	ge:ठक्कर शुभ रमेश						
Addre	ess: Room 506 ,Louis A	Appt,Louiswadi, Opp tjsb Bank	Thane (W). Room 005,	shilpa Appt, n	ear tjsb Bank Thane	(W).		
City:	Thane, Taluka: Thane,	District: Thane, State: Mahara	shtra, PIN: 400604					
Telep	phone no.:	Mc	bile no: 917506220330		Email	: shubhthakka	ar7506@	@gmail.com
DOB	3: Jul 21, 2000	Category: Open		Physically	Handicap: No			
Previ	ious Latest Examination	n Details: Sem III(Regular-Rev	16)	Exam Even	nt: Nov-2019	Seat	No: 728	33761 (Status: ATKT)
Exam form appearance type: Fresher								
Pape	er Details: Pleas	se select Paper details which	you want to appear ( UA	- University A	Assessment,CA - Coll	ege Assessm	ient)	
SN	Paper Code		Paper Name					AM - AT
1	83001 F	Financial Accounting and Aud	iting IX - Financial Accou	ınting		Th-UA	·[]	
2		Financial Accounting and Aud	iting X - Cost Accounting	J		Th-UA	·[]	
3	83013 E	Business Economics VI		Th-U/				
4 83014 Commerce VI							۱[]	
5 83015 Direct and Indirect Taxation Paper II							۱] ۱	
6	83020	Computer systems and Applic	ations Paper II			Th-UA	۲۱] ;Th-C	CA[]
Conv	vocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exam	nination	Fees
Mark	Statement Fee	Total:						
	.=							
		Amount Received:	<u>_</u>	<del>,                                     </del>	No. and Date:			
DD N		MICR No:		DD Date:		Bank:		
	ter Preference (Code/Na	<u>'</u>						
	ue Preference (Code/Na	,						
		ination and Evaluations / The					Place:	Vidyavihar
		ent myself for the ensuing exa ade in this application are true					Date:	
have	gone through the syllab	bus and the list of books preso	cribed for the examination	n for which I a	am appearing. I shall r	not	<del></del>	
		cession such as change in time					i	
	r grouna. I understand tr :elled or rejected.	hat in the event of any informa	tion being tourid raise of	incorrect, my	candidature is itable	to be	i	
							Stu	udent's Signature
	aration by Principal/HOI							
This	form is carefully scruting	nized 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	wledge.	. I also undertake the
		ectification of the information. I ccording to university rules.	1e/she is regular student	t of this Collec	je and nas completed	I the required	attenda	ince and practical
Place	e:							
			_					
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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PRN: Eligibility Status:				Examination fo 110168		Division/Section:	Roll No	.:	/ Jag	
	2018016400938962		Eligible						UE	
Instr	uction Medium:	•				Nationality:	India			
				Student's Per	sonal Informati	on				
Stud	ent's Name: SHAH	BHISHMA DE	VEN			Mother's Name: V	ANDANA	(	Gender: Male	
Nam	e in Vernacular Langua	age:bhisma								
Addr	ess: VLVG HOSTEL(	CAMA LANE	KIROL ROAD							
City:	GHATKOPAR, Taluka	: Kurla, Distri	ct: Mumbai Suburb	an, State: Maharasht	ra, PIN: 400086	3				
Tele	ohone no.: 28757168		Mob	ile no: 919561929791	I	Emai	l : bheeshmas	shah@g	mail.com	
DOB	: Jan 22, 2001	Cat	egory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019								: No: 728	33542 (Status: Pass)	
Exam form appearance type: Fresher										
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( U	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Nam	е				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	ng IX - Financial Accounting					
2	83007	Financial Acc	counting and Audit	ng X - Cost Accounting				۹[]		
3	83013	Business Eco	onomics VI				Th-U	۹[]		
4	83014	Commerce V	<b>'</b> I				Th-U	۹[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	Th-CA[]		
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:							
D	ant Datalla	\			allana Danaint	No. and Date:				
		Amount Recei		<u> </u>	ollege Receipt	No. and Date:	DI			
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
	ue Preference (Code/N		·l					1		
	Director, Board of Exan					ad Care Carellan and a	l le conte	Place:	Vidyavihar	
decla	uest permission to pres are that all statement m gone through the sylla	iade in this ap	plication are true,	complete and correct	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 univer	sity Examinatio	n etc. on religious o	r any			
	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			
canc	clica of rejected.							St	udent's Signature	
Decl	aration by Principal/HC	D/Chairperso	on							
resp	form is carefully scrutionsibility of fulfillment/r se/term work (if any) ac	ectification of	the information. H							
Place	e:									
Date	:			College 9	Staff Signature				nature of D/Chairperson	



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

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	PRN:	Elig	ibility Status:	Examination 1101		Division/Section:	Roll No	).:	Imanta.		
2	2018016400938977		Eligible						mand		
Instru	ction Medium:			!		Nationality:	India		•		
				Student's F	Personal Informat	ion					
Stude	ent's Name: YADA	V MAMTA VIJ	IAY			Mother's Name: R	EETA	(	Gender: Female		
Name	e in Vernacular Langu	ıage:यादव मम	ता विजय								
Addre	ess: PRIYADARSHIN	I ZHOPADI SA	ANGH GALLI NO !	RAMABAI AMBED	KAR NAGAR GI	HATKOPAR EAST					
City:	MUMBAI, Taluka: Ku	rla, District: M	umbai Suburban, S	State: Maharashtra,	PIN: 400075						
<u> </u>	hone no.:		Mol	oile no: 9170393128	370	Ema	il : yadavmam	ta2022@	@gmail.com		
	Dec 16, 1999		tegory: Open		Physically	Handicap: No					
$\overline{}$	ous Latest Examinati		m III(Regular-Rev	16)	Exam Ever	t: Nov-2019	Seat	t No: 72	83665 (Status: Pass)		
	Exam form appearance type: Fresher										
Pape	Paper Details: Please select Paper details which you want to appear ( UA - University Assessment, CA - College Assessment )										
SN	Paper Code			Paper Na					AM - AT		
1	83001			ting IX - Financial A			Th-U				
2	83007	Financial Ac		Th-U/							
3	83013	Business Ec					Th-U				
4	83014	Commerce \					Th-U/				
5	83015		direct Taxation Pa	•			Th-C/				
6	83020	Computer sy	stems and Applica	-	<del></del>		<del>'</del>	A [ ] ;Th-			
<b>—</b>	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	i Fees		
Mark	Statement Fee		Total:								
Paym	nent Details:	Amount Rece	ived:		College Receipt	No. and Date:					
DD N	lo:		MICR No:		DD Date:		Bank	(:			
Cente	er Preference (Code/I	Name):									
Venu	e Preference (Code/N	Name):									
To, D	irector, Board of Exa	mination and E	Evaluations / The C	Controller Of Examir	nation,			Place:	Vidyavihar		
decla	iest permission to pre re that all statement i	made in this a	oplication are true,	complete and corre	ect to the best of r	ny knowledge and b	elief. I	Date:			
	gone through the syll est for any special cor										
other	ground. I understand										
cance	elled or rejected.							St	tudent's Signature		
Decla	aration by Principal/H	OD/Chairpers	on								
respo	form is carefully scrut onsibility of fulfillment se/term work (if any) a	rectification of	f the information. H						e. I also undertake the ance and practical		
Place	<b>:</b> :										
Date:				Colleg	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.

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	PRN:	Eligi	bility Status:	Examination for 110170		Division/Section:	Roll No	o.:	Parvarbhar
	2018016400938985		Eligible						4 0
Instr	uction Medium:					Nationality:	India		
				Student's Per	rsonal Informati	on			
Stud	ent's Name: RAI VA	IBHAV RAJE	SH			Mother's Name: A	MITHA	(	Gender: Male
Nam	e in Vernacular Langua	ge: राई वैभव	राजेश						
Addr	ess: B-406 ,Saidham b	uilding Sagad	on cheranagar,Nar	ndivali pada Manpada	road ,Dombiva	lli (East)			
City:	Dombivali (East), Talul	ka: Kalyan, D	istrict: Thane, Stat	e: Maharashtra, PIN:	421204				
Tele	ohone no.:		Mot	oile no: 918652369550	)	Ema	il : nikitharai1	11@gma	nil.com
DOB	: Aug 28, 2000	Cat	tegory: Open		Physically	Handicap: No			
Prev	ious Latest Examinatio	n Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	33495 (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 Nam	е				AM - AT
1	83001	Financial Acc	counting and Audit	ng IX - Financial Accounting				A[]	
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting	ng		Th-U	A[]	
3	83013	Business Ec	onomics 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	83016	Export Marke	eting Paper II				Th-C	A[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavr	nent Details:	mount Rece	ived:	lc	ollege Receipt	No. and Date:			
DD N			MICR No:		DD Date:		Bani	k:	
	er Preference (Code/N	ame):							
	ue Preference (Code/Na								
	Director, Board of Exam		Evaluations / The C	Controller Of Examinat	tion,			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	1 1000	viayaviilai
	are that all statement m							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						
resp	form is carefully scrutir onsibility of fulfillment/rose/term work (if any) ac	ectification of	the information. H						
Place	<del>j</del> .								
	<del>-</del> ·			_					
Date									
	•			College	Staff Signature			and Sigr	
				Ç Ç		Principal/HOD/Chairperson		D/Chairperson	



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

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PRN: Eligibility Status:			Examination for 11017		Division/Section:	Roll No.	.:	(m) Rakhig	
2	2018016400938993		Eligible						1.01.
nstru	ıction Medium:	<del>!</del>				Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stude	ent's Name: <b>MAITY</b>	RAKHI NAN	TU			Mother's Name: A	NJANA	(	Gender: Female
Name	e in Vernacular Langu	age:मैती राखी	नांतु अंजना						
Addre	ess: ROOM NO 58 CH	IAWL NO 2 IV	IITH BUNDER RO	AD SAI NAGARI CH	ENDANI KOLIW	/ADA			
City:	THANE, Taluka: Than	e, District: Th	ane, State: Mahara	ashtra, PIN: 400603					
Telep	hone no.:		Mob	ile no: 91986701986	8	Ema	il : meeramaity	/26@gn	nail.com
OOB	Aug 26, 1999	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: 72	83384 (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	Financial Ac	counting and Audit	ng IX - Financial Accounting				4[]	
2	83007	Financial Ac	counting and Audit	ing X - Cost Account	ng X - Cost Accounting			4[]	
3	83013	Business Ec	onomics VI				Th-UA	A[]	
4	83014	Commerce \	/I				Th-U/	4[]	
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	4[]	
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:						
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		Amount Rece			College Receipt	No. and Date:	lpi		
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	er Preference (Code/N								
	e Preference (Code/N		Trainetions / The C	entreller Of Fremine				I	
	irector, Board of Exam					. d f f th	l la au alau	Place:	Vidyavihar
decla	uest permission to pres re that all statement manne through the sylla	nade in this ap	oplication are true,	complete and correc	t to the best of n	ny knowledge and be	elief. I	Date:	
	est for any special con								
other	ground. I understand								
cance	elled or rejected.							St	udent's Signature
Decla	aration by Principal/HC	DD/Chairperso	on						
This respo		nized by the ( rectification of	College staff and by the information. H						e. I also undertake the ance and practical
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)

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Student's Personal Information Student's Name: RAVAL PRITESH SHAILESH Mother's Name: YOGITA Gender: Male Name in Vernacular Language:रावल प्रितेश शैलेशकुमार Address: ROOM NO. 4, GROUND FLOOR, JAIMALHAR BLDG., PADWAL NAGAR, WAGLE ESTATE, THANE WEST City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604 Telephone no.: Mobile no: 918355982737 Email : shaileshraval448@gmail.com DOB: Nov 21, 2000 Category: Open Physically Handicap: No Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019 Seat No: 7283512 (Status: Pass)	PRN: Eligibility Status:			bility Status:	Examination f 11017		Division/Section:	Roll No	::	Phitesh.
Student's Name: RAVAL PRITESH SHAILESH  Name in Verinacular Language: trace 'Britat Britanspare' Address: ROM NO. 4, GROUND FLOOR, JAIMALHAR BLDG., PADWAL NAGAR, WAGLE ESTATE, THANE WEST City: THANE. Taluka: Thane, District: Thane, State: Maharashtra, Pin: 400604 Telephone no.   Mobile no: 918355982737   Email: shaileshraval448@gmail.com  DOB: Nov 21, 2000   Category: Open   Physically Handicap: No  Previous Latest Examination Details: Sem IlliRegular-Rev16)   Exam Event: Nov-2019   Seat No: 7283512 (Status: Pass)  Exam from appearance type: Fresher  Paper Dotalis: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)  November 1   830001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []    1   83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []    2   83007   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []    3   83013   Business Economics VI   Th-UA []    5   83015   Direct and Indirect Taxtoin Paper II   Th-CA []    6   83016   Export Marketing Paper II   Th-CA []    6   83016   Export Marketing Paper II   Th-CA []    6   83016   Export Marketing Paper II   Th-CA []    6   Roman Form Late Fee   Exam Form Super Late Fee   Examination Fees    Frame Frederence (Code/Name):  Payment Details:   Amount Received:   College Receipt No. and Date:  DD Date:   DD Date:   Bank:  Centes Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Control Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference (Code/Name):  Prevener Preference		2018016400939002		Eligible						beite.
Student's Name: RAVAL PRITESH SHAILESH Name in Vernacular Language (TREAT RATE) Name in Vernacular Language (TREAT RATE) Address: ROOM NO. 4, GROUND FLOOR, JAIMALHAR BLDG, PADWAL NAGAR, WAGLE ESTATE, THANE WEST City: THANE, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400604 Telephone no.:    Mobile no: 918355982737   Email: shaileshraval448@gmail.com   DBB: Nov 21, 2000   Category: Open   Physically Handicap: No   Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283512 (Status: Pass)   Exam form appearance type: Fresher   Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)   November   Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)   November   Paper Name   AM - AT     S3001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []     1	Instru	uction Medium:	•				Nationality:	India		
Name in Vernacular Language মাৰল হিন্দা বিষদ্যস্থায় Address: ROOM NO. 4, GROUND FLOOR, JAMALHAR BLDG., PADWAL NAGAR, WAGLE ESTATE, THANE WEST  City: THANE, Taluka: Thane, District: Thane, State: Meharashtra, PIN: 400604  Telephone no.:    Mobile no: 918355982737   Email: shalleshraval448@gmail.com   DoB: Nov 21, 2000   Category: Open   Physically Handicap: No   Previous Latest Examination Details: Sen Illi(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283512 (Status: Pass)   Exam form appearance type: Fresher   Paper Details: Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)   No.   Paper Code   Paper Name   AM - AT     83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []     83010   Financial Accounting and Auditing IX - Cost Accounting   Th-UA []     4 83014   Commerce VI   Th-UA []     4 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 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):					Student's Pe	ersonal Informati	on			
Address: ROOM NO. 4, GROUND FLOOR, JAIMALHAR BLDG., PADWAL NAGAR, WAGLE ESTATE, THANE WEST City: THANE, Taluka: Thane, District: There, State: Maharashtra, PIR: 400604 Telephone no:    Mobile no: 918355982737   Email: shaileshraval448@gmail.com   Privious Latest Examination Details: Sem Ill(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283512 (Status: Pass)   Exam form appearance type: Fresher	Stud	ent's Name: RAVAL	PRITESH SI	HAILESH			Mother's Name: Yo	OGITA	(	Gender: Male
City: THANE, Taluka: Thane, Oistrict: Thane, State: Maharashtra, PIN: 400604  Telephone no:   Mobile no: 918355982737  DDB: Nov 21, 2000   Category: Open   Physically Handicap: No  Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283512 (Status: Pass)  Exam form appearance type: Fresher  Paper Details:   Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)  Nover a season   Paper Details:   Please select Paper details which you want to appear (UA - University Assessment, CA - College Assessment)  Nover a season   Paper Name   Th-UA []	Nam	e in Vernacular Langua	ge:रावल प्रिते	श शैलेशकुमार						
Telephone no.:   Mobile no: 918355982737   Email : shaileshraval448@gmail.com   DDB: Nov 21, 2000   Category: Open   Physically Handicap: No   Previous Latest Examination Details: Sem III(Regular-Rev16)   Exam Event: Nov-2019   Seat No: 7283512 (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 Ame   AM - AT   1   83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA []   2   83007   Financial Accounting and Auditing X - Cost Accounting   Th-UA []   3   83013   Business Economics VI   Th-UA []   4   83014   Commerce VI   Th-UA []   5   83015   Direct and Indirect Taxation Paper II   Th-CA []   6   83016   Export Marketing Paper II   Th-CA []   Corrovocation 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):   To, Director, Board of Examination and Evaluations / The Controller Of Examination. I have remitted the prescribed fee for the same. I hereby clude clear 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 II am appearing. I shall not request for any special concessions 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 carrelled for rejected.  Declaration by Principal/HOD/Chairperson This form is carefully scrutinized pote 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 Hilliment/rectification of the information. He/she is regular student of this College and has completed	Addr	ess: ROOM NO. 4, GR	OUND FLOO	R, JAIMALHAR B	LDG., PADWAL NA	GAR, WAGLE E	STATE, THANE WI	EST		
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Previous Latest Examination Details: Sem Ill(Regular-Rev16)	Tele	phone no.:		Mob	ile no: 91835598273	37	Emai	l : shaileshrav	al448@	gmail.com
Exam form appearance type: Fresher  Paper Dabelils: 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-UA []    2 83007   Financial Accounting and Auditing X - Cost Accounting   Th-UA []    3 83013   Business Economics VI   Th-UA []    4 83014   Commerce VI   Th-UA []    5 83015   Direct and Indirect Taxation Paper II   Th-CA []    6 83016   Export Marketing Paper II   Th-CA []    Corrovaction Fee   Exam Form Late Fee   Exam Form Super Late Fee   Examination Fees    Mark Statement Fee   Total:   Exam Form Super Late Fee   Examination Fees    Payment Details:   Amount Received:   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 request for any special concession such as change in time or day fixed for university Examination sec. 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/recification of the information. He/she is regular student of this College and has completed the required attendance and practical course/nerm work (	DOB	: Nov 21, 2000	Cat	egory: Open		Physically	Handicap: No			
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1   83001   Financial Accounting and Auditing IX - Financial Accounting   Th-UA[]   2   83007   Financial Accounting and Auditing X - Cost Accounting   Th-UA[]   Th	Pape	er Details: Plea	se select Pa <sub>l</sub>	oer details which y	ou want to appear (	JA - University A	ssessment,CA - Co	llege Assessn	nent)	
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Th-CA []   Th-CA []	3	83013	Business Eco	onomics VI				Th-U	۹[]	
Exam Form Late Fee   Exam Form Super Late Fee   Examination Fees	4	83014	Commerce V	T				Th-UA	۹[]	
Convocation Fee	5 83015 Direct and Indirect Taxation Paper II							Th-CA	۹[]	
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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	requ	est for any special conc	ession such	as change in time	or day fixed for unive	ersity Examination	n etc. on religious o	r any		
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			hat in the eve	ent of any informati	on being found false	or incorrect, my	candidature is liable	e to be		
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	caric	elled of rejected.							St	udent's Signature
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	Deck	aration by Principal/HO	D/Chairperso	on						
Course/term work (if any) according to university rules.  Place:  Date:  College Staff Signature  Seal and Signature of										
Place:  Date:  College Staff Signature  Seal and Signature of					e/sne is regular stud	ent of this Collec	je and nas complete	a tne required	attenda	ance and practical
Date:  College Staff Signature  Seal and Signature of										
College Staff Signature Seal and Signature of	Place	e:								
College Staff Signature Seal and Signature of					_					
	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.

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

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 f 11017		Division/Section:	Roll No	.:	Rarti.	
2018016400939017		Eligible						(A) (C)
nstruction Medium:					Nationality:	India		
			Student's Pe	ersonal Informati	on			
Student's Name: RAJBH	HAR ARATI A	SHOK			Mother's Name: B	INDU	(	Gender: Female
Name in Vernacular Langu	age:राजभर आ	रती अशोक						
Address: RAM NAGAR B I	LAL KILLA SC	CIETY						
City: MUMBAI, Taluka: Kur	la, District: Mu	umbai Suburban, S	tate: Maharashtra, F	PIN: 400079				
Telephone no.:		Mob	ile no: 91970280742	26	Ema	il : RAJBHARA	ARATI0(	@GMAIL.COM
OOB: Apr 25, 2001	Cat	tegory: Open		Physically	Handicap: No			
Previous Latest Examination	on Details: Sei	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33497 (Status: Pass)
Exam form appearance type: Fresher								
Paper 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 Nar	Paper Name				AM - AT
1 83001	Financial Acc	counting and Audit					A[]	
2 83007	Financial Acc	counting and Audit	ing X - Cost Account	ng X - Cost Accounting			A[]	
3 83013	Business Ec	onomics VI					A [ ]	
4 83014	Commerce V	<u>′</u> 1				Th-U/	A[]	
5 83015	Direct and In	direct Taxation Pa	per II			Th-C/	A [ ]	
6 83029 Elements of Operational Research Paper II Ti							A [ ]	
Convocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark Statement Fee		Total:						
			1.					
,	Amount Rece	ı		College Receipt	No. and Date:	ln I		
DD No:	1 \	MICR No:		DD Date:		Bank	:	
Center Preference (Code/N								
Venue Preference (Code/N			0.5	••			_	
To, Director, Board of Exar					ad Care Carella a sancia	11	Place:	Vidyavihar
request permission to pre- declare that all statement n have gone through the sylla	nade in this ap	plication are true,	complete and correc	t to the best of n	ny knowledge and b	elief. I	Date:	
request for any special con								
other ground. I understand	that in the eve	ent of any informat	on being found false	or incorrect, my	candidature is liabl	e to be		
cancelled or rejected.							St	udent's Signature
Declaration by Principal/HO	DD/Chairperso	on						
This form is carefully scruti responsibility of fulfillment/ course/term work (if any) a	rectification of	the information. H						
Place:								
2-1-								
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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'e-Suvidha' account on



	PRN:	Eligibility Status:	Examination forn 110174	n No.:	Division/Section:	Roll No	Bohul		
	2018016400939025	Eligible		III					
Instr	uction Medium:				Nationality:	India			
			Student's Perso	onal Information	on				
Stud	ent's Name: KUSHV	VAHA BHAVIKA SANTOSH			Mother's Name: AN	NITA	Gender: Female		
Nam	e in Vernacular Langua	ge:कुशवाहा भाविका संतोष अनित	Т						
Addr	ess: BATALIWALA CH	AWL NO 2 ROOM NO 10 SALI	NAGARI MITH BUNDE	R ROAD					
City:	THANE, Taluka: Thane	e, District: Thane, State: Mahara	ashtra, PIN: 400603						
Tele	phone no.:	Mob	ile no: 919867938545		Email	l : monakushv	waha21@gmail.com		
	: May 11, 2001	Category: Open		Physically Handicap: No					
		n Details: Sem III(Regular-Rev1	6)	Exam Event	t: Nov-2019	Seat	t No: 7283370 (Status: Pass)		
	n form appearance type								
	er Details: Plea	se select Paper details which y	ou want to appear ( UA	- University A	ssessment,CA - Col	lege Assessn	nent)		
SN	Paper Code		Paper Name				AM - AT		
1		Financial Accounting and Audit	ng IX - Financial Accounting				A[]		
2		Financial Accounting and Audit	ng X - Cost Accounting				A[]		
3		Business Economics VI				Th-U/			
4		Commerce VI					Th-UA[]		
5	83015	Direct and Indirect Taxation Pa	per II			Th-C/			
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:							
Payr	ment Details:	mount Received:	Col	lege Receipt I	No. and Date:				
DD N	No:	MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):							
Venu	ue Preference (Code/Na	ame):							
To, [	Director, 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:		
have	gone through the sylla	bus and the list of books prescr	ibed for the examinatior	n for which I a	m appearing. I shall	not			
		ession such as change in time hat in the event of any informati							
	elled or rejected.	natin the event of any mierinat	orr borning round raises or	moon oot, my	odridiada o lo liable	, 10 20			
							Student's Signature		
	aration by Principal/HO	•							
resp	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H cording to university rules.							
Plac	e:								
Date	:		O. II O		<u> </u>	1 O' 1 1			
			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 for 11017!		Division/Section:	Roll No	).:	Lasemi	
2	2018016400939033		Eligible						0	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Information	on				
Stude	ent's Name: <b>GUPT</b>	A LAXMI INDF	RABAHADUR			Mother's Name: UI	RMILA		Gender: Female	
Name	e in Vernacular Langua	age:गुप्ता लक्ष्म	मी इंद्रबहादूर							
Addr	ess: ROOM NO.603, T	RANSCAM,	RAMNAGAR, GH	ATKOPAR WEST, N	1UMBAI					
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	state: Maharashtra, P	<sup>1</sup> IN: 400086					
	phone no.:		Mob	oile no: 91961950814	·8	Emai	il : 1234kajalg	jupta@g	mail.com	
	: Jul 29, 2001		tegory: Open		Physically	Handicap: No				
Previous Latest Examination Details: Sem III(Regular-Rev16) Exam Event: Nov-2019								t No: 728	83271 (Status: Pass)	
	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 Nan	Paper Name				AM - AT	
1	83001	Financial Acc	counting and Audit	9				A[]		
2	83007	Financial Acc	counting and Audit	ting X - Cost Accounti	ing		Th-U	A[]		
3	83013	Business Eco					Th-U			
4	83014	Commerce V	* *					Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II								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	ı Fees	
Mark	Statement Fee		Total:							
 Pavn	nent Details:	Amount Recei			College Receipt I	No and Date:				
DD N			MICR No:		DD Date:	10. 0 20	Bank			
	er Preference (Code/N		1					<u>"</u>		
	ue Preference (Code/N									
	Director, Board of Exam		Evaluations / The C	Controller Of Examina	 ation,			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	1 1000	Viayaviilai	
	are that all statement m							Date:		
	gone through the sylla est for any special cond									
other	r ground. I understand									
cance	elled or rejected.							St	tudent's Signature	
Decla	aration by Principal/HC	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	<b>&gt;</b> :									
Date:	:			College	Staff Signature		Seal	and Sigr	nature of	
				College Staff Signature			Principal/HOD/Chairperson		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:				110176	II NO	Division/Section:	Roll No.	<i>i.</i> .:	Comarotar	
2	2018016400939041		Eligible		l III				Eks ===	
Instru	uction Medium:					Nationality:	India			
				Student's Perso	onal Informati	ion				
Stude	ent's Name: <b>TERVA</b>	ANKAR SNEH	IAL ANKUSH			Mother's Name: SA	ANGITA	(	Gender: Female	
Name	e in Vernacular Langua	age:तेरवणकर	स्नेहल अंकुश संगीत	п						
Addre	ess: PARAKADAM MA	RG, ASALPH	HAVILLAGE, ADAF	RSH CHAWL COMMITT	TEE, MUKUN	IDRAO, AMBEDKAF	NAGAR GH	ATKOP/	AR(W), MUMBAI-84	
City:	MUMBAI, Taluka: Kurl:	a, District: Μι	umbai Suburban, S	State: Maharashtra, PIN:	: 400084					
Telep	phone no.:		Mob	oile no: 918291530064		Emai	il : snehalterva	ankar32(	@gmail.com	
DOB:	: Jan 28, 2001	Cat	tegory: Reserved (	OBC)	Physically	/ Handicap: No				
	ous Latest Examination		m III(Regular-Rev1	.6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83622 (Status: ATKT)	
	n form appearance type									
<del></del> -	1	ase select Par	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Col	lege Assessm	nent)		
SN	Paper Code	<b></b>		Paper Name					AM - AT	
1				ting IX - Financial Accou			Th-UA			
2		Financial Acc	counting and Audit	ting X - Cost Accounting	1		Th-UA			
3	83013	Business Eco	onomics VI				Th-UA	A[]		
4		Commerce V	<u>/I</u>					Th-UA[]		
5	83015	Direct and In-	ndirect Taxation Pa	per II			Th-CA			
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U/	A [ ] ;Th-	-CA[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	ı Fees	
Mark	Statement Fee		Total:							
Davn	nent Details:	Amount Recei	in od:	Col	logo Peceint	No. and Date:				
DD N		Allioniii Decei	MICR No:	<u> </u>	DD Date:	NO. dilu Date.	Bank	<del></del>		
	er Preference (Code/Na		IVIICIT ING.		DD Date.		Daiin	<u>.</u>		
	le Preference (Code/Na									
	·	-		Controller Of Examination				Place:	Videovibor	
				nination. I have remitted		ed fee for the same.	I hereby	Place.	Vidyavihar	
decla	ire that all statement ma	nade in this ap	pplication are true,	complete and correct to	the best of n	ny knowledge and be	elief. I	Date:		
have	gone through the sylla	ibus and the I	ist of books prescri	ibed for the examination or day fixed for universit	n for which I a	m appearing. I shall	not !	<u> </u>		
other	ground. I understand t			ion being found false or						
	elled or rejected.		-	-			!	l st	tudent's Signature	
Deck	aration by Principal/HO	\D/Chairners						<u> </u>	udent's orginature	
	•	-		y me. The information pr	rinted in the f	form is correct to the	beet of my kn	-owledge	a Laleo 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	cording to un	iversity rules.	-						
Place	χ.						,			
Date:				College Staff Signature Soul s		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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	PRN:	Eligi	ibility Status:	Examination fo 110177	7	Division/Section:	Roll No	).:	Markar
:	2018016400939056		Eligible						CEN O
nstrı	uction Medium:					Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: SHETT	TY RAKSHA K	CARUNAKAR			Mother's Name: RI	EKHA		Gender: Female
Nam	e in Vernacular Langua	age:शेट्टी रक्षा	करणाकर						
Addr	ess: near shanishwar r	mandir 4/2 am	ninabai chawl sanç	hani state					
City:	MUMBAI, Taluka: Kurl	la, District: Μι	umbai Suburban, S	state: Maharashtra, Pl	IN: 400086				
	phone no.:		Mot	oile no: 919594596681			il : rakshashet	tty044@	gmail.com
	3: Jun 04, 2000		tegory: Open		Physically	Handicap: No			
Previ	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	.6)	Exam Even	t: Nov-2019	Sea	t No: 728	83590 (Status: ATKT)
	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	ment)	
SN	Paper Code			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 Accounting	ng		Th-U	A[]	
3	83013	Business Eco					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	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavn	ment Details:	Amount Recei	ived:		College Receipt I	No and Date:			
DD N			MICR No:		DD Date:		Bank	<u> </u>	
	ter Preference (Code/N		<u> </u>						
	ue Preference (Code/N								
	Director, Board of Exam		Evaluations / The C	controller Of Examina	tion,			Place:	Vidyavihar
l requ	uest permission to pres	sent myself for	or the ensuing exan	mination. I have remitte	ted the prescribe			L	Viayaviiai
	are that all statement me gone through the sylla							Date:	
	est for any special con								
other	r ground. I understand								
canc	celled or rejected.							St	udent's Signature
Deck	aration by Principal/HC	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 ourse/term work (if any) according to university rules.								
Place	э:								
Date:  College Staff Signature  Seal and Signature of									
						P		ipal/HΟΓ	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 fo 110178		Division/Section:	Roll No.	u.:	12 m
2	2018016400939072		Eligible						Anghasa
nstrı	uction Medium:					Nationality:	India		
				Student's Pe	ersonal Information	on			
Stude	ent's Name: PANDE	Y ANSHIKA	ASHOK KUMAR			Mother's Name: St	JNITA	(	Gender: Female
Name in Vernacular Language:पाण्डेय अंशिका अशोक कुमार									
Addr	Address: PLOT NO 1 MAYA COAL SHOP, NEW GAUTAM NAGAR NEAR ANJUMAN SCHOOL, GOVANDI								
<u> </u>	MUMBAI, Taluka: Kurla	a, District: Μι							
	phone no.:			oile no: 919029638366			I : VANDANA!	MISHRA	A394@GMAIL.COM
	: Jan 15, 2001		tegory: Open		Physically	Handicap: No			
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Event	t: Nov-2019	Seat	No: 728	83715 (Status: Pass)
	n form appearance type								
Pape		se select Par	per details which y	ou want to appear ( U	JA - University A	ssessment,CA - Co	ilege Assessm	nent)	
SN	Paper Code	<b></b>		Paper Nam					AM - AT
1				ting IX - Financial Acc			Th-UA	.,	
2				ting X - Cost Accounting	ing		Th-UA		
3		Business Eco					Th-UA		
4		Commerce V					Th-UA	••	
5			ndirect Taxation Pa	-			Th-CA		
6	83020	Computer sy	stems and Applica				Th-U <i>F</i>	A [ ] ;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:	Amount Recei	eived:	- Ic	College Receipt N	No and Date:			
DD N			MICR No:		DD Date:		Bank:	::	
	er Preference (Code/Na		1						
	ue Preference (Code/Na						-		
To, C	Director, Board of Exam	nination and F	Evaluations / The C	controller Of Examina	ition,			Place:	Vidyavihar
	uest permission to pres							_	
	are that all statement magnetized and statement magnetized and statement makes are the syllaters.							Date:	
reque	est for any special conc	cession such	as change in time	or day fixed for univer	rsity Examinatio	n etc. on religious o	r any		
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		
Canc	alled or rejected.							St	tudent's Signature
Decla	aration by Principal/HO	D/Chairperso	on						
respo	form is carefully scrutin onsibility of fulfillment/re	ectification of	f the information. H						
cours	se/term work (if any) ac	cording to un	niversity rules.	•					
Place	e:								
				_			İ		
Date:	:						l		
				College Staff Signature		Seal and Signature of			
						ļ	, Princi	ıpal/HΟ[	D/Chairperson



http://mum.digitaluniversity.ac/

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 110179		Division/Section:	Roll No	<b>)</b> .:	Milens
:	2018016400939087		Eligible			1		!	LEN
nstrı	uction Medium:			-		Nationality:	India		
				Student's Per	rsonal Informati	on			
Stude	ent's Name: DASAN	NA NILESH JA	AYSINGH			Mother's Name: M	EERA	(	Gender: Male
Name in Vernacular Language:दसाणा निलेश जयसिंह									
Addr	Address: santoshi mata nagar tagore nagar group no 5 vikhroli east								
	mumbai, Taluka: Kurla	a, District: Mu							
	phone no.:			oile no: 919167366985			il : dasananile	sh@gma	ail.com
_	: Nov 11, 1999		tegory: Open		Physically	Handicap: No			
⊃revi	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	ı <b>6</b> )	Exam Even	t: Nov-2019	Sea	t No: 728	83674 (Status: Pass)
	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	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 Accountir	ng		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	83029	Elements of	Operational Resea	irch Paper II			Th-C	A[]	
Conv	vocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees
Mark	Statement Fee		Total:						
Pavr	ment Details:	Amount Recei	ived:		College Receipt I	No and Date:			
DD N			MICR No:		DD Date:	10. drid Dato.	Bank		
	er Preference (Code/Na		INITOTATIO.					-	
	ue Preference (Code/Na								
	Director, Board of Exam		Evaluations / The C	Controller Of Examinat	tion.			Place:	Vidyavihar
	uest permission to pres					ed fee for the same.	I hereby	Fiaco.	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:	
	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						<u> </u>
This t	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								
cours	se/term work (if any) ac	ccording to un	niversity rules.						
Place	ə: 								
Data							I		
Date: College St					Staff Signature	ļ	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.

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

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 110180	0	Division/Section:	Roll No.	u:		
:	2018016400939095		Eligible			l			Kar.	
nstrı	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stude	ent's Name: GOPI S	SHRADDHA V	/ISHANU			Mother's Name: RE	ENUKA		Gender: Female	
Nam	e in Vernacular Langua	age:श रद्धा								
Addr	ess: Room no 10 Math	ıur sheth chav	vl Premiere rd ,kar	nani Kurla (W) muml	bai 400070					
	City: Mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400070									
	phone no.:			oile no: 91869309379	7	Emai	il : aniketgopi1	147@gm	nail.com	
	: May 19, 2001		tegory: Reserved (	,	Physically	Handicap: No				
	ious Latest Examinatio		n III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	No: 728	83259 (Status: ATKT)	
	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 Acc	counting and Audit	ing IX - Financial Acc	counting		Th-UA			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounti	ing		Th-UA	٩[]		
3	83013	Business Eco						Th-UA[]		
4	83014	Commerce V					Th-UA	.,		
5	83015		direct Taxation Pa	•			Th-CA			
6	83023	Investment A		lio Management Pap	er II		Th-CA	٩[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details:	Amount Recei	ived:		College Receipt I	No and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N		<u> </u>							
	ue Preference (Code/N									
	Director, Board of Exam		 Evaluations / The C	ontroller Of Examina	ition,		1	Place:	Vidyavihar	
l requ	uest permission to pres	sent myself for	or the ensuing exan	nination. I have remitt	ted the prescribe			l_	V layarına.	
	are that all statement me gone through the sylla							Date:		
	est for any special cond									
other	r ground. I understand									
canc	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HC	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.									
Place	ə:									
Date:  College Staff Signature  Seal and Signature of								nature of		
					3		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:	110181	II NO	Division/Section:	Roll No.	Di Zingh.	
2	2018016400939122	Eligible		I <b>I</b> I				
Instru	uction Medium:				Nationality:	India		
			Student's Perso	onal Informati	on			
Stude	ent's Name: SINGH A	ANJALI SATISHKUMAR			Mother's Name: SA	DHANA	Gender: Female	
Name	e in Vernacular Langua	ge:सिंह अंजली सतीशकुमार						
Addr	ess: 303/A ARCHERS F	PARK HALL VILLAGE ROAD, F	KURLA (WEST)					
City:	MUMBAI, Taluka: Kurla	a, District: Mumbai Suburban, S	tate: Maharashtra, PIN:	: 400070				
	phone no.:	Mob	oile no: 919821406967		Email	: sgsatish70(	@gmail.com	
DOB	: May 08, 2001	Category: Open		Physically	Handicap: No			
		n Details: Sem III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	t No: 7283605 (Status: Pass)	
Exam	n form appearance type:							
Pape	er Details: Pleas	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 F	Financial Accounting and Audit	ing IX - Financial Accou	unting		Th-UA	A[]	
2	83007 F	Financial Accounting and Audit	ing X - Cost Accounting	J		Th-UA	A[]	
3	83013 E	Business Economics VI					ĥ-UA [ ]	
4	83014 Commerce VI Th-U						A[]	
5 83015 Direct and Indirect Taxation Paper II Th-						Th-CA	A[]	
6	83023 II	Investment Analysis and Portfo	lio Management Paper	II		Th-CA	A[]	
Conv	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination Fees	
Mark	Statement Fee	Total:						
Payr	nent Detaile:	mount Received:		Ilaga Pacaint	No and Data:			
DD N		MICR No:	<u> </u>	DD Date:	No. and Date:	Bank	·	
	er Preference (Code/Na			DD Date.		Dalik	·-	
	ue Preference (Code/Na							
	•	ination and Evaluations / The C	`antrollor Of Evaminatio				T "	
		ent myself for the ensuing exam			ad foo for the same I	harahy	Place: Vidyavihar	
decla	are that all statement ma	ade in this application are true, bus and the list of books prescri	complete and correct to	o the best of n	ny knowledge and bel	lief. l	Date:	
reque	est for any special conce	ession such as change in time	or day fixed for universit	ity Examination	on etc. on religious or	any		
other	r ground. I understand th	hat in the event of any informati	on being found false or	incorrect, my	candidature is liable	to be		
cancelled or rejected.							Student's Signature	
Decla	aration by Principal/HOD	D/Chairperson					•	
respo	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. H cording to university rules.						
Place	<b>ə</b> :							
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]

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Examination form No.:

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligi	bility Status:	110182	II NO	Division/Section:	Roll No	).:	RM)		
2	2018016400939137		Eligible		III						
Instru	ction Medium:	_				Nationality:	India				
				Student's Pers	onal Informati	on					
Stude	ent's Name: ANCHA	N ASHWIN I	KISHORE			Mother's Name: Bl	HAVANI	C	Gender: Male		
	e in Vernacular Languaç										
	ess: 4, SOHANLAL CHA					UMBAI					
	MUMBAI, Taluka: Kurla	, District: Mu			: 400078						
	hone no.:			ile no: 919967526206			l : ashwinancl	han01@	gmail.com		
	Feb 01, 2001		tegory: Open		<del></del>	Handicap: No					
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	33139 (Status: Pass)		
	form appearance type										
<del></del> -		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 Accoι			Th-U				
2		inancial Ac	counting and Audit	ing X - Cost Accounting	]		Th-U/				
3	83013 E	83013 Business Economics VI Th-							-UA [ ]		
4	4 83014 Commerce VI The						Th-U	h-UA [ ]			
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	A[]			
6	83023 I	nvestment A	nalysis and Portfo	lio Management 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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		mount Rece		Col		No. and Date:	- In .				
DD N			MICR No:		DD Date:		Bank	C			
	er Preference (Code/Na										
	e Preference (Code/Na	-							ı		
	irector, Board of Exami							Place:	Vidyavihar		
decla	uest permission to prese re that all statement ma gone through the syllab	ide in this ap	oplication are true,	complete and correct to	o the best of n	ny knowledge and be	elief. I	Date:			
reque other	est for any special conce ground. I understand th	ession such	as change in time	or day fixed for universi	ity Examination	n etc. on religious o	r any				
cance	elled or rejected.							Stı	udent's Signature		
Decla	aration by Principal/HOI	D/Chairperso	on								
respo	form is carefully scrutini onsibility of fulfillment/re se/term work (if any) acc	ctification of	the information. H								
Place	s:										
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]

Examination form No.:

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	PRN:	Eligi	bility Status:	Examination for 110183	m No.:	Division/Section:	Roll No	.:	COST	
	2018016400939145		Eligible							
Instr	uction Medium:	•				Nationality:	India	•		
				Student's Pers	sonal Informati	on				
Stud	ent's Name: SHETT	Y AKASH HA	ARISH			Mother's Name: M	AMATHA	G	Gender: Male	
Nam	e in Vernacular Langua	age: शेट्टी आव	काश हरिश							
Addr	ess: 604, POONAM AF	PPARTMENT	JANTA MARKET	SUBHASH ROAD BHA	andup{w} , N	IUMBAI				
City:	MUMBAI, Taluka: Kurl	a, District: Μι	ımbai Suburban, S	tate: Maharashtra, PIN	N: 400078					
Tele	ohone no.:		Mob	ile no: 919987299559		Ema	il : akashvillier	kashvilliers04@gmail.com		
DOB	: Apr 04, 2000	Cat	egory: Open		Physically					
Prev	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	t No: 728	3586 (Status: Pass)	
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	A - University A	Assessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name	)			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 Accountin	g	Th-U	A[]			
3	83013	Business Eco	onomics VI			Th-U	A[]			
4	83014	Commerce V	Ί			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 Pape	r II		Th-C/	A[]		
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			mination	Fees	
Mark	Statement Fee		Total:							
Payr	nent Details:	Amount Recei	ived:	Co	College Receipt No. and Date:					
DD N	lo:		MICR No:		DD Date:		Bank			
Cent	er Preference (Code/N	ame):					I			
Venu	ie Preference (Code/N	ame):								
To, [	Director, Board of Exam	nination and E	valuations / The C	ontroller Of Examinati	on,			Place:	Vidyavihar	
	uest permission to pres are that all statement m							Date:		
have	gone through the sylla	bus and the l	ist of books prescr	ibed for the examination	on for which I a	m appearing. I shall	not			
	est for any special cond ground. I understand									
	elled or rejected.		,	<b>y</b>	,				de alla O'casala sa	
D I		D (Ol l						Sti	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							l alaa wadantaka tha			
resp	norm is carefully scrutifications on sibility of fulfillment/r	ectification of	the information. H	/ me. The information   e/she is regular studer	printed in the f nt of this Collec	orm is correct to the ge and has complete	ed the required	owieage. d attenda	nce and practical	
cour	se/term work (if any) ac	ccording to un	iversity 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)

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 fo 110184		Division/Section:	Roll No	.:	fhaill.	
	2018016400939153		Eligible			Thank				
Instr	uction Medium:					Nationality:	India			
				Student's Per	sonal Informati	on				
Stud	ent's Name: SHAIK	H ZARAFSHA	AH MOHMAD HAN	IF		Mother's Name: S	HEHNAZ	(	Gender: Female	
Nam	e in Vernacular Langua	age:शेख झार	ाफ्शः मोहंमद हनी	দ						
Addr	ess: B/402, SULTANA	APT. NEAR I	DADI COLONY, AI	MRUT NAGAR, MUMI	BRA, THANE-4	00612				
City:	MUMBRA, Taluka: , D	istrict: , State	: Maharashtra, PIN	N: 400612						
Tele	ohone no.:		Mob	e no: 919867176555 Email : szar				4@gmai	I.com	
DOB	: Aug 14, 2000	Cat	egory: Open		Physically Handicap: No					
Prev	ious Latest Examinatio	n Details: Ser	m III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283578 (Status: Pass)					
Exar	n form appearance type	e: Fresher								
Pape	er Details: Plea	ase select Pa <sub>l</sub>	per 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 Acco	ounting	Th-U	۹[]			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountir	ng	Th-U	۹[]			
3	83013	Business Eco	onomics VI					۹[]		
4	83014	Commerce V	<b>'</b> I					Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-C	۹[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U	۲ [ ] ;Th-	CA[]	
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			nination	Fees	
Mark	Statement Fee		Total:							
Davr	nent Details:	Amount Recei	ived:	Ic	College Receipt No. and Date:					
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	er Preference (Code/N	ame).	IMIOIT IVO.		DD Date.		Dank	•		
	ie Preference (Code/N									
	Director, Board of Exam		valuations / The C	ontroller Of Examinat	ion.			Place:	Vidyavihar	
	uest permission to pres					ed fee for the same	I hereby	Place.	viuyaviiiai	
decla	are that all statement m	iade 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									
othe	r ground. Í understand í							l		
canc	elled or rejected.							Q+ı	udent's Signature	
Decl	aration by Principal/HC	ND/Chairners	<b>ND</b>					011	duent's Signature	
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/r	ectification of	the information. H	e/she is regular stude	nt of this Colle	ge and has complete	ed the required	l attenda	nce and practical	
cour	se/term work (if any) ac	ccording to un	iversity rules.							
D.										
Place:										
Date:				College Staff Signature		Seel and Signeture of				
				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 f 11018	5	Division/Section:	Roll No.	:	Northi	
:	2018016400939176		Eligible							
Instru	uction Medium:					Nationality:	India			
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: PANC	HAL NIDHI BI	HAVESH			Mother's Name: NI	SHA	(	Gender: Female	
Nam	e in Vernacular Langua	age:gujrati								
Addr	ess: 202,om neelkanth	shiv shrusti (	complex,link road.r	nulund(west),mumba	ai 501,om neelka	nth,shiv shrusti com	nk road.mulur	nd(wple:	x,liest),mumbai	
City:	mumbai, Taluka: Mum	bai, District: I	Mumbai City, State	: Maharashtra, PIN:	400080					
Tele	ohone no.:		Mob	ile no: 91816957373	31	Emai	I: nishapanch	al44@y	ahoo.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	No: 728	33451 (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 Assessm	ent)		
SN	Paper Code			Paper Nar	ne				AM - AT	
1	83001	Financial Ac	counting and Audit	ing IX - Financial Ac	counting	Th-UA	\[]			
2	83007	Financial Ac	counting and Audit	ing X - Cost Account	ting		Th-UA	\[]		
3	83013	Business Ec	onomics VI				Th-UA	\[]		
4	83014	Commerce \	<b>/</b> I					Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II	r II			<b>\[]</b>		
6	83016	Export Marke	eting Paper II				Th-CA	١[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exam	nination	Fees	
Mark	Statement Fee		Total:							
D	namt Datailar	\	:	1,	Callana Danaint	No. and Date:				
DD N		Amount Rece	MICR No:		DD Date:	No. and Date.	Donle			
	er Preference (Code/N	omo):	MICK NO.		DD Date.		Bank:			
	er Preference (Code/N									
	`		Syclustians / The C	Controller Of Everning	ntion					
	Director, Board of Exam					ad foo for the come	l horoby	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	t to 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 unive	ersity Examination	n etc. on religious o	any			
	r ground. I understand t elled or rejected.	that in the ev	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	
Declaration by Principal/HOD/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 purse/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:	Eligibi	ility Status:	Examination form 110186	Examination form No.:  110186  Division/Section:				Sec.		
	2018016400939184	E	Eligible						Dex		
Instr	uction Medium:					Nationality:	India				
				Student's Perso	nal Informati	on	,				
Stud	ent's Name: JAISWA	R ANKITA BA	ALKISHAN			Mother's Nam	e: RANJITA		Gender: Female		
Nam	e in Vernacular Langua	ge:जैसवार अंवि	केता बालिकशन								
	ess: Balkisan Jaiswar D Smashbhumi, Shivaji N			oad, Near Smashbhumi,	Shivaji Nag	ar, Chitlasar Ba	lkisan Jaiswa	ar Dhumale	e Chawl, Ghodbunder Road,		
City:	Thane, Taluka: Thane,	District: Than	e, State: Maharas	shtra, PIN: 400607							
Tele	phone no.:		Mob	ile no: 918450955684		E	Email : ANKI	TAJAISWA	AR47922@GMAIL.COM		
DOB	: Aug 25, 2001	Cate	egory: Open		Physically	Handicap: No					
Prev	ious Latest Examinatior	Details: Sem	III(Regular-Rev1	6)	Exam Even	t: Nov-2019		Seat No:	7283298 (Status: Pass)		
Exar	n form appearance type	: Fresher									
Pape	er Details: Plea	se select Pape	er details which y	ou want to appear ( UA -	University A	Assessment,CA	- College As	sessment)	)		
SN	Paper Code			Paper Name					AM - AT		
1	83001 I	inancial Acco	ounting and Audit	ing IX - Financial Accour	nting			Th-UA[]			
2 83007 Financial Accounting and Auditing X - Cost Accounting							Th-UA[]				
3	83013 I	Business Ecor	nomics VI					Th-UA[]			
4	83014	Commerce VI						Th-UA[]			
5	83015 I	Direct and Ind	irect Taxation Pa	per II				Th-CA[]			
6	83023	nvestment An	nalysis and Portfo	lio Management Paper I				Th-CA[]	`h-CA[]		
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee		Examinati	ion Fees		
Mark	Statement Fee		Total:								
Pavr	nent Details:	mount Receiv	red:	Colle	eae Receipt	No. and Date:					
DD N		l N	MICR No:	<u> </u>	DD Date:			Bank:			
Cent	er Preference (Code/Na	ıme):		<u> </u>				l			
	ue Preference (Code/Na										
To, [	Director, Board of Exami	nation and Ev	/aluations / The C	ontroller Of Examination	),			Plac	ce: <b>Vidyavihar</b>		
l req	uest permission to prese	ent myself for	the ensuing exan	nination. I have remitted	the prescribe	ed fee for the sa	me. I hereby	,			
				complete and correct to				Date	e:		
				ibed for the examination or day fixed for universit							
		nat in the ever	nt of any informati	on being found false or i	ncorrect, my	candidature is	liable to be				
canc	elled or rejected.								Student's Signature		
Declaration by Principal/HOD/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 surse/term work (if any) according to university rules.										
Place	e:										
Date:											
Date				College Sta	ff Signature				Signature of 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 No.: 110187  Division/Section:				(Rajal
	2018016400939203		Eligible						
nstr	uction Medium:	<b>!</b>				Nationality:	India		
				Student's Pe	ersonal Informati	on			
Stud	ent's Name: SINGH	I KAJAL AUD	HESH			Mother's Name: G	UDIYA	(	Gender: Female
Nam	e in Vernacular Langu	age:सिंह काज	ल औधेश						
Addr	ess: Building no. 6/B, I	Room no. 208	, Himalaya CHS, F	liranandani Akruti, L	allubhai Compou	ınd			
City:	Mumbai, Taluka: Kurla	a, District: Mu	mbai Suburban, St	ate: Maharashtra, PI	N: 400043				
Tele	ohone no.:		Mob	ile no: 91961937199	16	Ema	il : kajalsinghk	hushi20	00@gmail.com
DOB: Jul 18, 2000 Category: Open Physically Handicap: No									
⊃rev	ious Latest Examinatio	n Details: Se	m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 72	83608 (Status: Pass)
Exar	n form appearance typ	e: Fresher							
Pap€	er Details: Ple	ase 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	ne				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 Account	ing		Th-UA	۹[]	
3	83013	Business Ec	onomics VI				Th-UA	۹[]	
4	83014	Commerce \	/I				Th-UA	۹[]	
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	۹[]	
6	83016	Export Marke	eting Paper II					۹[]	
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees
Mark	Statement Fee		Total:						
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		Amount Rece			College Receipt	No. and Date:	- In .		
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	er Preference (Code/N								
	e Preference (Code/N			0.5				_	
	Director, Board of Exam					ad Care Carellan and a	I le conte	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 m	ny knowledge and be	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
Declaration by Principal/HOD/Chairperson									
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	<b>)</b> :								
				_					
Date	:			College Staff Signature		0	and Ota	natura of	
			College Staff Signature			Seal and Signature of Principal/HOD/Chairperson			



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'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

PRN: Eligibility Status: Examination form No.: Division/Section: Roll					Roll No.:	1010			
:	2018016400939211		Eligible						Ashinde
nstru	uction Medium:	•				Nationality:	India		•
				Student's Perso	onal Informat	ion			
Stude	ent's Name: SHINDE	ADITI CHA	NDRAKANT			Mother's Nar	me: VANDAN	IA	Gender: Female
Nam	e in Vernacular Langua	ge:शिंदे अदित	11 चंद्रकांत						
Addr	ess: COLLECTOR CHA	WL NO 6, R	OOM NO 11 AGA	RWADI					
City:	MUMBAI, Taluka: Kurla	i, District: Mu	ımbai Suburban, S	State: Maharashtra, PIN:	400088				
	phone no.:		Mob	pile no: 917039671746	1		Email : aditis	shinde178	@gmail.com
	: Oct 28, 2000		tegory: Open		<del>, ' '</del>	Handicap: No	)		
	ous Latest Examination		m III(Regular-Rev1	6)	Exam Ever	t: Nov-2019		Seat No:	: 7283593 (Status: ATKT)
	n form appearance type								
		se select Pa	per details which y	ou want to appear ( UA	- University /	Assessment,C/	A - College A	ssessment T	
SN	Paper Code			Paper Name				T1 114 53	AM - AT
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3				ing X - Cost Accounting				Th-UA[]	
4		Business Ec Commerce \						Th-UA[]	
5			direct Taxation Pa	nor II				Th-CA[]	
6			Operational Resea					Th-CA[]	
	ocation Fee	Liements of	Exam Form Late	· · · · · · · · · · · · · · · · · · ·	Evam Form	Super Late Fe	<u> </u>	<del>'                                    </del>	ation Fees
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viaire	- Clatomont 1 00		10.0						
Payn	nent Details: A	mount Rece	ived:	Col	lege Receipt	No. and Date:			
DD N	lo:		MICR No:		DD Date:			Bank:	
Cent	er Preference (Code/Na	ime):							
	e Preference (Code/Na								
				Controller Of Examinatio				Pla	ce: Vidyavihar
decla	ire that all statement ma	ade in this ap	oplication are true,	nination. I have remitted complete and correct to ibed for the examination	the best of r	ny knowledge a	and belief. I	y Da <sup>i</sup>	te:
eque	est for any special conc	ession such	as change in time	or day fixed for universition being found false or	ty Examination	on etc. on religi	ious or any		
	elled or rejected.		, , ,	<b>y</b>	,				Student's Signature
Decla	aration by Principal/HOI	D/Chairperso	on						
respo		ectification of	the information. H	y me. The information p e/she is regular student					edge. I also undertake the endance and practical
Place	<b>9</b> :								

College Staff Signature



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	PRN:	Eligi	bility Status:	Examination for 11018		Division/Section:	Roll No.	.:	(ED)	
:	2018016400939226	Pı	rovisional		-				4	
Instru	uction Medium:					Nationality:	India			
		_		Student's Pe	ersonal Informati	on				
Stud	ent's Name: SHAIKH	H MOHD KAII	F ASHPAQ			Mother's Name: SI	HAINAAZ	(	Gender: Male	
Nam	e in Vernacular Langua	ge:SHAIKH I	MOHD KAIF ASHF	PAQ		•				
Addr	ess: Room no 2 prabho	kutir nityana	ınd nagar kajupad	la kamani kurla west	mumbai					
City:	mumbai, Taluka: Kurla	, District: Mur	mbai Suburban, St	tate: Maharashtra, Pl	N: 400072					
Telep	ohone no.:		Mob	oile no: 91993056704	5	Emai	l : kaifshaikh4	88@gm	ail.com	
DOB	: Dec 27, 2000	Cat	tegory: Open		Physically Handicap: No					
Previ	ious Latest Examination	າ Details: Ser	m III(Regular-Rev1	16)	Exam Even	t: Nov-2019	Seat	No: 728	83743 (Status: Pass)	
Exan	n form appearance type	: Fresher								
Pape	r Details: Plea	se select Par	per details which y	ou want to appear ( l	JA - University A	Assessment,CA - Co	lege Assessm	nent)		
SN	Paper Code			Paper Nan	ne				AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Acc	counting		Th-U/	۹[]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Account	ing		Th-UA	۹[]		
3	83013	Business Eco	onomics VI					۹[]		
4		Commerce V	<u>/I</u>					Th-UA[]		
5	83015	Direct and In-	direct Taxation Pa	per II			Th-CA	٩[]		
6	83020	Computer sy	stems and Applica	tions Paper II			Th-U/	4 [ ] ;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	ived:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/Na				1		1	•		
	ie Preference (Code/Na									
	Director, Board of Exam		valuations / The C	Controller Of Examina	ation,			Place:	Vidyavihar	
	uest permission to pres								Viayaviilai	
	are that all statement magene through the sylla							Date:		
	est for any special conc									
	ground. I understand t	hat in the eve	ent of any informat	ion being found false	or incorrect, my	candidature is liable	to be			
canc	elled or rejected.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
This	form is carefully scrutin	ized by the C	College staff and by	y me. The information	n printed in the fo	orm is correct to the	best of my kno	owledge	e. 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.									
cours	se/term work (ii any) ac	cording to un	iiversity rules.							
Place	<u> </u>									
	<b>-</b> .									
Date										
Date	•			College	Staff Signature		Seal a	and Sigr	nature of	
							_	D/Chairperson		



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PRN: Eligibility Status:		Examination 1		Division/Section:	Roll No	.:	Savita			
	2018016400939234		Eligible						DAVIE	
Instr	uction Medium:					Nationality:	India			
				Student's P	ersonal Informati	on				
Stud	ent's Name: <b>BOHA</b> l	RA SAVITA R	AM			Mother's Name: SI	EETA		Gender: Female	
Nam	e in Vernacular Langua	age:सविता								
Addr	ess: 1/22,SHREE SAI	SHRADHA S	EVA SANGH,HAN	UMAN GALLI KANJ	URMARG (EAS	Γ) MUMBAI				
City:	MUMBAI SUBURBAN	, Taluka: Kurl	a, District: Mumba	Suburban, State: M	laharashtra, PIN	400042				
Tele	ohone no.:		Mob	ile no: 91773874648	84	Emai	il : savitaboha	ra17@gı	mail.com	
DOB	: Aug 18, 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	: No: 729	90663 (Status: Pass)	
Exar	n form appearance typ	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 Ac	counting and Audit	ng IX - Financial Accounting				4[]		
2	83007	Financial Ac	counting and Audit	ing X - Cost Accoun	ng X - Cost Accounting			A[]		
3	83013	Business Ec	onomics VI				Th-UA	4[]		
4	83014	Commerce \	<b>/</b> I				Th-UA	Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			Th-CA	۹[]		
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	nination	Fees	
Mark	Statement Fee		Total:							
Pavr	nent Details:	Amount Rece	ived:		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/N	ame):	I				I			
Venu	ie Preference (Code/N	ame):								
To, [	Director, Board of Exan	nination and E	valuations / The C	ontroller Of Examin	ation,			Place:	Vidyavihar	
	uest permission to pres are that all statement m							Date:		
have	gone through the sylla	bus and the l	ist of books prescr	bed for the examina	ition for which I a	m appearing. I shall	not	-		
	est for any special con- ground. I understand									
	elled or rejected.								udanda Cinnakura	
D = =1	avatian bu Drinainal/LIC	D/Oh airm area						Sti	udent's Signature	
This resp	Declaration by Principal/HOD/Chairperson  This form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical course/term work (if any) according to university rules.									
Place	a·									
iaci	<b>J.</b>			_						
Date										
Date.				College Staff Signature		Seal and Signature of				
				Conogo cian oignalaic		Principal/HOD/Chairperson				



# University of Mumbai, Mumbai

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	PRN:	Eligibility Status:	Examination form 110191	n No.:	Division/Section:	Roll No	.:	introducialkat	
:	2018016400939242	Eligible		III				1	
nstru	uction Medium:	•			Nationality:	India			
			Student's Person	onal Informati	on				
Stud	ent's Name: MHADI	ALKAR PARTHY SHEKHAR			Mother's Name: SA	ANGEETA	(	Gender: Female	
Nam	e in Vernacular Langua	ge:म्हाडदळकर पार्थी शेखर							
Addr	ess: ASHIRWAD BLD.,	C-61 4TH FLOOR GUNSAGAF	R NAGAR, NEAR JAIN	TEMPLE KAI	_WA WEST.				
City:	MUMBAI, Taluka: Thar	ne, District: Thane, State: Maha	rashtra, PIN: 400605						
	phone no.:	Mob	ile no: 918329345801			l : parthymhad	ddalkar1	@gmail.com	
	: Dec 31, 1999	Category: Reserved (			Handicap: No				
		n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	33408 (Status: ATKT)	
	n form appearance type								
Pape	r Details: Plea	se select Paper details which y	ou want to appear ( UA	- University A	ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code		Paper Name				AM - AT		
1		Financial Accounting and Audit				Th-UA			
2		Financial Accounting and Audit	ing X - Cost Accounting	l		Th-U			
3		Business Economics VI				Th-U	.,		
4		Commerce VI				Th-U/			
5 83015 Direct and Indirect Taxation Paper II									
6		Export Marketing Paper II				Th-CA			
	ocation Fee	Exam Form Late	Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee	Total:							
Payn	nent Details:	mount Received:	Col	lege Receipt	No. and Date:				
DD N		MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):							
√enu	e Preference (Code/Na	nme):							
Γο, C	Pirector, Board of Exam	ination and Evaluations / The C	ontroller Of Examination	n,			Place:	Vidyavihar	
		ent myself for the ensuing exam					<b>_</b>	,	
		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 o	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	e to be			
Janic	elled of rejected.						Sti	udent's Signature	
Deck	aration by Principal/HO	D/Chairperson							
respo	his form is carefully scrutinized by the College staff and by me. The information printed in the form is correct to the best of my knowledge. I also undertake the esponsibility of fulfillment/rectification of the information. He/she is regular student of this College and has completed the required attendance and practical purse/term work (if any) according to university rules.								
<b>.</b>									
Place	<del>)</del> .								
<b></b>									
Date			College Staff Signature			Seal and Signature of			
			College Stall Signature			Principal/HOD/Chairperson			



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Examination form No.:

Disciple 16



	PRN:	Eligi	bility Status:	110192	I NO	Division/Section	n: Ro	II No.:			
	2018016400939257		Eligible						Abrigith		
Instr	uction Medium:					Nationality:	India		•		
				Student's Perso	onal Informat	on					
Stud	ent's Name: <b>MENO</b>	N ABHIJITH :	SREEKUMAR			Mother's Name	e: JAYASHRI	ΞE	Gender: Male		
Nam	e in Vernacular Langu	age:मेनन अभि	भेजित श्रीकुमार								
Addr	ess: FLAT NO:G-2,BL	DG NO:16,M0	OHAN PALMS KA	TRAP,BADLAPUR(E)							
City:	BADLAPUR, Taluka: I	Kalyan, Distric	ct: Thane, State: M	aharashtra, PIN: 42150	3						
Tele	phone no.: 2614401		Mob	ile no: 919987227937		E	mail : menor	abhijith10(	@gmail.com		
DOB	: Sep 15, 2000	Ca	tegory: Open		Physically	Handicap: No					
	ious Latest Examinatio		m III(Regular-Rev1	6)	Exam Ever	t: Nov-2019		Seat No: 7	283405 (Status: Pass)		
Exar	n form appearance typ										
Pape	er Details: Plea	ase select Pa	per details which y	ou want to appear ( UA	- University A	Assessment,CA -	College Ass	essment)			
SN	Paper Code			Paper Name					AM - AT		
1	83001	Financial Ac	counting and Audit	ing IX - Financial Accou	nting	1	h-UA [ ]				
2	83007	Financial Ac	counting and Audit	ing X - Cost Accounting		h-UA [ ]					
3	83013	Business Ec	onomics VI	1							
4	83014	Commerce \	/I						Th-UA[]		
5	83015	Direct and In	direct Taxation Pa	per II			1	h-CA [ ]			
6	83023	Investment A	Analysis and Portfo	lio Management Paper	II		1	h-CA []			
Convocation Fee Exam Form Late Fe				Fee	Exam Form	Super Late Fee		Examination	on Fees		
Mark	Statement Fee		Total:								
Pavr	nent Details:	Amount Rece	ived:	Coll	lege Receipt	No. and Date:					
DD N			MICR No:		DD Date:		- I	Bank:			
Cent	er Preference (Code/N	lame):		l							
	ue Preference (Code/N										
To, [	Director, Board of Exan	nination and E	Evaluations / The C	ontroller Of Examinatio	n,			Place	e: Vidyavihar		
				nination. I have remitted					-		
				complete and correct to ibed for the examinatior				Date:			
				or day fixed for universi							
othe	r ground. I understand			on being found false or							
canc	elled or rejected.								Student's Signature		
Decl	aration by Principal/HC	DD/Chairperso	on								
				me. The information pr							
	onsibility of fulfillment/r se/term work (if any) a			e/she is regular student	of this Colle	ge and has comp	pleted the req	uired atten	dance and practical		
cour	Scrienti Work (ii arry) as	ccording to di	iiversity ruies.	T							
Place	e:										
	-										
Date											
Dutc.				College Staff Signature			Seal and Signature of				
			3			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:	Eligi	ibility Status:	Examination fo 110193	3	Division/Section:	Roll No	).:	Pkadam	
2	2018016400939265		Eligible			I		1	J. Molalli	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Information	on				
Stude	ent's Name: KADAN	/ PRAJWAL	CHANDRASHEKA	R		Mother's Name: VA	AISHALI		Gender: Male	
Name	e in Vernacular Langua	age:कदम प्रज्व	वल चंद्रशेखर							
	ess: FLAT 601, SAI HE									
<u> </u>	Mumbai, Taluka: Kurla	ı, District: Mur								
	phone no.:	<del></del>		oile no: 919167162171			il : kadamprajv	wal@gm	nail.com	
	i: Jul 01, 2000		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Event	t: Nov-2019	Seat	t No: 728	83310 (Status: Pass)	
	xam form appearance type: Fresher									
Pape		ase select Par	per details which y	ou want to appear ( U	JA - University A	ssessment,CA - Col	ilege Assessn	nent)		
SN	Paper Code	<b></b>		Paper Name					AM - AT	
1				ting IX - Financial Acco		Th-U/				
2				ting X - Cost Accountir	ng		Th-U/			
3		Business Eco	onomics VI				Th-U/			
4		Commerce V					Th-U/			
5			ndirect Taxation Pa	per II			Th-C/			
6	83016	Export Marke	eting Paper II				Th-C/	A[]		
Conv	vocation Fee		Exam Form Late	Fee	Exam Form 9	Super Late Fee	Exar	mination	ı Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details:	Amount Recei	ived.		College Receipt I	No and Date:				
DD N			MICR No:		DD Date:	Vo. dila Dato.	Bank	<del></del>		
	er Preference (Code/Na		IWI GI T T C.					-		
	ue Preference (Code/Na									
	Director, Board of Exam	•	Evaluations / The C	Controller Of Examina	tion,	•		Place:	Vidyavihar	
	uest permission to pres					ed fee for the same.	I hereby	I_	viayaviilai	
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:		
	egone through the syllal est for any special conc									
other	r ground. I understand t									
cance	elled 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 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	<b>&gt;</b> :									
Date:							İ			
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.

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

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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	110194	II NO	Division/Section:	Roll No	.:	Q.:1	
2	2018016400939273	Eligible		III				Smil	
Instru	ıction Medium:				Nationality:	India			
			Student's Perso	onal Informat	ion				
Stude	ent's Name: LATHIA	SMIT HITESH			Mother's Name: JIC	ANA	Ge	ender: Male	
Name	e in Vernacular Langua	ge:लाथिया स्मित हितेश							
Addre	ess: 501/502 Marathon	Galaxy 2 L.B.S. Marg Mulund V	Vest						
City:	Mumbai, Taluka: Mumb	oai, District: Mumbai City, State:	Maharashtra, PIN: 400	0800					
Telep	hone no.:	Mobi	le no: 919769089312		Email	: lathiasmit@	gmail.cor	n	
DOB:	Dec 02, 2000	Category: Open		Physically	Handicap: No				
Previ	ous Latest Examinatior	n Details: Sem III(Regular-Rev16	6)	Exam Ever	t: Nov-2019	Seat	t No: 7283	374 (Status: Pass)	
Exam	n form appearance type	: Fresher							
Pape	r <b>Details:</b> Plea	se select Paper details which yo	ou want to appear ( UA	- University A	Assessment,CA - Coll	ege Assessn	nent)		
SN	Paper Code		Paper Name				AM - AT		
1	83001	Financial Accounting and Auditi	ng IX - Financial Accounting Th-U						
2	83007	Financial Accounting and Auditi	ng X - Cost Accounting	l	Th-U/	A[]			
3	83013	Business Economics VI			Th-U/	Th-UA[]			
4	83014	Commerce VI	Th-U					n-UA [ ]	
5	83015	Direct and Indirect Taxation Pap	er II			Th-C/	A[]		
6	83016	Export Marketing Paper II				Th-C/	A [ ]		
Conv	ocation Fee	Exam Form Late F	ee	Exam Form	Super Late Fee	Exar	mination F	ees	
Mark	Statement Fee	Total:							
Paym	nent Details:	mount Received:	Col	lege Receipt	No. and Date:				
DD N		MICR No:		DD Date:		Bank	:		
Cente	er Preference (Code/Na	ame):				I			
Venu	e Preference (Code/Na	nme):							
To, D	irector, Board of Exam	ination and Evaluations / The Co	ontroller Of Examinatio	n,			Place:	Vidyavihar	
decla	re that all statement ma	ent myself for the ensuing exam ade in this application are true, o	complete and correct to	the best of r	ny knowledge and be	lief. I	Date:	•	
reque	est for any special conc	bus and the list of books prescril ession such as change in time of hat in the event of any information	or day fixed for universi	ty Examination	on etc. on religious or	any			
	elled or rejected.	•	· ·				Stuc	lent's Signature	
Decla	aration by Principal/HO	D/Chairnerson					Otac	icht 3 Oighataic	
This respo	form is carefully scrutin	ized by the College staff and by ectification of the information. He cording to university rules.							
Place	<b>:</b>								
Date:									



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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: Eligibility Status:			Examination form 110195	n No.:	Division/Section:	Roll	No.:		
:	2018016400939281		Eligible		III				
Instru	uction Medium:	<del>.</del>				Nationality:	India		
				Student's Perso	onal Informati	ion			
Stud	ent's Name: BHANU	ISHALI DHRU	JV GANGJI			Mother's Name: D	AMYANTI		Gender: Male
Nam	e in Vernacular Langua	ge:भानुशाली १	धुव गंगाजी						
Addr	ess: 3/6 shivnath vinod	gupta chawl	asalpha village su	bhash nagar ghatkopa	r (w)				
		, District: Mur	nbai Suburban, St	ate: Maharashtra, PIN:	400084				
	phone no.:	T		ile no: 919820494121		Ema	il : dhruvbl	nanushali	98@gmail.com
DOB	: Sep 07, 2000	Cat	egory: Open		<del>, ' ' '</del>	Handicap: No			
	ious Latest Examinatior		n I(Regular-Rev16	5)	Exam Even	t: Nov-2019		Seat No: 7	014631 (Status: Pass)
	n form appearance type								
_		se select Par	per details which y	ou want to appear ( UA	- University A	Assessment,CA - Co	llege Asse	essment)	
SN	Paper Code			Paper Name					AM - AT
1				ing IX - Financial Accou				n-UA [ ]	
2		Financial Acc	counting and Audit	ing X - Cost Accounting	<u> </u>		TI	n-UA [ ]	
3		Business Eco	onomics VI					n-UA [ ]	
4		Commerce V					TI	n-UA [ ]	
5 83015 Direct and Indirect Taxation Paper II							n-CA [ ]		
6	83016	Export Marke	ting Paper II				TI	n-CA [ ]	
Conv	ocation Fee		Exam Form Late	Fee	e Exam Form Super Late Fee E			Examination	on Fees
Mark	Statement Fee		Total:						
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		mount Recei		Col		No. and Date:	l <sub>D</sub>		
DD N			MICR No:		DD Date:		l <sub>R</sub>	ank:	
	er Preference (Code/Na								
	ue Preference (Code/Na			Annalia of Franciscation	_				
				controller Of Examinatio		- d f f th	I la avalavi	Place	e: Vidyavihar
				nination. I have remitted complete and correct to				Date:	
have	gone through the syllal	bus and the li	st of books prescr	ibed for the examination	n for which I a	nm appearing. I shal	not	$\vdash$	
				or day fixed for universi ion being found false or					
	elled or rejected.		,,	g					0. 1 11 01 1
		D.(O) .						;	Student's Signature
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Place	e:								
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S. K. Somaiya College of Arts, Science and Commerce (540)

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	PRN:	Eligi	ibility Status:	Examination for 110196		Division/Section:	Roll No	0.:	awant		
2	2018016400939296		Eligible								
nstru	uction Medium:					Nationality:	India				
				Student's Pers	sonal Informati	on					
Stude	ent's Name: SAWAI	NT SUDESH	DATTATRAYA			Mother's Name: DA	AKSHATA		Gender: Male		
	e in Vernacular Langua										
	ess: 401 SHIV DARSH										
	MUMBAI, Taluka: Mun	mbai, District:									
	phone no.:			oile no: 918976216238			l : sudesh897	76@gma	il.com		
	: Jun 03, 2000		tegory: Open		Physically	Handicap: No					
								at No: 728	33738 (Status: Pass)		
	n form appearance type										
Pape		ase select Par	per details which y	ou want to appear ( UA	A - University A	ssessment,CA - Col	lege Assessi	ment)			
SN	Paper Code	<u> </u>		<u>'</u>	Paper Name				AM - AT		
1	83001	+		ing IX - Financial Acco			Th-U	.,			
2	83007	Financial Acc	counting and Audit	ing X - Cost Accountin	ıg		Th-U	JA []			
3	83013	Business Eco	onomics VI		7						
4	83014	Commerce V	<u>/I</u>						Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II TI							Th-C	;A[]			
6 83020 Computer systems and Applications Paper II Th-U							JA [ ] ;Th-	CA[]			
Conv	ocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	amination	Fees		
Mark	Statement Fee		Total:								
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			MICK NO.		DD Date.		Banl	K:			
	er Preference (Code/N										
	ue Preference (Code/Na			`antroller Of Everningti				T			
	Director, Board of Exam					foo for the come	Learaby	Place:	Vidyavihar		
	uest permission to pres are that all statement m							Date:			
have	gone through the sylla	abus and the li	list of books prescr	ibed for the examination	on for which I a	m appearing. I shall	not	<u> </u>			
	est for any special cond r ground. I understand t										
cance	elled or rejected.		, , , , , , , , , , , , , , , , , , ,	on bonning round remain a	// III.				0		
	5							St	udent's Signature		
	aration by Principal/HO	-				· · · · · · · · · · · · · · · · · · ·		محاد ا	the state of the state of		
	form is carefully scrutir onsibility of fulfillment/r										
	se/term work (if any) ac			5/6/10 10 109 2020 2020		,o aa	a 6.00	<b>u</b>	arroo arra praduces.		
Place	э:										
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				College S	College Staff Signature			Seal and Signature of			



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

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

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	PRN:	Eligi	ibility Status:	Examination f 11019		Division/Section:	Roll No	).:	Moreons	
7	2018016400939307		Eligible						Mei	
Instru	uction Medium:	_				Nationality:	India			
				Student's Po	ersonal Informati	on				
Stude	ent's Name: SIDDIQ	UI MUSKAN	I IRSHAD ALI			Mother's Name: JE	HANARA		Gender: Female	
Nam	e in Vernacular Langua	ge:SIDDIQU	I MUSKAN IRSHA	D ALI						
Addr	ess: Bldg no C4 Room I	No 703 New	Mhada Cly Kokri F	gar wadala MUMB <i>F</i>	Al					
City:	Mumbai, Taluka: Mumb	oai, District: N	vlumbai City, State	: Maharashtra, PIN:	400037					
Teler	ohone no.:		Mob	oile no: 91961936303	no: 919619363039 Email : siddiquisaifali7@gmail.com					
DOB	: Nov 25, 1999	Cat	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	າ Details: Ser	m III(Regular-Rev1	6)	Exam Even	nt: Nov-2019	Seat	t No: 728	83602 (Status: Pass)	
Exan	n form appearance type	: Fresher								
Pape	r Details: Pleas	se select Pa	per details which y	ou want to appear (	UA - University A	Assessment,CA - Co	llege Assessr	nent)		
SN	Paper Code			Paper Nan	ne			AM - AT		
1	83001 F	Financial Acr	counting and Audit	ing IX - Financial Ac	counting	Th-U	A []			
2	83007 F	Financial Acr	counting and Audit	ing X - Cost Account	ng X - Cost Accounting Th					
3	83013 E	Business Eco	onomics VI				Th-U/	A [ ]		
4	83014	Commerce V	/1				Th-U	Th-UA [ ]		
5	83015	Direct and In	ndirect Taxation Pa	per II			Th-C/	A [ ]		
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:							
		Amount Recei	T		College Receipt	No. and Date:				
DD N			MICR No:		DD Date:		Bank	<u>c</u>		
	er Preference (Code/Na									
	ie 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 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 conce	ession such	as change in time	or day fixed for unive	ersity Examinatio	on etc. on religious or	r any			
	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			
Caric	elled or rejected.							St	tudent's Signature	
Deck	aration by Principal/HOI	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	<b>;</b> ;									
Date:	:				,					
				College	College Staff Signature			Seal and Signature of Principal/HOD/Chairperson		



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PRN:	Eligil	bility Status:	Examination fo 110198	3	Division/Section:	Roll No	<b>)</b> .:	Se by bo	
2018016400939315		Eligible				l		x longs Antita	
Instruction Medium:					Nationality:	India			
			Student's Pe	rsonal Informati	on				
Student's Name: SINGH	ANKITA VING	ODKUMAR			Mother's Name: RI	EKHA		Gender: Female	
Name in Vernacular Langua									
Address: PLOT NO-26/F,6, I									
City: MUMBAI, Taluka: MUM	/IBAI, District:	<u>_</u>							
Telephone no.:			pile no: 918655540659			il : SINGHHH1	1807@G	MAIL.COM	
DOB: Jul 18, 1999		tegory: Open		<del></del>	Handicap: No				
								83606 (Status: Pass)	
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 Nam				AM - AT		
			ing IX - Financial Acc		Th-U/	.,			
			ing X - Cost Accounting	ng		Th-U/			
	Business Eco						Th-UA[]		
	Commerce V						Th-UA[]		
5 83015 Direct and Indirect Taxation Paper II Th-									
6 83023			lio Management Pape			Th-C/	A[]		
Convocation Fee		Exam Form Late	Fee	Exam Form	Super Late Fee	Exa	mination	Fees	
Mark Statement Fee		Total:							
Payment Details: A	Amount Receiv	ived:	C	College Receipt I	No. and Date:				
DD No:		MICR No:		DD Date:		Bank	k:		
Center Preference (Code/Na	ame):								
Venue Preference (Code/Na									
To, Director, Board of Exami	ination and E	valuations / The C	ontroller Of Examina	tion,			Place:	Vidyavihar	
I request permission to prese							<u>_</u>	• • • • • • • • • • • • • • • • • • • •	
declare that all statement ma have gone through the syllat							Date:		
request for any special conc	cession such a	as change in time	or day fixed for univer	rsity Examinatio	on etc. on religious o	r any			
other ground. I understand the									
cancelled or rejected.							St	tudent's Signature	
Declaration by Principal/HOI	D/Chairperso	on .					<u>*                                      </u>		
responsibility of fulfillment/re	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.								
Course/term work (ii arry) as-	Columny to ann	IVEISITY TUICS.			1	<del>-</del>			
Place:									
Date:						1			
Date.			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)

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	PRN:	Eligibility Status:	Examination for 110199	m No.:	Division/Section:	Roll No.	.:	Patrio
:	2018016400939323	Eligible						95007
Instru	uction Medium:			N	Nationality:	India		
		_	Student's Pers	onal Information	n	,		
Stud	ent's Name: DALVI S	SAHER MUKHTAR			Mother's Name: NA	ASREEN		Gender: Female
Nam	e in Vernacular Languaç	ge:दळवी सहेर मुख्तार						
Addr	ess: room no 202b/wing	ashraf apt 2nd floor chand na	gar kausa mumbra					
City:	THANE, Taluka: Thane	, District: Thane, State: Mahar	ashtra, PIN: 400612					
	phone no.:	Mot	oile no: 919867428725		Email	: saherdalvi1	7@gma	ail.com
DOB	: Aug 17, 2000	Category: Open	_	Physically F	Handicap: No			
Previ	ious Latest Examination	Details: Sem III(Regular-Rev	16)	Exam Event:	: Nov-2019	Seat	No: 728	33214 (Status: Pass)
	n form appearance type:	: Fresher						
Pape		se select Paper details which y	ou want to appear ( UA	A - University As	ssessment,CA - Col	lege Assessm	nent)	
SN	Paper Code		Paper Name				AM - AT	
1		inancial Accounting and Audit			Th-UA	••		
2	83007 F	inancial Accounting and Audit	ing X - Cost Accounting	9		Th-UA	۱[]	
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 []								
Conv	vocation Fee	Exam Form Late	Fee	Exam Form S	Super Late Fee	Exan	nination	Fees
Mark	Statement Fee	Total:						
Pavn	nent Details: Ar	mount Received:	Cc	llege Receipt N	lo. and Date:			
DD N		MICR No:		DD Date:		Bank	:	
Cent	er Preference (Code/Na	me):		1		l		
	ue Preference (Code/Na	· · · · · · · · · · · · · · · · · · ·						
To, E	Director, Board of Exami	nation and Evaluations / The C	Controller Of Examination	on,			Place:	Vidyavihar
		ent myself for the ensuing exar					Datas	,
		ade in this application are true, ous and the list of books presci					Date:	
reque	est for any special conce	ession such as change in time	or day fixed for univers	ity Examination	n etc. on religious or	any		
	r ground. I understand the elled or rejected.	nat in the event of any informat	ion being found false o	r incorrect, my o	candidature is liable	to be		
Caric	elled of rejected.						Stı	udent's Signature
Deck	aration by Principal/HOD	D/Chairperson						
		ized by the College staff and be ectification of the information. H						
cours	se/term work (if any) acc	cording to university rules.						
Place	e:							
			_					
Date	:							
			College S	College Staff Signature Seal and Signature of Principal/HOD/Chairperson				



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Examination form No.:

Disciple 16

'e-Suvidha' account on



Seal and Signature of Principal/HOD/Chairperson

	PRN:	Eligibility Status:	110200	II NO	Division/Section:	Roll No	u:	-	
:	2018016400939331	Eligible		III				The same of the sa	
Instru	uction Medium:				Nationality:	India			
			Student's Perso	onal Informat	ion				
Stude	ent's Name: KARAN	GUTKAR ANISHA ANIL			Mother's Name: AN	IUSHREE	C	Gender: Female	
Nam	e in Vernacular Langua	ge:अनिशा							
Addr	ess: A/3; 3:04 SHREE \	VINAYAK CHS SECTOR-16, N	ERUL(WEST) NAVI MU	JMBAI					
City:	NAVI MUMBAI, Taluka	: Thane, District: Thane, State:	Maharashtra, PIN: 400	706					
Telep	ohone no.:		ile no: 917039710302		Email	: anishakara	ngutkar(	@gmail.com	
	: Jun 28, 2000	Category: Reserved (		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Sem III(Regular-Rev1	6)	Exam Event: Nov-2019 Seat No: 7283319 (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		Financial Accounting and Audit			A[]				
2		Financial Accounting and Audit	ing X - Cost Accounting	l		Th-U/			
3		Business Economics VI				Th-U/			
4 83014 Commerce VI						Th-U/			
5 83015 Direct and Indirect Taxation Paper II Th-C									
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:							
Payn	nent Details:	mount Received:	Col	lege Receipt	No. and Date:				
DD N	lo:	MICR No:		DD Date:		Bank	:		
Cent	er Preference (Code/Na	ame):				•			
Venu	ie Preference (Code/Na	nme):							
To, D	Director, Board of Exam	ination and Evaluations / The C	ontroller Of Examinatio	n,			Place:	Vidyavihar	
decla	are that all statement ma	ent myself for the ensuing examade in this application are true,	complete and correct to	the best of r	ny knowledge and be	lief. I	Date:	·	
reque	est for any special conc	ous and the list of books prescri ession such as change in time of hat in the event of any informati	or day fixed for universi	ty Examination	on etc. on religious or	any			
	elled or rejected.	nat in the event of any informati	on being lound laise of	incorrect, my	candidature is liable	to be			
	Student's Signature								
	aration by Principal/HO								
respo	onsibility of fulfillment/re	ized by the College staff and by ectification of the information. Ho 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]

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	PRN:	Eligi	bility Status:	Examination f 11020		Division/Section:	Roll No	::	Dringe	
	2018016400939346		Eligible							
Instru	uction Medium:					Nationality:	India	·		
				Student's Pe	ersonal Informati	on				
Stud	ent's Name: SHIND	E SHIVANI A	NANDA			Mother's Name: SI	JREKHA	(	Gender: Female	
Nam	e in Vernacular Langu	age:शिंदे शिवा	नी आनंदा							
Address: room no. 13, navnath chawl-2, suryanagar L.B.S. road, behind suryanagar police station, vikroli West										
City: mumbai, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400083										
Telephone no.: Mobile no: 919969023667 Email : anandashin								nde67@	gmail.com	
DOB	: Mar 03, 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	33596 (Status: ATKT)	
Exan	n form appearance typ	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	ne				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 Economics VI							Th-UA[]		
4 83014 Commerce VI							Th-U	A[]		
5 83015 Direct and Indirect Taxation Paper II								A [ ]		
6	83016	eting Paper II		Th-C/	A[]					
Conv	ocation Fee		Exam Form Late	Fee	ee Exam Form 9		Exar	mination	Fees	
Mark	Statement Fee		Total:							
				T						
		Amount Rece	ı		College Receipt No. and Date:			Pauli		
DD N			MICR No:		DD Date:		Bank	:		
	er Preference (Code/N									
	e Preference (Code/N									
	Director, Board of Exan					16 6 11		Place:	Vidyavihar	
decla	uest permission to presore that all statement management management frough the sylla	nade in this ap	plication are true,	complete and correc	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 Examinatio	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	
Decl	aration by Principal/HC	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 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	<b>9</b> :									
Dete										
Date				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.

Examination form No.:

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

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	PRN:	Eligibility Status:	Examination form 110202	n No.:	Division/Section:	Roll No	).:	-a. 1 a				
2018016400939354 Eligible							Desiles D.					
nstr	uction Medium:	India										
	Student's Personal Information											
Stud	ent's Name: MIRZA	FARHANA FATIMA ASHWAQ I	HUSSAIN		Mother's Name: RE	SHMA	(	Gender: Female				
Nam	lame in Vernacular Language:मिर्झा फरहाना फातिमा अशवाक हुसेन											
Addr	Address: PLOT NO 37 AA-A6 ROAD NO 12 BAIGANWADI GOVANDI MUMBAI											
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400043												
Tele	ohone no.:	656@gm	ail.com									
DOB	: Jun 03, 2000	Category: Open		Physically	Handicap: No							
⊃rev	ious Latest Examinatio	n Details: Sem III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Sea	t No: 728	3707 (Status: Pass)				
Exar	n form appearance type	e: Fresher										
Pape	er Details: Plea	se select Paper details which yo	ou want to appear ( UA	- University A	ssessment,CA - Coll	lege Assessr	nent)					
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	h-UA [ ]								
4	83014	Th-U	h-UA [ ]									
5 83015 Direct and Indirect Taxation Paper II Th-0												
6 83020 Computer systems and Applications Paper II Th-U.								CA[]				
								xamination Fees				
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		Amount Received:	Coll	<u> </u>	No. and Date:	Dank						
OD N		MICR No:		DD Date:		Bank	ζ.					
	er Preference (Code/Na ue Preference (Code/Na											
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					d foo for the come !	harabu	Place:	Vidyavihar				
		ent myself for the ensuing exama ade in this application are true,					Date:					
nave	gone through the sylla	bus and the list of books prescri	bed for the examination	n for which I a	m appearing. I shall i	not	-					
		ession such as change in time or hat in the event of any informati										
	elled or rejected.	nde in the event of diff informati	on boing round raide of	moon oot, my	Carialactare le liable	10 50	_					
							St	udent's Signature				
	aration by Principal/HO	•										
		nized 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				
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Place	e:											
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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.

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:	Eligibility Status: Examination form N		n No.: Division/Section: Roll		u:	Sibha			
:	2018016400939362	Eligible		III				to you			
Instru	uction Medium:	•			Nationality:	India	-				
	Student's Personal Information										
Stud	ent's Name: JHA VII	BHA MITHILESH			Mother's Name: GA	AMBHIRA	Ge	ender: Female			
Nam	e in Vernacular Langua	ge:विभा									
Addr	ess: 14/G/703 Nilkanth	CHS Sangharsh Nagar Sakina	aka S.O, Mumbai								
City:	Mumbai, Taluka: Mumb	bai, District: Mumbai City, State	: Maharashtra, PIN: 400	0072							
Tele	Telephone no.:   Mobile no: 917045795484   Email : deepali.uif@gmail.com  DOB: Nov 14, 1999   Category: Open   Physically Handicap: No										
DOB	: Nov 14, 1999										
Prev	ious Latest Examination	n Details: Sem III(Regular-Rev	16)	Exam Ever	nt: Nov-2019	Seat	t No: 7283	301 (Status: Pass)			
Exan	n form appearance type	e: Fresher									
Pape	r Details: Plea	se select Paper details which y	ou want to appear ( UA	- University	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	A[]				
2	83007	Th-U	h-UA [ ]								
3	83013	Business Economics VI	A[]								
4	83014	Th-U	A[]								
5 83015 Direct and Indirect Taxation Paper 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	amination Fees				
Mark	Statement Fee	Total:									
	T										
_		mount Received:	Col	<u> </u>	No. and Date:	1					
DD N		MICR No:		DD Date:			Bank:				
	er Preference (Code/Na										
	ie Preference (Code/Na	<u> </u>									
To, E	irector, Board of Exam	ination and Evaluations / The C	Controller Of Examinatio	n,			Place:	Vidyavihar			
decla	are that all statement ma	ent myself for the ensuing exar ade in this application are true, bus and the list of books presci	complete and correct to	the best of r	ny knowledge and be	lief. I	Date:				
requi	est for any special cond ground. I understand t	ession such as change in time hat in the event of any informat	or day fixed for universi	ty Examination	on etc. on religious or	any					
	cancelled or rejected.  Student's Signature										
Deck	aration by Principal/HO	D/Chairperson									
resp	onsibility of fulfillment/re	ized by the College staff and be ectification of the information. He cording to university rules.									
Place	): 										
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]

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	PRN:	Eligi	ibility Status:	Examination for 110204		Division/Section:	Roll No.	).:	Diga	
;	2018016400939377		Eligible			1		1	79	
nstrı	uction Medium:					Nationality:	India		•	
				Student's Per	rsonal Informati	on				
Stud	ent's Name: SHAIKI	H AASIYA M	OHAMMED HAFIJ	ULLA		Mother's Name: SA	AKHTUNNISH	IA (	Gender: Female	
Nam	e in Vernacular Langua	age:शेख आशि	ाया मोहम्मद हाफिर	<u> नु</u> लला						
	Address: 4B 504 Shanti Sadan Society Chandivali Farm Road Sangharsh Nagar Andheri East Mumbai - 400072									
	Mumbai, Taluka: , Distr	trict: Mumbai								
	phone no.:	<del></del>		oile no: 917666214607			il : shaikhaasiy	ya258@	gmail.com	
	: Apr 01, 2000		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	ι No: 728	83559 (Status: Pass)	
	n form appearance type									
		ase select Par	per details which y	ou want to appear ( U		ssessment,CA - Co	lege Assessm	nent)		
SN	Paper Code			Paper Name					AM - AT	
1				ting IX - Financial Acco			Th-U/			
2		<u> </u>		ting X - Cost Accountin	ng		Th-U/			
3		Business Eco					Th-U/			
4		Commerce V					Th-U/			
5			ndirect Taxation Pa	per II			Th-C/			
6		Export Marke	eting Paper II				Th-CA			
Convocation Fee Exam Form Late Fee				Fee	Exam Form	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Payr	ment Details:	Amount Recei			College Receipt I	No. and Date:				
DD N			MICR No:		DD Date:		Bank	c:		
Cent	er Preference (Code/Na	lame):								
	ue Preference (Code/Na									
Το, Γ	Director, Board of Exam	nination and F	Evaluations / The C	controller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres									
	are that all statement mag							Date:		
reque	est for any special conc	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									
Jan.	elled or rejected.							St	tudent's Signature	
Decl	aration by Principal/HO	D/Chairperso	on							
	form is carefully scrutin									
	onsibility of fulfillment/re se/term work (if any) ac			e/sne is regulal stude	NT OT THIS COILED	le and has complete	d the required	J attenua	ance and practical	
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Place	э:						I			
—				-		ļ	I			
Date:	:					ļ	l			
				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	ibility Status:	Examination fo 110205	5	Division/Section:	Roll No	).:	c at	
2	2018016400939404		Eligible				l		C. L. Sawant.	
nstrı	uction Medium:					Nationality:	India			
				Student's Per	rsonal Information	on				
Stude	ent's Name: SAWAI	NT CHETAN	LILADHAR			Mother's Name: Cl	HHAYA		Gender: Male	
Name	ame in Vernacular Language:सावंत  चेतन  लीलाधर									
Addr	ddress: Room No. 405/4, D Wing, Adarsh apartment Near mausam theater, Mumbra Devi colony Diva (East)									
City: Diva, Taluka: Thane, District: Thane, State: Maharashtra, PIN: 400612										
	phone no.:			oile no: 919137998165			il : chetansawa	ant500@	yahoo.com	
	: Mar 16, 2000	<u> </u>	tegory: Open		Physically	Handicap: No				
Previ	ious Latest Examination	n Details: Ser	m III(Regular-Rev1	6)	Exam Event	t: Nov-2019	Seat	t No: 728	83538 (Status: Pass)	
	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	Ilege Assessn	nent)		
SN	Paper Code	<u> </u>		Paper Name					AM - AT	
1			<u>~</u>	ting IX - Financial Acco	<u>~</u>		Th-U			
2	83007		<u>-</u>	ting X - Cost Accountir	ng		Th-U	A[]		
3 83013 Business Economics VI							Th-U			
4 83014 Commerce VI T							Th-U	A[]		
5 83015 Direct and Indirect Taxation Paper II The								A[]		
6	83023	Investment A	<del>,                                    </del>	olio Management Pape	er II		Th-C	A [ ]		
Conv	vocation Fee		Exam Form Late	Fee	Exam Form 9	Super Late Fee	Exar	mination	Fees	
Mark	Statement Fee		Total:							
Pavn	ment Details:	Amount Recei	ived.		College Receipt I	No and Date				
DD N			MICR No:	1-	DD Date:	10. 0 20	Bank			
	er Preference (Code/N		1	<del></del>				-		
	ue Preference (Code/Na									
To, C	Director, Board of Exam	nination and E	Evaluations / The C	ontroller Of Examinat	tion,			Place:	Vidyavihar	
	uest permission to pres are that all statement m							Date:	-	
have	gone through the sylla	abus and the l	list of books prescr	ribed for the examinati	ion for which I a	m appearing. I shall	not			
	est for any special cond									
	r ground. I understand t elled or rejected.	that in the eve	ent of any inionnau	on being fourid raise of	or incorrect, my	candidature is ilabit	e to be			
	•							St	udent's Signature	
	aration by Principal/HO	-								
	form is carefully scrutir onsibility of fulfillment/re									
	se/term work (if any) ac			e/sne is regular state	thi or iris concy	Je anu nas compicio	a the required	) allenae	зпсе апи ргасиса	
Place	<b>ə</b> :						l			
				_						
Date:	:									
				College S	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



	PRN:	Eligi	bility Status:	Examination fo 110206		Division/Section:	Roll No	.:	Neclans	
:	2018016400939412		Eligible						1	
Instruction Medium: Nationality: India							India			
				Student's Per	sonal Informati	on				
Stud	ent's Name: YADAV	NEELAM VI	JAY KUMAR			Mother's Name: SI	JNITA	(	Gender: Female	
Nam	e in Vernacular Langua	ge:यादव नील	म विजयकुमार							
	Address: R.NO.14 HINGWALA CHAWL GALLI NO.1 NO.1M.G ROAD OPP SHANKAR GHATKOPAR EAST									
City: MUMBAI, Taluka: Kurla, District: Mumbai Suburban, State: Maharashtra, PIN: 400077										
Telephone no.: Mobile no: 919004500370 Email : preeti19797@gmail.com									l.com	
	: Aug 12, 1999		tegory: Open		<del></del>	Handicap: No				
	ious Latest Examination		m III(Regular-Rev1	6)	Exam Even	t: Nov-2019	Seat	: No: 728	83774 (Status: Pass)	
	n form appearance type									
		se select Pa	per details which y	ou want to appear ( U.		ssessment,CA - Co	llege Assessn	nent)		
SN	Paper Code			Paper Name					AM - AT	
1				ing IX - Financial Acco			Th-U			
2				ing X - Cost Accountir	ng		Th-U			
								h-UA [ ]		
4 83014 Commerce VI Th-UA []										
5 83015 Direct and Indirect Taxation Paper II Th-CA []										
6 83020 Computer systems and Applications Paper II Th-UA [];Th-CA []										
	rocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee		Exar	nination	Fees	
Mark	Statement Fee		Total:							
Payn	nent Details:	mount Rece	ived:	C	ollege 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	ination and E	valuations / The C	ontroller Of Examinat	ion,			Place:	Vidyavihar	
	uest permission to pres							Data	•	
	are 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 univer	sity Examinatio	n etc. on religious o	r any			
	ground. I understand telled or rejected.	hat in the eve	ent of any informat	on being found false o	or incorrect, my	candidature is liable	e to be			
ouno	onou or rojociou.							St	udent's Signature	
Decla	aration by Principal/HO	D/Chairperso	on							
	form is carefully scruting									
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.							ance and practical			
Place	<b>ə</b> :									
				_						
Date	:									
				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.

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

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Examination form No.:



	PRN:	Eligi	bility Status:	110207		Division/Section:		ll No.:	×33-	
	2018016400939435		Eligible		II				Mailei	
nstr	uction Medium:	•				Nationality:	India		•	
				Student's Perso	onal Informat	on				
Stud	lent's Name: NAGE	A MAITRI NIL	.ESH			Mother's Name	: DIVYA		Gender: Female	
Nam	ne in Vernacular Langu	ıage:मैत्री								
٩ddı	ress: 103, K wing Var	dhman Nagar,	mulund(west)							
City:	Mumbai, Taluka: Kurl	a, District: Mu	mbai Suburban, St	ate: Maharashtra, PIN:	400080					
Tele	phone no.:		Mob	ile no: 917498358733		E	mail : maitri.	nagda70@g	mail.com	
DOE	3: Apr 15, 2000	Cat	tegory: Open		Physically	Handicap: No				
	rious Latest Examinati		m III(Regular-Rev1	6)	Exam Ever	t: Nov-2019		Seat No: 72	283425 (Status: ATKT)	
	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 Ass	essment)		
SN	Paper Code			Paper Name					AM - AT	
1	83001	Financial Acc	counting and Audit	ing IX - Financial Accou	ınting			Th-UA [ ]		
2	83007	Financial Acc	counting and Audit	ing X - Cost Accounting			1	Th-UA [ ]		
3	83013	Business Ec	Business Economics VI Th-UA []							
4	83014	Commerce VI Th-UA []								
5	83015	Direct and Indirect Taxation Paper II  Th-CA []								
6 83029 Elements of Operational Research Paper II Th-CA []										
Con	vocation Fee		Exam Form Late	Fee	ee Exam Form Super Late Fee			Examination	n Fees	
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