

Mulund College of Commerce

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

Date :

EXAMINATION FORM

Student ID: [182331]

- 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.M.S. 2019-20 Seat No.

S2/MAR20/KT/187148

1. Name of the student : **Bhagat Gaurav Rajkumar Ranjana**

PRN:

2. Mobile No.:

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (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
2019-20 R 81 2KT	2019-20 R 74 2KT	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	PRINCIPLES OF MARKETING	D	B
2	INDUSTRIAL LAW	F F	F F
3	BUSINESS MATHEMATICS	B	D
4	BUSINESS COMMUNICATION-II	F F	D
5	FOUNDATION COURSE II	O	C
6	BUSINESS ENVIRONMENT	B	D
7	PRINCIPLES OF MANAGEMENT	A	D

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

Respected Sir,

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

I also hereby aggress 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

182331

F. Y. B.M.S. (Sem II) ATKT Exam

S2/MAR20/KT/187148

Date

Mulund College of Commerce

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

Date :

EXAMINATION FORM

Student ID: [180784]

- 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.M.S. 2019-20 Seat No.

S2/MAR20/KT/187132

1. Name of the student : **Tiwari Aman Krishnachand Soni**

PRN:

2. Mobile No.:

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (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	PRINCIPLES OF MARKETING	F F	F F
2	INDUSTRIAL LAW	F F	F F
3	BUSINESS MATHEMATICS	F F	F F
4	BUSINESS COMMUNICATION-II	F F	F F
5	FOUNDATION COURSE II	F F	F F
6	BUSINESS ENVIRONMENT	F F	F F
7	PRINCIPLES OF MANAGEMENT	F F	F F

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

Respected Sir,

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

I also hereby aggress 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
Date :

Yours Faithfully

Signature of the student

TO BE FILLED BY OFFICE

Unique ID

Exam :

Exam Seat No.:

Receiver's Signature

180784

F. Y. B.M.S. (Sem II) ATKT Exam

S2/MAR20/KT/187132

Date