

**Yeshwantrao Chavan College of Engineering**

(An Autonomous Institution Affiliated to Rashtrasant Tukadoji Maharaj Nagpur University)

Hingna Road, Wanadongri, Nagpur - 441110

**Online Examination Form (For End Semester Examination)**

Exam Roll No.

Student Type: **Special Mentoring Scheme (SMS) for students having "I" Grade**.....  
(To be filled by office.)

Scheme:

Name of Degree Programme: **B. E. / B Tech****Semester:**Name of Exam: **Odd (Makeup) / EVEN (Makeup)**

Branch :

Gender: Male / **Female**

College Registration No.:

**Name of the Student as per record:**

Mother's Name:

Section:

Father Name:

Student Permanent Address:

Student Local Address:

Student Mobile No.:

**I want to appear in following Course(s) in said examination (Tick/Cross)**

Total credits earned:

Sr No.	Course Code	Course Name	Course completion	Theory/ Practical	Credits	Sign of Mentor
			<input checked="" type="checkbox"/> Status			
1			<input type="checkbox"/>			
2			<input type="checkbox"/>			
3			<input type="checkbox"/>			
			<input type="checkbox"/>			

I hereby declare that the above information is correct, and I accept the same.

Date: - \_\_/\_\_/\_\_\_\_

**Signature of Student****Certificate from the HOD/FYC/Dean PTDP**

This is to certify that the above information given by the student wherever applicable is verified and found correct. The student has completed the given work in above course/s under Special Mentoring Scheme.

The student is eligible to appear for said examination as per the details above.

Date: - \_\_/\_\_/\_\_\_\_

**Sign. - Coordinator for Make-Up/SMS****Sign. of HOD/FYC**

Examination Fee: \_\_\_\_\_ Fee Paid vide Receipt No.: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_ (Attach Receipt)

(For pre-exam section)

(Note: In case of any discrepancy in the above information detained students shall contact DAM office / CoE office along with this form.)