

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [190510]

- 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. **S1/MAR20/KT/197011**

1. Name of the student : / **Bangar Tanuja Sudam Manisha**  
PRN: 2019016400273263 Pattern : 25-75  
2. Mobile No.:  
3. Name of Examination : **F. Y. B.M.S. (Sem I) ATKT Exam**  
4. Examination fees (for both External & Internal) To be paid at the time of form submission  
**Exam Fee Payable Rs. 281/-**  
5. Name & Year/month of passing of last Exam:

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2019-20   R   129   1KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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
190510	F. Y. B.M.S. (Sem I) ATKT Exam	A S1/MAR20/KT/197011	Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191624]

- 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. **S1/MAR20/KT/197158**

1. Name of the student : **Bhosale Prahalad Sunil Radhika**  
2. Mobile No.: PRN: 2019016400273391 Pattern : 25-75  
3. Name of Examination : **F. Y. B.M.S. (Sem I) ATKT Exam**  
4. Examination fees (for both External & Internal) To be paid at the time of form submission  
**Exam Fee Payable Rs. 281/-**  
5. Name & Year/month of passing of last Exam:

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2019-20   R   132   1KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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
191624	F. Y. B.M.S. (Sem I) ATKT Exam	B S1/MAR20/KT/197158	Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191133]

- 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.

**S1/MAR20/KT/197001**

1. Name of the student : / **Deeksha Amar Bahadur Verma Savari Verma**

2. Mobile No.:

PRN:

2019016400272654

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) ATKT Exam**

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

**Exam Fee Payable Rs. 281/-**

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

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2019-20   R   111   1KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

191133

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

A S1/MAR20/KT/197001

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [190599]

- 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.

**S1/MAR20/KT/197022**

1. Name of the student : **Deodhar Mihir Pradeep Sukhada**

PRN:

2. Mobile No.:

2019016400271071

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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
2019-20   R   0   7KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

190599

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

A S1/MAR20/KT/197022

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [192565]

- 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.  
**S1/MAR20/KT/197176**

1. Name of the student : / **Gite Khushi Bhagwan Savita**  
2. Mobile No.: PRN:  
2019016401669544 Pattern : 25-75  
3. Name of Examination : **F. Y. B.M.S. (Sem I) 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
2019-20   R   51   4KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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
192565	F. Y. B.M.S. (Sem I) ATKT Exam	B S1/MAR20/KT/197176	Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [190986]

- 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.

**S1/MAR20/KT/197037**

1. Name of the student : **Gole Sahil Shamrao Jayashri**

2. Mobile No.:

PRN:

2019016401669463

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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   100   2KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

190986

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

A S1/MAR20/KT/197037

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191065]

- 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.

**S1/MAR20/KT/197039**

1. Name of the student : **Gore Rohan Ramesh Vasanti**

2. Mobile No.:

PRN:

2019016400272581

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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
2019-20   R   61   4KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

191065

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

A S1/MAR20/KT/197039

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191254]

- 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.

**S1/MAR20/KT/197048**

1. Name of the student : / **Kadam Srushti Surendra Rajeshree**

2. Mobile No.:

PRN:

2019016400271627

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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   111   2KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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
191254	F. Y. B.M.S. (Sem I) ATKT Exam	A S1/MAR20/KT/197048	Date



# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191027]

- 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.

**S1/MAR20/KT/197064**

1. Name of the student : / Mahajan Sejal Tushar Mamta

PRN:

2. Mobile No.:

2019016400274243

Pattern : 25-75

3. Name of Examination : F. Y. B.M.S. (Sem I) ATKT Exam

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

**Exam Fee Payable Rs. 281/-**

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

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2019-20   R   124   1KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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
191027	F. Y. B.M.S. (Sem I) ATKT Exam	A S1/MAR20/KT/197064	Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [192610]

- 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.

**S1/MAR20/KT/197178**

1. Name of the student : **Mota Divy Jitendra Geeta**

2. Mobile No.:

PRN:

2019016401836294

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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
2019-20   R   78   3KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

192610

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

B S1/MAR20/KT/197178

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191280]

- 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.

**S1/MAR20/KT/197129**

1. Name of the student : / **Sarokte Manisha Balasaheb Parvati**

PRN:

2019016400272871

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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   79   2KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

191280

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

B S1/MAR20/KT/197129

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [192446]

- 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.  
**S1/MAR20/KT/197170**

1. Name of the student : **Subhedar Shlok Umesh Pournima**  
PRN:  
2019016400274587 Pattern : 25-75
2. Mobile No.:
3. Name of Examination : **F. Y. B.M.S. (Sem I) ATKT Exam**
4. Examination fees (for both External & Internal) To be paid at the time of form submission  
**Exam Fee Payable Rs. 281/-**
5. Name & Year/month of passing of last Exam:

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2019-20   R   125   1KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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
192446	F. Y. B.M.S. (Sem I) ATKT Exam	B S1/MAR20/KT/197170	Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [192294]

- 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.

**S1/MAR20/KT/197162**

1. Name of the student : **Thakkar Yash Manish Megha**

2. Mobile No.:

PRN:

2019016400274405

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) ATKT Exam**

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

**Exam Fee Payable Rs. 281/-**

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

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2019-20   R   135   1KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	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.M.S. (Sem I) 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

192294

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

B S1/MAR20/KT/197162

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191401]

- 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.

**S1/MAR20/KT/197146**

1. Name of the student : **Thakur Suraj Kishor Munni**

2. Mobile No.:

PRN:

2019016400273874

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) 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   99   2KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	F	F

To,  
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Place : Mumbai

Yours Faithfully

Date :

Signature of the student

### TO BE FILLED BY OFFICE

Unique ID

Exam :

Exam Seat No.:

Receiver's Signature

191401

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

B S1/MAR20/KT/197146

Date

# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [191166]

- 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. **S1/MAR20/KT/197150**

1. Name of the student : / **Wadekar Komal Sanjiv Sunanda**  
PRN: 2019016400272801 Pattern : 25-75  
2. Mobile No.:  
3. Name of Examination : **F. Y. B.M.S. (Sem I) 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   92   2KT	N.A.	N.A.	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	F	F
2	Business Law	F	F
3	Business Statistics	F	F
4	Business Communication-I	F	F
5	Foundation Course-I	F	F
6	Foundation of Human Skills	F	F
7	Business Economics-I	F	F

To,  
Principal,  
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Sarojini Naidu Road, Mulund West Mumbai 400 080

Respected Sir,

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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
191166	F. Y. B.M.S. (Sem I) ATKT Exam	B S1/MAR20/KT/197150	Date

# 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.

**S1/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 I) 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	Introduction to Financial Accounts	O	D
2	Business Law	D	F F
3	Business Statistics	A	C
4	Business Communication-I	B	B+
5	Foundation Course-I	C	B
6	Foundation of Human Skills	C	D
7	Business Economics-I	B	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.M.S. (Sem I) 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 I) ATKT Exam

S1/MAR20/KT/187148

Date



# Mulund College of Commerce

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

Date :

## EXAMINATION FORM

Student ID: [182420]

- 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.

**S1/MAR20/KT/187158**

1. Name of the student : **Chouhan Roshan Abhay Naina**

2. Mobile No.:

PRN:

2018016400087693

Pattern : 25-75

3. Name of Examination : **F. Y. B.M.S. (Sem I) ATKT Exam**

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

**Exam Fee Payable Rs. 281/-**

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

Sem I Status	Sem II Status	Sem III Status	Sem IV Status
2018-19   K   120   1KT	2019-20   R   138   6.90	2019-20   R   140   7.00	N.A.

Subject Details

Srl.	Subject Name	Int	Ext
1	Introduction to Financial Accounts	A	A
2	Business Law	B	F F
3	Business Statistics	A+	B
4	Business Communication-I	O	B
5	Foundation Course-I	O	D
6	Foundation of Human Skills	A	D
7	Business Economics-I	A	B

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 I) 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

182420

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

S1/MAR20/KT/187158

Date

# Mulund College of Commerce

Parle Tilak Vidyalaya Association's  
Sarojini 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.

**S1/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 I) 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	Introduction to Financial Accounts	O	F F
2	Business Law	F F	F F
3	Business Statistics	O	F F
4	Business Communication-I	O	F F
5	Foundation Course-I	O	F F
6	Foundation of Human Skills	F F	F F
7	Business Economics-I	O	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.M.S. (Sem I) ATKT Exam, requests you to grant me permission to appear at the ensuing examination of F.Y. B.M.S. 2019-20.

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Place : Mumbai

Yours Faithfully

Date :

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 I) ATKT Exam

S1/MAR20/KT/187132

Date