



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 2 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025865      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 2 7 6 1 4 1 8 5 3**Full Name:** BIRADAR AKASH BALASAHEB**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 97 SHAU PARK, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416013**Email ID:** akashbiradar1853@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



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Examination, March-2024



To,

Form No. : **4 3 2 4 7 5 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024776      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 2 2 1 7 5 1 3 3**Full Name:** ADSULE PRADIP BALAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAMANAND NAGAR JUNA PACHGAON, ROAD KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** ADSULEPRADIPBALAJI@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

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To,

Form No. : **4 3 2 1 8 6 6**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012005      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 4 6 7 4 6 8 1 6**Full Name:** AVAGHADE AMOL MOHAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1494 E WARD 4 TH LANE RAJARAMPURI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** amolawaghade92@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012431      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 6 7 3 7 6 5 0 7 5**Full Name:** BAGWAN YUSUF ALLAUDDIN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

623 B JAWAHAR NAGAR SARNAIK VASAHT 5TH LANE KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** YBAGWAN13542@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM III), SEM IV)****Subject Details :**

1/1 75207 Science Technology & Development CGE-19 Cr. 4	1/1 75236 Psychology -I DSC-B6 Cr. 4
2/3 90800 English Compulsory- AECC 3 Cr. 4	2/3 90807 Social Ecology-1 Cr. 4
2/3 90851 Economics -III DSC-D5 Cr. 4	2/3 90857 Psychology- III DSC-D11 Cr. 4
2/4 93451 English Compulsory (AECC-4) Cr. 4	2/4 93458 Social Ecology-II Cr. 4
2/4 93502 Economics-V DSC-D33 Cr. 4	2/4 93503 Economics-VI DSC-D34 Cr. 4
2/4 93508 Psychology-V DSC-D39 Cr. 4	2/4 93509 Psychology-VI DSC-D40 Cr. 4
2/4 93528 Environmental Studies Cr. 0	2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022058943      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 1 8 0 9 2 1 0 8 2**Full Name:** BANKAR DIPAK SHIVAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** DHANGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:****City** KOLHAPUR**PIN Code:****Email ID:** dbankar595@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011562      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 8 5 5 0 4 6 9 3 4**Full Name:** **BENAKE SHUBHAM VILAS****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DARYACHE VADGAON, BENAKE GALLI, DINDERLI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416207**Email ID:** s.benake2003@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025473      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 5 5 8 3 3 1 9 4 8**Full Name:** BHAT SWAPNIL SUNIL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** KANJARBHAT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P HALASAVDE, KOLHAPUR

**City** A/P HALASAVDE**PIN Code:** 416002**Email ID:** swapnilbhat800@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90850 Sociology- IV DSC-D4 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023131      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 9 6 0 7 2 1 1 5 5**Full Name:** BHATE KARAN BABASO**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

13415 RAJENDRA NAGAR , DATTA MANDIR , KOLHAPUR

**City** kolhapur**PIN Code:** 416002**Email ID:** BHATEKARANBABASO@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011575      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 2 2 3 3 4 7 4 2**Full Name:** BHAVAD ROHIT DHANAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAHALAXMI GALLI , KALAMBA, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** BHAVADROHITDHANAJI@GMAIL.COM**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

( Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

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**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012361      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 2 4 0 2 4 5 2 8**Full Name:** BONDRE OMKAR BALKRUSHN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

275-5 EKATA COLONY SHIROLI PULACHI, SHIROLI, HATKANANGLE, KOLHAPUR

**City** SHIROLI PULACHI**PIN Code:** 416122**Email ID:** bondreomkar07@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012379      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 6 6 5 1 9 9 7 7**Full Name:** CHAVAN PRUTHVIRAJ MADHUKAR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHANTI NIWAS, MAIN ROAD MANGESHWAR GALLI, UCHGAON, KOLHAPUR

**City** UCHGAON**PIN Code:** 416005**Email ID:** CHAVANPRUTHVIRAJMADHUKAR@GMAIL.COI**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 89349 Constitution of India and Local self Government Cr. 2 | 2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90851 Economics -III DSC-D5 Cr. 4

2/3 90852 Economics -IV DSC-D6 Cr. 4

2/3 90853 Political Science -III DSC-D7 Cr. 4

2/3 90854 Political Science -IV DSC-D8 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015572      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 2 2 4 5 8 5 0 2**Full Name:** CHOUGULE SHRINATH KASHINATH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** GAVALI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1332/2 MANGALWAR PETH B WARD , KOLHAPUR

**City** Kolhapur**PIN Code:** 416012**Email ID:** CHOUGULESHRINATHKASHINATH@GMAIL.CO**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

( Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

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Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016510      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 5 8 4 2 4 3 0 5**Full Name:** DABHADE SWAPNIL DATTATRAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 15, SHIVNERI NAGAR, PACHGAON, KOLHAPUR

**City** PACHGAON**PIN Code:** 416013**Email ID:** swapnildabhade30@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 2 9 3 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012352      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 5 7 0 3 1 2 8 9**Full Name:** DALAVI SANGRAM DILIP**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO:43 SIDDIVINAYAK COLNI ,GADMUDSHINGI,KOLHAPUR

**City** GADMUDSHINDI**PIN Code:** 416119**Email ID:** dalavisourabh@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 2 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011283      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 5 1 7 6 7 8 0 0 6**Full Name:** DAMAKALE YASH SATISH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** SANAGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1399/A. D.S.COMPLEX KOLKAR TIKTI, MANGALWAR PETH, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** DAMAKALEYASHSATISH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 7 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023205      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 9 5 6 9 5 2 3 3 4**Full Name:** DANGARI SHAHID IBRAHIM**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

17 B 2ND LINE , MAIN ROAD VIKRAM NAGAR GUR MARKET YARD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416005**Email ID:** DANGARISHAHIDIBRAHIM@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

( Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90825 Hindi- III DSC-C3 Cr. 4

2/3 90826 Hindi- IV DSC-C4 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 7 0 0 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022043239      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 3 0 8 6 0 2 3 7 3**Full Name:** DANGE RIYAZ MIRASAB**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:****City** KOLHAPUR**PIN Code:****Email ID:** riyazdange313@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 1 6 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022010990      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 2 0 0 5 4 0 9 9**Full Name:** DAVARI PRATHAM BABASAHEB**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** GOSAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1327 E WARD, YADAV NAGAR, RAJARAMPURI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** DAVARIPRATHAMBABASAHEB@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

( Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 3 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025994      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 4 5 9 5 4 2 2 5 1**Full Name:** DESHINGE RAVINDRA BAPU**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** JAIN**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1293 C WARD , SUBHASH ROAD, LAXMIPURI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** DESHINGERAVINDRABAPU@GMAIL.COM**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 7 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023067      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 8 0 0 0 2 1 3 7**Full Name:** DHANVADE ADITYA SURESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

NAVIN COLONY, PANZAR POL ROAD, YADHAV NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** adityadhanavade818@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 8 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024806      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 3 8 5 3 7 8 8 6 3**Full Name:** FULWALE AYYAN ABDULHAFIZ**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

132/MOLE COLONY, MANER MALA, UCHGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416005**Email ID:** ayyanfulwale2@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 7 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025758      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 3 8 8 5 1 6 3 1**Full Name:** GAIKWAD CHAITANYA DEVIDAS**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

R.S. NO . 162/1 SHANTI NAGAR, GADGIL COLONY, PACHGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416013**Email ID:** GAIKWADCHAITANYADEVIDAS@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 0 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015435      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 5 1 7 3 9 6 1 6 8**Full Name:** GAIKWAD PRATHAMESH ANIL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P KANERI, KOLHAPUR

**City** A/P KANERI**PIN Code:** 416234**Email ID:** p9585776@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 1 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026377      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 2 4 9 2 5 0 9 9 8**Full Name:** GARESHIYA RUTVIK KANJIRAM**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MOLI COLONY, MANAR MALA UCHGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416005**Email ID:** GARESHIYARUTVIKKANJIRAM@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 7 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025753      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 5 5 2 5 4 7 2 9**Full Name:** GAVALI MANDAR VINAYAK**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

ROHIDAS CHOWK , GOKUL DEARI, GADMUDSHINGI, KOLHAPUR

**City A/P** GADMUDSHINGI**PIN Code:** 416119**Email ID:** mandar7781@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 2 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025467      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 2 5 8 9 3 9 8 6**Full Name:** GHOLAP NAGESH ANKUSH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GHAR NO 5, SALONKHE PARK, BHARATNAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416004**Email ID:** nageshgholap0@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 1 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025430      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 7 0 1 5 9 1 2 2**Full Name:** GIRI SHIVAJI SURESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** GOSAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHAHUPURI GALLI, BELAWALE BK, KAGAL, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416221**Email ID:** shivajigiri9657@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025661      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 1 3 0 3 2 1 7 6 2****Full Name:** **GIRIBUVA ABHAY BALKRISHNA****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** GOSAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P CHUYE, KOLHAPUR

**City** CHUYE**PIN Code:** 416207**Email ID:** abhaygiri1762@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM II), SEM III), SEM IV)****Subject Details :**

1/1 75207 Science Technology & Development CGE-19 Cr. 4	1/1 75236 Psychology -I DSC-B6 Cr. 4
1/2 88359 SCIENCE TECHNOLOGY AND DEVELOPMENT CC	1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4
2/3 90800 English Compulsory- AECC 3 Cr. 4	2/3 90857 Psychology- III DSC-D11 Cr. 4
2/4 93451 English Compulsory (AECC-4) Cr. 4	2/4 93464 Logic-T-II Cr. 4
2/4 93498 History-V DSC-C29 Cr. 4	2/4 93499 History-VI DSC-C30 Cr. 4
2/4 93508 Psychology-V DSC-D39 Cr. 4	2/4 93509 Psychology-VI DSC-D40 Cr. 4
2/4 93528 Environmental Studies Cr. 0	2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025641      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 2 1 8 1 7 6 2 6 2**Full Name:** GIRIBUVA ATHARV BALKRISHNA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** GOSAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P CHUYE, KOLHAPUR

**City** A/P CHUYE**PIN Code:** 416207**Email ID:** atharvgiri1762@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 1 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016450      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 0 7 3 7 3 0 5 4**Full Name:** GURAV RAMCHANDRA NETAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** GURAV**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YASHODHA NAGAR, A/P KANERIWADI , KOLHAPUR

**City** KANERIWADI**PIN Code:** 416234**Email ID:** ramchandragurav190@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM IV)****Subject Details :**

1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4

1/2 88391 GEOGRAPHY II DSC-B24 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 9 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024884      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 3 0 8 3 9 2 4 0 2**Full Name:** GURJAR PIYUSH VINOD**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2909/5 SUBHASH NAGAR HOUSING SOCIETY, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** gurjarpiyush966@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 1 8 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012383      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 2 1 6 1 4 1 4 1**Full Name:** HAJARE AKSHAY ANIL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** PARIT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO :50 GANESH COLONY MANERMALA ,UCHGAON,KOLHAPUR

**City** UCHGAON**PIN Code:** 416005**Email ID:** hajareakshay15@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 6 3 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012427      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 5 8 9 0 5 9 6 6**Full Name:** HANKARE KARAN SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PAWAR COLONU PACHGAON KOLHAPUR

**City** kolhapur**PIN Code:** 416013**Email ID:** KARANHANKARE2001@GMAIL.COM**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 1 7 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012377      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 0 0 6 3 1 1 6 3**Full Name:** HATGINE VISHAL VASANT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MALI GALLI, KAGAL, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416216**Email ID:** vishal2001@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 7 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011504      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 7 6 6 7 1 7 9 5 9**Full Name:** INGALE SURAJ SARJERAO**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** NHAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TAMGAON , KOLHAPUR

**City** TAMGAON**PIN Code:** 416202**Email ID:** surajingale188@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025821      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 1 1 2 3 2 1 8 5**Full Name:** INJAL ABHISHEK SHIVAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AT-MADILAGE AJARA, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416505**Email ID:** abhishekinjal5184@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4

1/2 88391 GEOGRAPHY II DSC-B24 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90849 Sociology- III DSC-D3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024987      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 7 0 9 0 3 4 3 9 7**Full Name:** JADHAV AADITYA TANAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

CHH SHIVAJI GALLI, KALAMBA ROAD , KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** aadityjadhavaadityaaarmy@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 0 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016487      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 5 6 1 1 4 2 4 9 8****Full Name:** **JADHAV ADITYA PRADIP****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO. 45 SHIVGANGA COLONY, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** adityajadhav8982@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 6 2 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012425      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 5 6 6 7 8 9 8 1**Full Name:** JADHAV ANUP HANMANT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

608 b ghar no 180 salokhe park kolhapur

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** anupjadhav4717@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 6 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012036      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 7 5 1 5 5 4 1 2**Full Name:** JADHAV KARTIK GANESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

170 B WARD SALOKHE PARK KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** KARTIKAJADHAV1999@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 4 5 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022921      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 5 8 7 3 1 7 7 8**Full Name:** JADHAV NIKHIL SHIVAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2468 B WARD MANGALWAR PETH KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** JADHAVNIKHILSHIVAJI@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM III), SEM IV)****Subject Details :**

1/1 75228 History - I DSC-B1 Cr. 4

1/1 75236 Psychology -I DSC-B6 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 3 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025906      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 8 3 4 1 0 8 5 0 9**Full Name:** JADHAV SIDDHESH SHRIKANT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHAVAJI GALLI, KALAMBA

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** JADHAVSIDHESHSHRIKANT@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 8 1 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012434      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 0 7 4 8 9 3 8 8**Full Name:** JAKATE MAHAMADSAIF RAJAK**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

8240 NAVJIVAN COLONY SAINATH PARK KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** JAKATEMAHAMADSAIFRAJAK@GMAIL.COM**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 1 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025423      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 6 6 6 8 6 0 6 0**Full Name:** JALAK AKASH MAHADEV**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 1039 8A SUPRABHAT COLONY APTENAGAR KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** JALAKAKASH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 5 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022019751      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 3 7 1 9 8 7 0 1 5**Full Name:** JAYSWAL RAJESH BHAGWANDIN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

623 B SARNAIK VASAHAAT, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** 7rajeshjayswal@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 7 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012242      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 2 4 9 6 8 1 8 5 3**Full Name:** KADAM JAYRAJ MAHADEV**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

77'B' BALU MAMA LANE SUBHASH NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** jayrajkadam3333@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88357 ENGLISH COMPULSORY AECC-2 Cr. 4 | 2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4 | 2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4 | 2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4 | 2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0 | 2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 2 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025458      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 3 5 0 5 1 2 6 7 1**Full Name:** KADAM YASH RAMESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2936 'B 'WARD JAWAHAR NAGRA, KOLHAPUR

**City** kolhapur**PIN Code:** 416012**Email ID:** KADAMYASHRAMESH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025790      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 2 1 4 6 1 9 9 2**Full Name:** KALE AVDHUT KISHOR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO.191,BD COLONY,RAJHOPADHE NAGAR,KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** kaleavdhut20@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 2 9 3 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012325      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 4 9 3 6 3 2 3 2**Full Name:** KALE KARAN MALLU**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** PHASE-PARADHI **Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHANTINAGAR, MUDASHINGI ROAD, NEAR CHETAN MOTRS, UCHGAON, KOLHAPUR

**City:** MUDSHINGI**PIN Code:** 416005**Email ID:** KALEKARANMALLU@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 5 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015672      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 9 7 0 9 2 1 5 4 2**Full Name:** KALE KARTIK RAJU**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** PHASE-PARADHI **Physical Disability** NOT APPLICABLE**Correspondence Address:**

UCHGAON SHANTI NAGAR KOLHAPUR

**City** UCGAOAN**PIN Code:** 416005**Email ID:** KALEKARTIKRAJU@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 7 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025747      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 5 9 0 7 2 4 7 4**Full Name:** KALKUTKI SHRVAN SURESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** VADAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BHAIRAVNATH LANE, MOREWADI, KOLHAPUR

**City** MOREWADI**PIN Code:** 416013**Email ID:** KALKUTKISHRVANSURESH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 0 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024742      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 2 6 2 0 6 0 6 6 3**Full Name:** KAMBLE GANESH RAJENDRA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO.15, KATYAYANI COMPLEX, KALAMBA ROAD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** gkamble16@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 1 0 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION,SHIVAJI UNIVERSITY,KOLHAPUR

Sir,I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022974 **College:** Gopal Krishna Ghokhale College,Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 5 2 9 6 9 0 4 8 8**Full Name:** KAMBLE PRANAV ABA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VAGHUDE VASAHAH GADMUDSHINGI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416119**Email ID:** KAMBLEPRANAVABA@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM II), SEM III), SEM IV)****Subject Details :**

1/1 75205 English Compulsary - AECC1 Cr. 4	1/1 75207 Science Technology & Development CGE-19 Cr. 4
1/1 75229 Sociology-I DSC-B2 Cr. 4	1/1 75240 Geography-I DSC-B10 Cr. 4
1/2 88359 SCIENCE TECHNOLOGY AND DEVELOPMENT CC	2/3 90800 English Compulsory- AECC 3 Cr. 4
2/3 90807 Social Ecology-1 Cr. 4	2/3 90849 Sociology- III DSC-D3 Cr. 4
2/3 90850 Sociology- IV DSC-D4 Cr. 4	2/3 90853 Political Science -III DSC-D7 Cr. 4
2/3 90854 Political Science -IV DSC-D8 Cr. 4	2/3 90877 Skill Enhancement Course 3 Cr. 2
2/4 93451 English Compulsory (AECC-4) Cr. 4	2/4 93458 Social Ecology-II Cr. 4
2/4 93500 Sociolgy-V DSC-D31 Cr. 4	2/4 93501 Sociology-VI DSC-D32 Cr. 4
2/4 93504 Political Science-V DSC-D35 Cr. 4	2/4 93505 Political Science-VI DSC-D36 Cr. 4
2/4 93528 Environmental Studies Cr. 0	2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 6 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026296      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 9 2 1 6 5 1 7 7 1**Full Name:** KAMBLE ROHAN RAVINDRA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

322, HARIJANWADA, KADGAON, BHUDARGAD, KOLHAPUR

**City** KADGAON**PIN Code:** 416210**Email ID:** KAMBLEROHANRAVINDRA@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 1 9 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012392      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 3 5 9 3 9 8 7 0 0****Full Name:** **KAMBLE RONIT BAJRANG****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHIVAJI GALLI, KANERI, KOLHAPUR

**City** KANERI**PIN Code:** 416234**Email ID:** KAMBLERONITBAJRANG@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 7 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012226      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 5 9 1 0 8 4 9 2**Full Name:** KAMBLE SIMON DILIP**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

FLAT NO .3, SIDDHANTH COMPLEX NEAR SAI MANDIR SALOKHE NAGAR KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** kamblesimon56@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90849 Sociology- III DSC-D3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 6 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011977      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 8 7 5 8 0 6 5 2 8**Full Name:** KAMBLE VINIT SAMBHAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2832 B WARD YADAV COLONY, JAWOHAR NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** vinitkamble@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM III), SEM IV)****Subject Details :**

1/1 75207 Science Technology &amp; Development CGE-19 Cr. 4 | 2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2 | 2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4 | 2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4 | 2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4 | 2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 6 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022954      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 0 1 0 2 3 6 4 6 9**Full Name:** KAMBLE VISHWAJEET HARI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P KURDU, HALADI , KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416001**Email ID:** KAMBLEVISHWAJEETHARI@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 1 3 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023178      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 5 9 9 3 3 8 7 1**Full Name:** KARADKAR PREM RAHUL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BINDU CHOWK, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** premkaradkar0@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025804      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 3 5 6 5 6 2 2 2 3****Full Name:** **KAREKAR SARTHAK SANJAY****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 3/6 A WARD SAMRAJ COMPLEX, NALE COLONY, KALAMBA, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** KAREKARSARTHAKSANJAY@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 1 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023022      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 5 8 9 8 8 7 3 2**Full Name:** KERIMANI TEJAS BALU**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** DHANGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GADGIL COLONY, SHANTI NAGAR NEAR KALAMBA TALAV, PACHGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416013**Email ID:** tjeaskerimani@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 8 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024853      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 5 9 0 2 2 2 5 1**Full Name:** KHADE AVDHUT SHIVAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Male      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

MANGALWAR PETH JAY PRABHAT STUDIO NEAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** avdhutkhade208@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM I), SEM II), SEM III), SEM IV)****Subject Details :**

1/1 75207 Science Technology & Development CGE-19 Cr. 4	1/1 75236 Psychology -I DSC-B6 Cr. 4
1/2 88368 MARATHI - II DSC-A13 Cr. 4	1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4
2/3 90800 English Compulsory- AECC 3 Cr. 4	2/3 90807 Social Ecology-1 Cr. 4
2/3 90857 Psychology- III DSC-D11 Cr. 4	2/3 90858 Psychology- IV DSC-D12 Cr. 4
2/4 93451 English Compulsory (AECC-4) Cr. 4	2/4 93458 Social Ecology-II Cr. 4
2/4 93476 Hindi-V DSC-C27 Cr. 4	2/4 93477 Hindi-VI DSC-C28 Cr. 4
2/4 93508 Psychology-V DSC-D39 Cr. 4	2/4 93509 Psychology-VI DSC-D40 Cr. 4
2/4 93528 Environmental Studies Cr. 0	2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 1 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025063      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 1 0 7 7 2 1 7 7**Full Name:** KHANDARE ABHISHEK ARVIND**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

B WARD JOPADPATTI, JUNA KANDALGAO NAKA , JAVAHAR NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** abhishekkhandare44@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 2 5 2 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012301      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 5 6 5 3 4 8 8 7**Full Name:** **KHANDARE SAMARTH MAHADEV****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2832 B WARD ISOLATION ROAD NEAR YALLAMA MANDIR KHAN BHAG, JAWAHAR NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** KHANDARESAMARTHMAHADEV@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90849 Sociology- III DSC-D3 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 9 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025552      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 4 9 8 5 3 3 2 8 2**Full Name:** KHOT SHRIDHAR BAJIRAO**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DATT COLONY, KANERI ROAD, KOLHAPUR

**City** KOPARDE**PIN Code:** 416234**Email ID:** khotshridhar9@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 1 3 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022888      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 8 0 5 7 0 9 7 4**Full Name:** KSHIRSAGAR YASH PRADIP**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** KOLI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1327 E WARD BEHIND SHIVSHAKTI MANDAL YADAV NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** KSHIRSAGARYASHPRADIP@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 7 9 8 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022055006      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 5 6 9 3 5 2 3 5**Full Name:** KUSAL ONKAR HARI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:****City** kolhapur**PIN Code:****Email ID:** omkarkusal513@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

( Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 6 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016070      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 5 2 7 2 4 8 6 6 1**Full Name:** LOHAR SHUBHAM PRASAD**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** LOHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

23 POWER COLONY, PACHGAON, KOLHAPUR

**City** PANHGAON**PIN Code:** 416013**Email ID:** shubhamlohar7552@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90825 Hindi- III DSC-C3 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025622      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 1 4 6 9 5 6 2 0 0****Full Name:** **MAGADUM PRADIP SAMBHAJI****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P CHUYE, KOLHAPUR

**City** A/P CHUYE,**PIN Code:** 416207**Email ID:** pradipmagadum6200@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 8 0 7 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022059156      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 0 0 2 4 9 3 4 9**Full Name:** MALI RANJIT VASANT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:****City** KOLHAPUR**PIN Code:****Email ID:** ranjitvasantmali@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88368 MARATHI - II DSC-A13 Cr. 4

1/2 88391 GEOGRAPHY II DSC-B24 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025704      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 7 4 1 0 9 5 1 5 2**Full Name:** MALI VINAYAK SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GADMUDSHINGI, GANESH GALLI, KOLHAPUR

**City** GADMUDSHINGE**PIN Code:** 416119**Email ID:** MALIVINAYAKSANJAY@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 7 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025739      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 6 7 5 7 7 4 1 4**Full Name:** MANE SANKALP SANDIP**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** NHAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1786"D'WARD, SHUKRAWAR PETH, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** manesankalp873@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88357 ENGLISH COMPULSORY AECC-2 Cr. 4 | 1/2 88359 SCIENCE TECHNOLOGY AND DEVELOPMENT CC

1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4 | 2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4 | 2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4 | 2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4 | 2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4 | 2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 3 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024767      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 9 2 1 6 9 8 0 9 7**Full Name:** MANE VIDHAN HANMANT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DATT COLONY, KANERI ROAD, YES BEKARS, KOLHAPUR

**City** SATARA**PIN Code:** 416234**Email ID:** vidhanmane8839@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 2 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025923      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 8 9 0 5 1 1 2 1 3**Full Name:** MORE NILESH JAYSING**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 18 MOREWADI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416013**Email ID:** jaysingmore1973@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88357 ENGLISH COMPULSORY AECC-2 Cr. 4

1/2 88391 GEOGRAPHY II DSC-B24 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90853 Political Science -III DSC-D7 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025670      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 4 2 0 7 7 7 4 3**Full Name:** MULLA ALFIZA AYUB**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 88 SUBHASH NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** mullaayub@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 3 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015648      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 6 6 5 2 3 5 6 9 6**Full Name:** NAGAVE PRATHAMESH ANIL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MORE GALLI, GADMUDSHINGI, KOLHAPUR

**City** Kolhapur**PIN Code:** 416119**Email ID:** prathmeshnagave016@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90825 Hindi- III DSC-C3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 7 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025723      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 7 6 7 6 2 8 2 5 8**Full Name:** NALAVADE AMIT ASHOK**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** NANDIVALE**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1682, 'E' WARD SHAHU NAGAR, RAJARAMPURI 14 LANE, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** NALAVADEAMITASHOK@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 1 3 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022893      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 1 3 7 2 2 4 0 3**Full Name:** **PAIKRAO VIKAS DILIP****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

C/O MATOSHRI GANGADEVI DEVADA NIWASI, ANDHA VIDYALAY, HINGOLI, MAHARASHTRA

**City** KOLHAPUR**PIN Code:** 431513**Email ID:** PAIKRAOVIKASDILIP@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025796      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 0 0 3 2 2 8 3 0**Full Name:** PARIT NIKHIL RAMCHANDRA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** PARIT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAIN ROAD DUKAN LINE, ISPURLI, KOLHAPUR

**City** ISPURLI**PIN Code:** 416207**Email ID:** nikhilparit959@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025819      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 5 1 7 4 5 1 9 0 1**Full Name:** PATIL ABHISHEK BHAGAWAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P CHUYE, KOLHAPUR

**City** A/P CHUYE**PIN Code:** 416207**Email ID:** abhishepatil200399@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 9 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025611      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 2 8 8 0 9 4 2 0**Full Name:** PATIL ABHISHEK SAMBHAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AP. SDDIVINAYAK NAGAR, KANERIWADI , KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416234**Email ID:** abhipatil9420@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 6 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011457      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 8 3 0 8 2 0 1 2 9**Full Name:** PATIL ADITYA PANDURANG**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

R.S. NO.59, SHIKSHAK COLONY, PATIL FARM HOUSE, PACHAGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416013**Email ID:** adi225patil@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,		Form No. : <b>4 3 2 4 6 2 0</b>	
The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION,SHIVAJI UNIVERSITY,KOLHAPUR			
Sir,I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.			
<b>PRN:</b> 2022016433		<b>College:</b> Gopal Krishna Ghokhale College,Kolhapur. , KOLHAPUR	
<b>Personal Information :</b>		<b>Mobile NO :</b> 7 7 9 6 6 8 3 5 0 1	
<b>Full Name:</b> PATIL AMRUT HINDURAO			
<b>Write Name in Devanagari (Marathi):</b> _____			
<b>Gender:</b> Male	<b>Religion:</b> HINDU	<b>Cast:</b> Maratha	<b>Physical Disability</b> NOT APPLICABLE
<b>Correspondence Address:</b>			
S/O HINDURAO DADU PATIL, JADHA AV LANE, SANGAWA DEWADI, KOLHAPUR			
<b>City</b> KOLHAPUR	<b>PIN Code:</b> 416202	<b>Email ID:</b> amrutpatil3501@gmail.com	
<b>Study Center:</b> N.A.			
<b>Fees Details:</b>		<b>Total Fee ₹:</b> 0	<b>( Uni.Fee. 0)</b>
<b>SEM IV)</b>			
<b>Subject Details :</b>			
2/4 93451 English Compulsory (AECC-4) Cr. 4		2/4 93458 Social Ecology-II Cr. 4	
2/4 93474 Marathi-V DSC-C25 Cr. 4		2/4 93475 Marathi-VI DSC-C26 Cr. 4	
2/4 93498 History-V DSC-C29 Cr. 4		2/4 93499 History-VI DSC-C30 Cr. 4	
2/4 93528 Environmental Studies Cr. 0		2/4 93529 Skill Enhancement Course-4 Cr. 2	
<b>Optional Subjects:</b>			
Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.			
<b>Place:</b>	<b>Date:</b>	<b>Student's Signature (Please sign strictly in the box shown below)</b>	<b>Principal's Signature &amp; Seal (Please sign in the box shown below)</b>
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 9 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016495      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 9 6 0 9 4 9 3 1**Full Name:** PATIL DHIRAJ ARUN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAHSOBA MAALWADI, GOKUL SHIRGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416234**Email ID:** patildhiraj49612@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 6 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011995      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 9 9 9 1 6 9 4 4 1**Full Name:** PATIL MEGHARAJ ANIL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1243/19, E WARD , UDYAM NAGAR, NEAR HUTATMA PARK, RAJARAMPURI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** PATILMEGHARAJANIL@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 9 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016520      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 0 8 8 9 0 4 0 9**Full Name:** PATIL OMKAR MANOHAR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KIT COLLEGE, GOKUL SHIRGAON, KOLHAPUR

**City** GOKUL SHIRGAON**PIN Code:** 416234**Email ID:** op0741000@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 3 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015637      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 2 2 7 4 7 5 7 4**Full Name:** PATIL PRATHAMESH DINKAR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SIDHHIVINAYAK NAGAR, KANERIWADI, KOLHAPUR

**City** KANERIWADI**PIN Code:** 416234**Email ID:** patupatil1218@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88357 ENGLISH COMPULSORY AECC-2 Cr. 4

1/2 88360 MARATHI CGE-2 Cr. 4

1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90825 Hindi- III DSC-C3 Cr. 4

2/3 90857 Psychology- III DSC-D11 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 1 6 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012364      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 1 0 9 3 8 9 0 0**Full Name:** PATIL SHUBHAM BANDOPANT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P DHAMOD, RADHANAGARI, KOLHAPUR

**City** A/P DHAMOD**PIN Code:** 416211**Email ID:** shubhampatil9843@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90807 Social Ecology-1 Cr. 4

2/3 90853 Political Science -III DSC-D7 Cr. 4

2/3 90854 Political Science -IV DSC-D8 Cr. 4

2/3 90865 Geography- III DSC-D19 Cr. 4

2/3 90866 Geography- IV DSC-D20 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 5 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011968      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 1 7 7 8 1 6 1 1 6**Full Name:** PATIL SIDDHARTH MOHAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TALGAON, RADHANAGARI, KOLHAPUR

**City** TALGAON**PIN Code:** 416211**Email ID:** patilsid3020@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4

1/2 88391 GEOGRAPHY II DSC-B24 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 2 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023195      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 3 0 5 5 8 6 5 2**Full Name:** PATIL SURAJ SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P TRIMURTI NAGAR, KANERIWADI, KOLHAPUR

**City** KANERIWADI**PIN Code:** 416234**Email ID:** surajpatil2399@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 9 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025507      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 3 8 5 3 0 1 0 1 6**Full Name:** PATIL TUKARAM MARUTI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO-10, SHIVNERI NAGAR, PACHGAON , KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416013**Email ID:** tpatil7028@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025787      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 8 0 5 5 2 1 4 0 8**Full Name:** PILAVARE AKSHAY BANDOPNT**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

269, BALAVADHUT NAGAR FULEWADI RING ROAD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416010**Email ID:** akshaypilavare27@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 4 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023046      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 6 6 6 1 0 7 8 5 1**Full Name:** PILLE YASH SHANKAR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO. 8, SHAHU COLONY, BALAJI PARK, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** yashpille4@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90853 Political Science -III DSC-D7 Cr. 4

2/3 90854 Political Science -IV DSC-D8 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 5 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011947      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 7 5 2 5 4 3 1 2**Full Name:** POWAR GOURAV YUVARAJ**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:**                      **Religion:** HINDU                      **Cast:** Other                      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

2355, BHRAMPURI, JUNA BUDHWAR PETH, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** POWARGOURAVYUVARAJ@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**                      (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90807 Social Ecology-1 Cr. 4

2/3 90823 Marathi III DSC-C1 Cr. 4

2/3 90824 Marathi -IV DSC-C2 Cr. 4

2/3 90857 Psychology- III DSC-D11 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

<b>Place:</b>	<b>Date:</b>	<b>Student's Signature (Please sign strictly in the box shown below)</b>	<b>Principal's Signature &amp; Seal (Please sign in the box shown below)</b>
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 2 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011377      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 7 7 4 8 6 1 8 5 5**Full Name:** POWAR PRASAD DIPAK**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

103'B' WARD SUBHASH NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** prasadpower1855@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

**SEM II), SEM III), SEM IV)****Subject Details :**

1/2 88368 MARATHI - II DSC-A13 Cr. 4	1/2 89349 Constitution of India and Local self Government Cr. 2
2/3 90865 Geography- III DSC-D19 Cr. 4	2/3 90866 Geography- IV DSC-D20 Cr. 4
2/4 93451 English Compulsory (AECC-4) Cr. 4	2/4 93458 Social Ecology-II Cr. 4
2/4 93508 Psychology-V DSC-D39 Cr. 4	2/4 93509 Psychology-VI DSC-D40 Cr. 4
2/4 93516 Geography-V DSC-D47 Cr. 4	2/4 93517 Geography-VI DSC-D48 Cr. 4
2/4 93528 Environmental Studies Cr. 0	2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

<b>Place:</b>	<b>Date:</b>	<b>Student's Signature (Please sign strictly in the box shown below)</b>	<b>Principal's Signature &amp; Seal (Please sign in the box shown below)</b>
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 4 5 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022901      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 3 0 0 1 1 0 9 0**Full Name:** POWAR SWARAJY SANTOSH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**TEACHER COLONY PACHGAON  
KOLHAPUR**City** PACHGAON**PIN Code:** 416216**Email ID:** POWARSWARAJYSANTOSH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM II), SEM III), SEM IV)****Subject Details :**

1/1 75207 Science Technology &amp; Development CGE-19 Cr. 4

1/1 75236 Psychology -I DSC-B6 Cr. 4

1/1 75240 Geography-I DSC-B10 Cr. 4

1/2 88371 HINDI- II DSC- A14 Cr. 4

1/2 88388 PSYCHOLOGY II DSC-B20 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 6 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026104      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 0 8 0 9 4 2 7 0 0**Full Name:** RAUT ONKAR DHANAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHAYNING GALLI, CHUYE, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416207**Email ID:** rautonkar838@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 7 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012216      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 8 3 0 0 0 2 9 5 9**Full Name:** SATHE VIRAJ SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1263 'E'WARD, 3RD LANE, RAJARAMPURI, SHAHUMILL ROAD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** virajsathe232@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 4 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016060      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 4 4 7 8 6 9 9 0 9**Full Name:** SAVANT SARTHAK ANIL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2831 B WARD, MANGALWAR PETH, YALLAMA MANDIR, KOLHAPUR

**City** Kolhapur**PIN Code:** 416012**Email ID:** majgaonkargayatri@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM II), SEM III), SEM IV)****Subject Details :**

1/1 75228 History - I DSC-B1 Cr. 4

1/2 88380 HISTORY II DSC-B15 Cr. 4

1/2 88383 POLITICAL SCIENCE II DSC-B18 Cr. 4

1/2 89349 Constitution of India and Local self Government Cr. 2

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 1 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025042      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 6 2 0 5 0 9 7 6 6**Full Name:** SAWANT SUNIL ARJUN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 1 , JOTIBA MANDIR, MAHIPUTRAO BONDRE NAGAR, RADHANAGARI ROAD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** sawantsunil84426@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 4 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026019      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 0 9 9 9 8 1 0 1**Full Name:** SAYYAD AJAN SAMIR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO-209, BIDI KAMGAR VASAHAAT, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** ajansayyed89@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 6 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022952      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 9 7 0 2 8 6 0 7 5**Full Name:** SHAIKH KHANASA TAYYAB**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KISMAT NAGAR, SHIROLI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** nadimshaikh4530@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 4 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024771      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 4 9 8 8 5 0 7 8 0**Full Name:** SHANDANSHIVE DHIRAJ DINESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJENDRA NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416004**Email ID:** vishal@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90807 Social Ecology-1 Cr. 4

2/3 90849 Sociology- III DSC-D3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 8 1 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012438      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 2 5 8 2 8 6 8 3**Full Name:** SHEKH SHAHANAWAZ RAJU**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

UCHGAON KOLHAPUR

**City** UCHGAON**PIN Code:** 416005**Email ID:** SHEKSHAHANAWAZRAJU@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 1 6 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012371      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 1 7 5 7 6 8 6 7 1**Full Name:** SHETYE AVINASH PRAKASH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GADMUDSHING, KARVIR, KOLHAPUR

**City** GADMUDSHING**PIN Code:** 416119**Email ID:** SHETYEAVINASHPRAKASH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 8 2 5 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022064838      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 8 3 4 6 4 7 4 7 5**Full Name:** SHINDE VIVEK UTTAM**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:****City** KOLHAPUR**PIN Code:****Email ID:** VIVEKSHINDE378@GMAIL.COM**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 0 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025820      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 5 7 9 6 9 9 9 9**Full Name:** SONAVANE SUMIT ANAND**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO.24, KATYAYANI COMPLEX, KALAMBA ROAD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** SONAVANESUMITANAND@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024

To,		Form No. : <b>4 3 2 4 5 8 8</b>	
The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR			
Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.			
<b>PRN:</b> 2022026352		<b>College:</b> Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR	
<b>Personal Information :</b>		<b>Mobile NO :</b> 9 2 7 3 2 3 4 2 2 3	
<b>Full Name:</b> SUKANPALLI HARISH DATTATRAY			
<b>Write Name in Devanagari (Marathi):</b> _____			
<b>Gender:</b> Male	<b>Religion:</b> HINDU	<b>Cast:</b> KOSHTI	<b>Physical Disability</b> NOT APPLICABLE
<b>Correspondence Address:</b>			
6/12 , GANDHI PUTALA, MANGALWAR PETH, ICHALKARANJI			
<b>City</b> KOLHAPUR	<b>PIN Code:</b> 416115	<b>Email ID:</b> SUKANPALLIHARISHDATTATRAY@GMAIL.COM	
<b>Study Center:</b> N.A.			
<b>Fees Details:</b>		<b>Total Fee ₹:</b> 0 (Uni.Fee. 0)	
<b>SEM III), SEM IV)</b>			
<b>Subject Details :</b>			
2/3 90800 English Compulsory- AECC 3 Cr. 4		2/4 93451 English Compulsory (AECC-4) Cr. 4	
2/4 93458 Social Ecology-II Cr. 4		2/4 93498 History-V DSC-C29 Cr. 4	
2/4 93499 History-VI DSC-C30 Cr. 4		2/4 93504 Political Science-V DSC-D35 Cr. 4	
2/4 93505 Political Science-VI DSC-D36 Cr. 4		2/4 93528 Environmental Studies Cr. 0	
2/4 93529 Skill Enhancement Course-4 Cr. 2			
<b>Optional Subjects:</b>			
Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.			
<b>Place:</b>	<b>Date:</b>	<b>Student's Signature (Please sign strictly in the box shown below)</b>	<b>Principal's Signature &amp; Seal (Please sign in the box shown below)</b>
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 9 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025600      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 0 5 7 4 0 1 4 0 4**Full Name:** SURKULE RAHUL JANARDAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** KOLI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

96/2/A SAHITYA NIVAS COLONY, VIMANTAL ROAD, UJALAIWADI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416004**Email ID:** rjsurkule@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 0 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025631      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 1 5 6 8 3 3 5 4 5****Full Name:** **SUTAR AVINASH JAGANNATH****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** SUTAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

ANAD NAGAR, TAMGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416234**Email ID:** SUTARAVINASHJAGANNATH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 2 5 2 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012258      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 5 3 0 1 1 6 3 9 5**Full Name:** SWAMI GURUPRASAD SUDHAKAR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2233'B'WARD, MANGALWAR PETH, MANDLIK GALLI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** SWAMIGURUPRASADSUDHAKAR@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 7 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024799      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 7 6 7 7 2 6 0 8 0**Full Name:** TIPUGADE ADITYA MOHAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** NHAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGALWAR PETH, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** adityatipugade@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 7 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024792      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 7 6 7 7 1 0 7 6 9**Full Name:** TIPUGADE ATHARVA MOHAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** NHAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGALWAR PETH, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** atharvatipugade@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 8 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026364      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 7 5 3 7 7 1 6 1**Full Name:** TIWALE PRATHMESH SHIVAJI**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAHALAXMI LANE, KALAMBA, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** tiwaleprathmesh36@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 7 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016086      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 5 7 9 2 0 8 5 9 0****Full Name:** **TURUKE ONKAR SATISH****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P MANGESHWAR COLONY, UCHAGAON, KOLHAPUR

**City** UCHGAON**PIN Code:** 416005**Email ID:** omkarturuke78@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 5 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026031      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 8 7 5 4 2 9 8 4 8**Full Name:** VADAR MARUTI KALLAPPA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** VADAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

390 MSEB JAVAL, SAINIK TAKALI, SHIROL, KOLHAPUR'

**City** KOLHAPUR**PIN Code:** 416202**Email ID:** marutivadar@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025845      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 3 2 2 3 2 9 4 0 0****Full Name:** **VARUTE ATHARV AMAR****Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

FLAT NO-110, SWAPNAPURTI APPARTMENT, PUIKHADI , KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416001**Email ID:** varuteatharv@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 1 2 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023158      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 5 2 9 4 4 4 6 3 4**Full Name:** VETHE YASH NANDKUMAR**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BRAMHESHWAR PARK 1764 A WARD, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** avdhutvethe9@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM I), SEM III), SEM IV)****Subject Details :**

1/1 75207 Science Technology &amp; Development CGE-19 Cr. 4

1/1 75216 Marathi-I DSC-A1 Cr. 4

1/1 75220 English-I DSC-A3 Cr. 4

1/1 75230 Economics -I DSC-B3 Cr. 4

1/1 75240 Geography-I DSC-B10 Cr. 4

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 2 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025842      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 8 7 8 0 0 6 9 8**Full Name:** WADKAR OMKAR SURESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A WARD SHIVGANGA COLONY, APTE NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** wadkaromya@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 9 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025582      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 5 7 9 8 0 9 6 2 6**Full Name:** YADAV JAGADISH MAHADEV**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

LAXMI COLONY, GADMUDSHINGI, KOLHAPUR

**City** GADSHINGE**PIN Code:** 416119**Email ID:** YADAVJAGADISHMAHADEV@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 8 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025832      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 7 6 6 9 7 0 1 9 3**Full Name:** YADAV PRANAV RAMCHANDRA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P GADMUDSHINGI, KOLHAPUR

**City** A/P GADMUDSHINGI**PIN Code:** 416119**Email ID:** YADAVPRANAVRAMCHANDRA@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 6 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011472      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 2 0 8 3 8 7 5 5 6**Full Name:** YADAV SURAJ SURESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJENDARA NAGAR, ZOPADPATTI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** YADAVSURAJSURESH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 3 0**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015620      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 7 7 5 8 0 7 3 1 2**Full Name:** YERUDKAR GAURAV NIVAS**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GHRAPAN, KALE, PANHALA, KOLHAPUR

**City A/P** KALE**PIN Code:** 416205**Email ID:** prudhu.yerudkar@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 7 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011490      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 2 1 3 2 2 5 3 5**Full Name:** ! ALTEKAR JAINAB IMTIYAJ**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** MUSLIM      **Cast:** MUSLIM      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

1712/C WARD MATAN MARKET JAVAL, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** jainabaltekar5555@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4 | 2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4 | 2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4 | 2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4 | 2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 7 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022959      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 5 3 0 0 1 4 0 4 1**Full Name:** ! ALTEKAR SADIYA AFZAL**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female      **Religion:** ISLAM      **Cast:** MUSLIM      **Physical Disability** NOT APPLICABLE**Correspondence Address:**

1712 C WARD SOMWAR PETH MUTTON MARKET SALAGAR GALLI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** ayeshaaltekarkar@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 1 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024751      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 8 7 5 4 2 9 8 5 8**Full Name:** ! BAGADI PRANITA NAVANATH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KANERIWADI, VALAGINAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416234**Email ID:** BAGADIPRANITANAVANATH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 4 0 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024379      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 0 0 0 0 0 0 0 0 0 0**Full Name:** ! BANSUDE KARUNA SOMANATH**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** MALI      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

JUNA WASHI NAKA MHADA SANKUL

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** karuna@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 3 1 8 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012390      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 8 0 2 5 3 1 9 1**Full Name:** ! CHAVAN GAYATRI BAJARANG**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

633 B WARD SUBHASH ROAD RENUKA MANDIR, MANGALWAR PETH, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** chavankiran5208@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 2 9 2 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012308      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 9 7 0 6 9 1 1 0 7**Full Name:** ! CHAVAN TEJASVINI MALHARI**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

A/P MIDC PHATA MADHAV NAGAR, KANERI, KOLHAPUR

**City** KANERI**PIN Code:** 416234**Email ID:** CHAVANTEJASVINIMALHARI@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 9 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011812      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 8 0 6 1 8 4 2 8 0**Full Name:** ! DASHARATHE SALU BALASAHEB**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

100, MAIN ROAD A/P BORI SAVANT PARALI, HINGOLI

**City** BORI**PIN Code:** 431705**Email ID:** DASHARATHESALUBALASAHEB@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 2 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022016417      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 5 9 3 8 9 5 9 7**Full Name:** ! FARANDE AKANKASHA BABURAO**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** MAHAR      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

AMBEDKAR CHOWK, PACHGAON, KOLHAPUR

**City** PACHGAON**PIN Code:** 416013**Email ID:** FARANDEAKANKASHABABURAO@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 8 2**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022961      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 0 4 9 0 4 0 8 1 3**Full Name:** ! GHARE SAKSHI RAVINDRA**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** MAHAR      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

M.S.E.B OFFICE YADAV NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** sakshighare011@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0      (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 2 5 2 3**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012292      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 5 9 8 6 7 0 0 1**Full Name:** ! JADHAV SHWETA SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

1182/144 'E'WARD RAJARAMPURI 2ND LANE, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** shwetashinde09@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90827 English- III DSC-C5 Cr. 4

2/3 90828 English- IV DSC-C6 Cr. 4

2/3 90865 Geography- III DSC-D19 Cr. 4

2/3 90866 Geography- IV DSC-D20 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 6 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026323      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 8 0 5 2 3 5 3 4 2**Full Name:** ! JADHAV VISHWAJYOTI DEEPAK**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE**Correspondence Address:**

DEWALE, PANHALA, KOLHAPUR

**City A/P** DEWALE**PIN Code:** 416213**Email ID:** VIDYAJADHAV1975@GMAIL.COM**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0      (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4      |      2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4      |      2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4      |      2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4      |      2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 8 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024307      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 0 5 5 3 7 0 7 5 5**Full Name:** ! KADAM VEDA BADAL**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

77 B WARD BALUMAMA GALI SUBHASH NAGAR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** vbkadam287@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 4 2 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022011347      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 9 7 0 7 8 9 3 9 3**Full Name:** ! KALAMKAR PADAMSHRI PRAKASH**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

NIGAVE KHALASA, KARVIR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416207**Email ID:** padamshrikalakar@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 8 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023076      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 7 9 6 2 8 4 5 3 9**Full Name:** ! KAMBLE PAYAL NANASO**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** MAHAR      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

MUKAM POST, NANDGAV, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416207**Email ID:** payalkamble781@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 0 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024924      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 4 1 1 9 0 9 9 7 3**Full Name:** ! KHILLARI BHAGYASHRI JOHN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJANDRANAGAR, BALASAHEB AMBEDKAR SANSKRATIK, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** KHILLARIBHAGYASHRIJOHN@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 6 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026084      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 0 5 6 0 4 7 3 2**Full Name:** ! LOHAR VAISHNAVI SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** LOHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO.849,MIRAJE GALLI,KALAMBA,KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416007**Email ID:** vaishalohar2103@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 6 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012121      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 6 9 8 3 9 5 4 1 9**Full Name:** ! MORE NILAM UTTAM**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** CHAMBHAR      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

HOUSE NO 69 SUBHASH NAGAR BWARD KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** MORENILAMUTTAM@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 1 8 6 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022012109      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 3 5 3 0 5 8 0 0 9**Full Name:** ! MORE SAKSHI UTTAM**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** CHAMBHAR      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

HOUSE NO 69 SUBHASH NAGAR BWARD KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416012**Email ID:** MORESAKSHIUTTAM@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 6 3 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023041 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 6 6 6 6 8 2 1 7 9**Full Name:** ! MUJAWAR SAYAMA ALTAF**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female **Religion:** MUSLIM **Cast:** MUSLIM **Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJARAMPURI 14TH LANE, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** sayamamujawar@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90807 Social Ecology-1 Cr. 4

2/3 90823 Marathi III DSC-C1 Cr. 4

2/3 90824 Marathi -IV DSC-C2 Cr. 4

2/3 90851 Economics -III DSC-D5 Cr. 4

2/3 90852 Economics -IV DSC-D6 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 2 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022939      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 7 6 7 7 5 5 7 0 2**Full Name:** ! MULLA HUZEFA LLAI**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** MUSLIM      **Cast:** MUSLIM      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

MADINA COLONY, UCHGAON, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416005**Email ID:** MULLAHUZEFA@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 2 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015593      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 0 5 7 6 4 8 5 0 7**Full Name:** ! NAVALE SHRAVANI RAMESH**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female      **Religion:** HINDU      **Cast:** JAIN      **Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 16, SANTGORA KUMBHAR VASAHAAT, BAPAT CAMP, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416005**Email ID:** 4321shravani@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93500 Sociology-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 9 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022968      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 4 2 0 8 8 9 0 4 4**Full Name:** ! PATANKAR JUVERIYA IBRAHIM**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** ISLAM      **Cast:** MUSLIM      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

JOWAR NAGAR, SIRNAIK

**City** kolhapur**PIN Code:** 416117**Email ID:** nuamanpatankar@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0      (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 0 4 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022949      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 7 6 7 2 1 1 8 6 4**Full Name:** ! PATIL DIKSHA UDAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJARAMPURI 14TH LANE , KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416008**Email ID:** sp3365739@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90852 Economics -IV DSC-D6 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93502 Economics-V DSC-D33 Cr. 4

2/4 93503 Economics-VI DSC-D34 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 0 6**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015379      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 8 7 8 8 0 1 3 3 8 2**Full Name:** ! PATIL AMISHA ANANDA**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

KENA VADE, KAGAL, KOLHAPUR

**City** KENA VADE**PIN Code:** 416216**Email ID:** amishapatil334@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 6 1**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026075      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 7 9 8 1 0 6 7 9 6**Full Name:** ! PATIL APURVA GAJANAN**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

NANDWAL WASHI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416001**Email ID:** PATILAPURVAGAJANAN@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 3 5**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022025915      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 3 5 6 7 2 9 5 7 8**Full Name:** ! PATIL ARATI BABURAO**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

MADHLAMAL, KANERI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416234**Email ID:** patilarti450@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93498 History-V DSC-C29 Cr. 4

2/4 93499 History-VI DSC-C30 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 7 6 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022024780      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** **9 8 5 0 4 3 6 0 0 7****Full Name:** **! PATIL ARPITA VITTHAL****Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

KUSHIRE, PANHALA, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416229**Email ID:** PATILARPITAVITTHAL@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93500 Sociolgy-V DSC-D31 Cr. 4

2/4 93501 Sociology-VI DSC-D32 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 5 0 7**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022015414      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 8 6 0 6 3 0 2 7 6**Full Name:** ! PATIL SHIVANI SANJAY**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** Maratha      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

A/P BARAGE KAGAL , KOLHAPUR

**City** A/P BARAGE**PIN Code:** 416235**Email ID:** PATILSHIVANISANJAY@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 0 3 5 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022040708      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 7 5 5 8 4 0 4 4 8 4**Full Name:** ! PATIL SUPRIYA MAHADEV**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Bhatsing Galli, Indira nagar, Vadanage

**City** KOLHAPUR**PIN Code:** 416229**Email ID:** supriyaingle47@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93458 Social Ecology-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93504 Political Science-V DSC-D35 Cr. 4

2/4 93505 Political Science-VI DSC-D36 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			





**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 8 6 8**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022026311      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 5 4 5 5 3 2 5 1 1**Full Name:** ! RAMANNA RASIKA RAMCHANDRA**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female**Religion:** HINDU**Cast:** DHANGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PATTAN KODOLI, HUPARE NAGAR, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416202**Email ID:** bharastramanna62728@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90857 Psychology- III DSC-D11 Cr. 4

2/3 90858 Psychology- IV DSC-D12 Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93474 Marathi-V DSC-C25 Cr. 4

2/4 93475 Marathi-VI DSC-C26 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



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Form No. : **4 3 2 5 0 7 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022022957      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 4 6 3 0 3 0 9 7**Full Name:** ! SHINDE VAISHNVI ANANDA**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** HINDU      **Cast:** PARIT      **Physical Disability** NOT APPLICABLE

**Correspondence Address:**

MAIN ROAD SHIROLI, KOLHAPUR

**City** KOLHAPUR**PIN Code:** 416002**Email ID:** vishishinde3097@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM IV)****Subject Details :**

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
<b>Specimen Signature:</b>			



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 5 9 9 4**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022030008      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

**Personal Information :****Mobile NO :** 9 1 6 8 7 6 1 8 9 2**Full Name:** ! TAMBOLI TAHIRA BASHIR**Write Name in Devanagari (Marathi):** \_\_\_\_\_

**Gender:** Female      **Religion:** MUSLIM      **Cast:** MUSLIM      **Physical Disability** NOT APPLICABLE

**Correspondence Address:****City** KOLHAPUR**PIN Code:****Email ID:** tahiratamboli5977@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/3 90827 English- III DSC-C5 Cr. 4

2/3 90828 English- IV DSC-C6 Cr. 4

2/3 90865 Geography- III DSC-D19 Cr. 4

2/3 90866 Geography- IV DSC-D20 Cr. 4

2/3 90877 Skill Enhancement Course 3 Cr. 2

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93478 English-V DSC-C29 Cr. 4

2/4 93479 English-VI DSC-C30 Cr. 4

2/4 93516 Geography-V DSC-D47 Cr. 4

2/4 93517 Geography-VI DSC-D48 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

**Place:****Date:****Student's Signature (Please sign strictly in the box shown below)****Principal's Signature & Seal (Please sign in the box shown below)****Specimen Signature:**



**SHIVAJI UNIVERSITY, KOLHAPUR**  
Application Form for **B.A.(C.B.C.S)PART2 SEM4 (NEP2020)**  
Examination, March-2024



To,

Form No. : **4 3 2 4 9 2 9**

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR

Sir, I request the permission to present myself at the B.A.(C.B.C.S)PART2 SEM4 (NEP2020) exam to be held in March-2024 for the papers mentioned below.

**PRN:** 2022023199      **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 4 2 0 9 9 4 3 9 1**Full Name:** ! TIPUGADE MANALI KESHAV**Write Name in Devanagari (Marathi):** \_\_\_\_\_**Gender:** Female      **Religion:** HINDU      **Cast:** NHAVI      **Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAHALAXMI GALLI, KALAMABA, KOLHAPUR

**City** KALAMBA**PIN Code:** 416007**Email ID:** TIPUGADEMANALIKESHAV@GMAIL.COM**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0      (Uni.Fee. 0)**SEM III), SEM IV)****Subject Details :**

2/3 90800 English Compulsory- AECC 3 Cr. 4

2/3 90813 Logic (T) (Traditional) Cr. 4

2/4 93451 English Compulsory (AECC-4) Cr. 4

2/4 93464 Logic-T-II Cr. 4

2/4 93476 Hindi-V DSC-C27 Cr. 4

2/4 93477 Hindi-VI DSC-C28 Cr. 4

2/4 93508 Psychology-V DSC-D39 Cr. 4

2/4 93509 Psychology-VI DSC-D40 Cr. 4

2/4 93528 Environmental Studies Cr. 0

2/4 93529 Skill Enhancement Course-4 Cr. 2

**Optional Subjects:**

Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature is liable to be cancelled or reject.

Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
Specimen Signature:			