

**THAKUR COLLEGE OF ENGINEERING & TECHNOLOGY**

Autonomous College Affiliated to University of Mumbai

Approved by All India Council for Technical Education(AICTE) and Government of Maharashtra(GoM)

Conferred Autonomous Status by University Grants Commission (UGC) for 10 years w.e.f. A.Y 2019-20

Amongst Top 200 Colleges in the Country, Ranked 193<sup>rd</sup> in NIRF India Ranking 2019 in Engineering College category

• ISO 9001:2015 Certified • Programmes Accredited by National Board of Accreditation (NBA), New Delhi

• Institute Accredited by National Assessment and Accreditation Council (NOAAC), Bangalore

TCET/FRM/IP-03/07

Revision: B

**EXAMINATION FORM (1<sup>st</sup> half / 2<sup>nd</sup> half \_\_\_\_\_) (REGULAR EXAMINATION)**(Branch Name: \_\_\_\_\_)  
(YEAR: \_\_\_\_\_) (SEMESTER- \_\_\_\_\_) (COURSE \_\_\_\_\_)1. NAME IN FULL  
(BLOCK LETTERS) (SURNAME) (FIRST/OWN NAME) (FATHER'S/HUSBAND'S NAME) (MOTHER'S NAME)2. संपूर्ण नाव  
(देवनागरी) (आडनाव) (स्वतः चे नाव) (वडिलांचे / नवऱ्याचे नाव) (आईचे नाव)3. Complete Postal Address:  
\_\_\_\_\_  
\_\_\_\_\_

Contact Details: Mobile No.: \_\_\_\_\_ and E mail ID: \_\_\_\_\_

Photograph

Paste inside  
the box only

## 4. Sex

1.	(M) MALE
2.	(F) FEMALE

## 5. Category

OPEN	SC	ST	DT	NT	OBC	SBC
0	1	2	3	4	5	6

## 6. Student Type

1.	STUDENT
2.	EX-STUDENT
3.	Phy. H.C. / Blind

## 7.

Paper/ Subject No.	Name of the Subject (As per Syllabus)	(Put (√) if Claiming Exemption and Put (X) if failed)			
		In-Semester Assessment/ Average of 2 Test	Theory	Term Work	Practical & Oral
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

## 8.

Name of the Student	Branch	Roll No.	Paid Amount	Payment Date	UTR No./Ref. No./IMPS No./Transaction ID NO./DD No./Cash	Contact No.

## 9.

FOR REPEATER ONLY	
Last Seat No.	Month & Year

Attach mark sheet / Grade Card

## 10.

Details of Lower Examination (if any)	
Semester	Month and Year of Passing
I	
II	
III	
IV	
V	
VI	
VII	

Attach Mark sheet / Grade Card

## 11.

To,  
The Principal,  
Sir,

I request permission to present myself for the ensuing examination. I have paid the full prescribed admission fee as well as examination fees as per the details furnish above under point no. 8.

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

Signature of the candidate

Seal

Principal's Signature

## 12.

## For Office use only

Name of the Applicant: \_\_\_\_\_  
Branch/ Class: \_\_\_\_\_ Roll No. \_\_\_\_\_  
Examination fees paid amount: \_\_\_\_\_  
Remark (if any) \_\_\_\_\_  
Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Note: Separate examination form shall be submitted for each semester