

Mulund College of Commerce

Parle Tilak Vidyalaya Association's
Sarojini Naidu Road, Mulund West Mumbai 400 080

Date :

EXAMINATION FORM

Student ID: [182455]

- N.B. 1. Examination form submitted after the prescribed date is liable to be rejected.
2. Xerox copies of the previous Examinations are to be attached with the form.

EXAMINATION PARTICULAR F.Y. B.A.F. 2019-20 Seat No.

S2/MAR20/KT/1810142

1. Name of the student : / **Katha Shilpa Parshuram Renuka**

PRN:

2. Mobile No.:

Pattern : 25-75

3. Name of Examination : **F. Y. B.A.F. (Sem II) ATKT Exam**

4. Examination fees (for both External & Internal) To be paid at the time of form submission

Exam Fee Payable Rs. 1,052/-

5. Name & Year/month of passing of last Exam:

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2018-19 R 0 7KT	2018-19 R 0 7KT	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Financial Accounting (Special Accounting Areas) - I	F F	F F
2	Auditing (Introduction And Planning) - I	F F	F F
3	Innovative Financial Services	F F	F F
4	Business Communication - II	F F	F F
5	Foundation Course - II	F F	F F
6	Business Law (Business Regulatory Framework) - I	F F	F F
7	Business Mathematics	F F	F F

To,
Principal,
Mulund College of Commerce
Sarojini Naidu Road, Mulund West Mumbai 400 080

Respected Sir,

I, the undersigned, student of F. Y. B.A.F. (Sem II) ATKT Exam, requests you to grant me permission to appear at the ensuing examination of F.Y. B.A.F. 2019-20.

I also hereby agree that in the event of myself being found guilty under the rules & regulations, my performance to which I have been permitted to appear is liable to be treated null & void.

Place : Mumbai

Yours Faithfully

Date :

Signature of the student

TO BE FILLED BY OFFICE

Unique ID	Exam :	Exam Seat No.:	Receiver's Signature
182455	F. Y. B.A.F. (Sem II) ATKT Exam	S2/MAR20/KT/1810142	Date

Mulund College of Commerce

Parle Tilak Vidyalaya Association's
Sarojini Naidu Road, Mulund West Mumbai 400 080

Date :

EXAMINATION FORM

Student ID: [181648]

- N.B. 1. Examination form submitted after the prescribed date is liable to be rejected.
2. Xerox copies of the previous Examinations are to be attached with the form.



EXAMINATION PARTICULAR F.Y. B.A.F. 2019-20 Seat No. **S2/MAR20/KT/1810104**

1. Name of the student : / **Shingade Sejal Prakash Anjali**
2. Mobile No.: 8169335298 PRN: 2018016400082982 Pattern : 25-75
3. Name of Examination : **F. Y. B.A.F. (Sem II) ATKT Exam**
4. Examination fees (for both External & Internal) To be paid at the time of form submission
Exam Fee Payable Rs. 501/-
5. Name & Year/month of passing of last Exam:

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2018-19 R 135 6.75	2018-19 R 100 2KT	2019-20 R 172 8.60	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Financial Accounting (Special Accounting Areas) - I	O	A+
2	Auditing (Introduction And Planning) - I	O	D
3	Innovative Financial Services	A	B+
4	Business Communication - II	A	D
5	Foundation Course - II	O	B
6	Business Law (Business Regulatory Framework) - I	A+	F F
7	Business Mathematics	O	F F

To,
Principal,
Mulund College of Commerce
Sarojini Naidu Road, Mulund West Mumbai 400 080

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Place : Mumbai
Date :

Yours Faithfully

Signature of the student

TO BE FILLED BY OFFICE

Unique ID	Exam :	Exam Seat No.:	Receiver's Signature
181648	F. Y. B.A.F. (Sem II) ATKT Exam	S2/MAR20/KT/1810104	Date