



UNIVERSITY OF MUMBAI  
MGM's COLLEGE OF ENGINEERING AND TECHNOLOGY  
KAMOTHE, NAVI MUMBAI - 410 209.

EXAMINATION APPLICATION FORM MAY/NOVEMBER - 20\_\_

Application for Admission to First Half / Second Half Examination of the Academic year 20\_\_ / 20\_\_

BRANCH -

SEMESTER - III / IV / V / VI

REGULAR -

ATKT -

COURSE - ['C' SCHEME /CBCGS]

SHIFT: I / II

To be entered by the Candidate in CAPITAL LETTERS only

1. NAME: SURNAME

FIRST NAME

FATHER'S FIRST NAME

MOTHER'S FIRST NAME

PASTE PASSPORT SIZE  
NEW-FRESH  
PHOTOGRAPH

2. Name in Devanagari Script - (in Marathi)

SURNAME

FIRST NAME

FATHER'S NAME

MOTHER'S NAME

3. Complete Postal Address:

PIN

Tele. No. with STD code

Mobile No.

Email ID.

Write Appropriate Number

4. Sex - 1. Male

2. Female

5. Student Type

1. Non-Provisional

2. Provisional

6. Category

0. Open

1. SC

2. ST

3. DT

4. OBC

7. Medical Status

1. Phy. H. C.

2. Blind 3. Other

8. SUBJECT OFFERED (Sequence According to Syllabus) Enter Marks only if claiming exemption

Sr. No.	Name of Subject	Average of Two Tests	Theory	Term Work	Oral	Practical
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						



**9. DETAILS OF PREVIOUS EXAMINATION (Attach Photocopies of all Examinations Appeared)**

Sr. No.	Examination	Month & Year	Seat No.	Total Marks /GPA	Result	No. of Heads in which failed				Remarks	Encl. Total No.
						ESE	IA	TW	OR /PR		
01	DIPLOMA										
02	SEMESTER - I										
03	SEMESTER - II										
04	SEMESTER - III										
05	SEMESTER - IV										
06	SEMESTER - V										
07	SEMESTER - VI										

**10. Year in which kept terms for**

Course	Month	Year
FE Sem – I		
FE Sem – II		
SE Sem – III		
SE Sem – IV		
TE Sem – V		
TE Sem - VI		

**11. Details of Exam. Fee Payment**

- Examination Fee Rs. \_\_\_\_\_
- Statement of Marks Fee Rs. \_\_\_\_\_
- Form Fee Rs. \_\_\_\_\_
- Late Fee Rs. \_\_\_\_\_
- Total Rs. \_\_\_\_\_
- Receipt No. \_\_\_\_\_
- Date \_\_\_\_\_

**12.**

To,  
The Director,  
MGM CET.  
Sir,

**UNDERTAKING BY THE STUDENT**

I request your permission to present myself for the ensuing examination. I have paid the prescribed fees for the same and the information furnished above by me is correct.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

Signature of the Student

**VERIFICATION BY THE PROF. IN CHARGE**

I certify that I have verified all the documents required for determination of his/her eligibility. He / She is eligible to appear in the ensuing examination. I also certify that information's furnished by the candidate are true and correct.

Place: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name of the Prof. in charge: \_\_\_\_\_

**FOR OFFICE USE**

EXAM SESSION \_\_\_\_\_

SEAT NO. \_\_\_\_\_

Checked and found correct

Allowed to appear in the Examination

Office Assistant \_\_\_\_\_ Exam. Cell incharge \_\_\_\_\_ Principal/Director \_\_\_\_\_