

liable to be cancelled or reject.

Date:

Place:

Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4309448 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044153 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 3 2 9 0 0 4 2 8 8 **ADULKAR SHUBHAM BHAGOJI Full Name:** Write Name in Devanagari (Marathi): Cast: DHANGAR Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Correspondence Address: 310 E WARD NEW SHAHUPURI **City KOLHAPUR PIN Code: 416001 Email ID:** ADULKARSHUBHAM2@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75551 HINDI-VII DSE-E6 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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

Student's Signature (Please sign strictly

in the box shown below)

Principal's Signature & Seal (Please sign

in the box shown below)



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



То,					Form No. :		4 3 0 5 8	9 7
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	TON,SHIVAJI UN	IIVERSI	TY,KOLHAP	UR		
	permission to p he papers mentio	resent myself at the B ned below.	.A.(CBCS) PART	T 3 SE	M 6 (Socio	ology)	exam to	be held in
PRN: 2020061245	College: G	opal Krishna Ghokhale C	ollege,Kolhapur.	, KOLH	APUR			
Personal Information	on :			Мс	bile NO :	9 1	4 6 8 8 6	6 4 5
Full Name: Al	ASKAR SAMEER	BABAJAN						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: MU	ISLIM Cast: MU	ISLIM F	Physica	l Disability	NOT A	PPLICABLE	
Correspondence A	ddress:							
DHANGAR GALL	I RUKADI							
City KOLHAPUR		PIN Code: 416118	Email ID:	samee	ralaskar@gr	nail.con	n	
Study Center: N	I.A.							
Fees Details:			Tota	al Fee ₹	. 0		(Uni	Fee. 0)
SEM III)								
Subject Details: 2/3 73323 English	Compulsory- AECC	3 Cr. 4						
Optional Subjects:								
	elief. I understand	all statements made in t that in the event of a						
Place:	Date:	Student's Signature (Pleasin the box shown below)	e sign strictly		rincipal's Sig			e sign
Specimen Sigature:							,	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,				Form No. :	4 3 0 4 1 7 0
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUATION,SHIVAJI	UNIVERSI	TY,KOLHAP	'UR
	permission to p he papers mentio	resent myself at the B.A.(CBCS) PAned below.	ART 3 SEI	И 6 (Geogr	raphy) exam to be held in
PRN: 2020004618	8 College: G	opal Krishna Ghokhale College,Kolhap	our. , KOLH	APUR	
Personal Information	on :		Мо	bile NO :	8 0 8 0 5 7 3 1 8 8
Full Name: Al	NKALI RAJ RAFIK				
Write Name in De	vanagari (Marathi):			
Gender: Male	Religion: ISL	AM Cast: MUSLIM	Physica	l Disability	NOT APPLICABLE
Correspondence A	ddress:				
SALOKHE GALLI	KALAMBE TARF	THANE KOLHAPUR			
City KALAMBE TA	ARF THANE	PIN Code: 416007 Email II	D : rankali	495@gmail.d	com
Study Center: N	I.A.				
Fees Details:			Total Fee ₹	: 0	(Uni.Fee. 0)
SEM VI)					
Subject Details :					
3/6 75702 English	(Compulsory) AECC	6 Cr. 4 3/6 75746	GEOGRAPH	IY-X DSE-E20	31 Cr. 4
Optional Subjects:					
	elief. I understand	all statements made in this application that in the event of any information			
Place:	Date:	Student's Signature (Please sign strictly in the box shown below)		Principal's Sign the box sho	gnature & Seal (Please sign own below)
Specimen Sigature:					
	•				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4309455 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021043655 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7058599008 **AWALE SIDDHARTH DILIP Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: MANG Correspondence Address: **PACHGAON City KOLHAPUR PIN Code: 416013** Email ID: SIDAWALE80@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75553 HINDI-IX DSE-E8 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,								Form I	No. :	4 3	1 1 0	0 6
The DIRECTOR, I	BOARD OF EXAM	IINATIONS AN	D EVALUAT	ION,SH	VAJI	I UNI\	/ERSI	ΓΥ,KOL	HAPUR			
Sir,I request the March-2024 for t	permission to p he papers mention		at the B.	.A.(CBC	S) P	ART	3 SEI	M 6 (S	Sociology	y) ex	am to b	e held in
PRN: 2021047527	7 College: G	Gopal Krishna C	Shokhale C	ollege,K	olhap	our. ,	KOLH	APUR				
Personal Information	on : AGADE KUNAL K	UNDAN					Мо	bile NO	: 7	0 5 8	3 1 2	3 0 8
Write Name in De	evanagari (Marath	i):										
Gender: Male	Religion: HII	NDU	Cast: Ma	ratha		Pł	nysical	Disabi	lity NO	T APPL	ICABLE	
Correspondence A	ddress:											
MOREWADI R K	NAGAR KOLHAPI	JR										
City KOLHAPUR		PIN Code:	416013	En	nail I	D :	oishwaı	1994@	gmail.cc	om		
Study Center: N	I.A.											
Fees Details:						Total	Fee ₹:	0			(Uni.l	Fee. 0)
SEM IV), SEM V),	SEM VI)											
Subject Details : 2/4 73487 Environm	mental Studies Cr. ()		3/5 75	502	Englis	sh (Com	npulsorv) AECC 5	Cr. 4		
·	OGY-VII DSE-E66			i) AECC 6			
3/6 75711 SOCIOL	OGY-XII DSE-E191	Cr. 4		3/6 75					SE-E192			
3/6 75713 SOCIOL	OGY-XIV DSE-E19	3 Cr. 4		3/6 75	714	SOCI	IOLOGY	′-XV DS	E-E194 (Cr. 4		
3/6 75715 SOCIOL	OGY-XVI DSE-E19	5 Cr. 4										
Optional Subjects:												
Declaration: I here knowledge and be liable to be cancelled	elief. I understand											
Place:	Date:	Student's Sign in the box sho		e sign st	rictly				's Signatı x shown l		al (Please	sign
Specimen Sigature:												



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



To,						F	orm No. :	4	3 1 3	055	
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND	EVALUAT	ION,SHIVA	II UNIVEI	RSITY,	,KOLHAP	UR			
Sir,I request the March-2024 for the			at the B.	A.(CBCS) F	PART 3	SEM	6 (Econo	mics) e	xam to	be held	in
PRN: 2021036962	College: G	opal Krishna G	hokhale C	ollege,Kolha	pur. , K0	DLHAP	rUR				
Personal Informatio	on :	SANJAY				Mobil	e NO :	9 2 7	0 7 9	8 5 5	
Write Name in De											
Gender: Male	Religion: HIN	NDU	Cast: SH	IMPI	Phys	sical D	isability	NOT APF	LICABL	.E	
Correspondence Ac	ldress:										
GUJARI KOLHAP	UR										
City KOLHAPUR		PIN Code:	416002	Email	I D : bak	careshr	ripad@gm	ail.com			
Study Center: N	.A.										
Fees Details:					Total Fe	e ₹:	0		(Ur	ni.Fee. 0)	
SEM III), SEM IV),	SEM V), SEM VI)								·	·	
Subject Details: 2/3 73323 English (Compulsory- AECC	3 Cr 4		2/4 73410	English (Compul	leony (AEC	CC-4) Cr. 4			
	-						/II DSE-E7				
	Compulsory) AECC MICS-VIII DSE-E72						X DSE-E73				
	MICS-X DSE-E74 C			3/5 75635			(I DSE-E7				
	MICS-XII DSE-E196			3/6 75832			(III DSE-E				
	MICS-XIV DSE-E19			3/6 75834			XV DSE-E				
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4		3/6 75702	English ((Compu	ılsory) AEC	CC 6 Cr. 4			
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelle	lief. I understand										
Place:	Date:	Student's Sign		e sign strictl	y			nature & S wn below)	eal (Plea	ise sign	
Specimen Sigature:											

4311222

Form No.:



To,

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



Examination, March-2024

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

Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held in March-2024 for the papers mentioned below.

PRN: 2021037004 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information: Mobile NO: 7 5 8 8 2 5 0 2 6 8

Full Name: BARGIR SOVADDIN RAYAJAHMED

Write Name in Devanagari (Marathi):

Gender: Male Religion: MUSLIM Cast: MUSLIM Physical Disability NOT APPLICABLE

Correspondence Address:

kagal kolhapur

City kolhapur PIN Code: 416216 Email ID: sovddinbargir@gmail.com

Study Center: N.A.

Fees Details: Total Fee ₹: **0** (Uni.Fee. 0)

SEM V), SEM VI)

Subject Details:

| 3/5 75502 English (Compulsory) AECC 5 Cr. 4 | 3/5 75571 MARATHI-VII DSE-E1 Cr. 4 | 3/5 75572 MARATHI-VIII DSE-E2 Cr. 4 | 3/5 75575 MARATHI-XI DSE-E5 Cr. 4 | 3/6 75702 English (Compulsory) AECC 6 Cr. 4 | 3/6 75771 MARATHI-XII DSE-E126 Cr. 4 | 3/6 75772 MARATHI-XIII DSE-E127 Cr. 4 | 3/6 75773 MARATHI-XIV DSE-E128 Cr. 4 | 3/6 75774 MARATHI-XV DSE-E129 Cr. 4 | 3/6 75774 MARATHI-XV DSE-E129 Cr. 4

3/6 75775 MARATHI-XVI DSE-E130 Cr. 4

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			
Sigature:			



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,					Form No. :	4 3 0 9 0 8 1
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJ	I UNIVERS	TY,KOLHAPUR	
Sir,I request the March-2024 for t		present myself at the Boned below.	.A.(CBCS) P	ART 3 SE	M 6 (Geograph	ny) exam to be held in
PRN: 2021043562	2 College: 0	Gopal Krishna Ghokhale(College,Kolha	pur. , KOLH	IAPUR	
Personal Information	on :			М	obile NO : 8	9 7 5 3 4 5 0 2 7
Full Name: B	AVADEKAR VIKR	ANT KIRAN				
Write Name in De	vanagari (Marath	i):				
Gender: Male	Religion: HI	NDU Cast : KU	JMBHAR	Physica	I Disability NC	OT APPLICABLE
Correspondence A	ddress:					
NIGAVE DUMALA	Ą					
City KOLHAPUR		PIN Code: 416229	Email	ID: KIRAN	IBAVADEKAR55	588@GMAIL.COM
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75548	GEOGRAP	HY-IX DSE-E108	Cr. 4
3/6 75702 English	(Compulsory) AECC	C 6 Cr. 4	3/6 75746	GEOGRAP	HY-X DSE-E231	Cr. 4
3/6 75747 GEOGR	RAPHY-XI DSE-E23	2 Cr. 4	3/6 75748	GEOGRAP	HY-XII DSE-E233	Cr. 4
3/6 75749 GEOGR	RAPHY-XIII DSE-E2	34 (Practical) Cr. 4	3/6 75750	GEOGRAP	HY-XIV DSE-E235	5 (Practical) Cr. 4
Optional Subjects:						
	elief. I understand	d that in the event of a	any information	on being fo	und false or in	correct to the best of my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signat n the box shown	ure & Seal (Please sign below)
Specimen Sigature:						



Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4 3 1 4 8 8 3 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021054197 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO · 7517561750 Full Name: **BHAT ADITYA NAMDEV** Write Name in Devanagari (Marathi): Cast: Other Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Correspondence Address: **City KOLHAPUR PIN Code: Email ID:** adityabhat3726@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below)



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,					Form No. :	4 3	0 4 5 0 5
The DIRECTOR, BO	DARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJ	UNIVERS	SITY,KOLHAPU	JR	
Sir,I request the March-2024 for the		resent myself at the E ned below.	3.A.(CBCS) P	ART 3 SI	EM 6 (Econor	mics) exa	nm to be held in
PRN: 2020010822	College: G	opal Krishna Ghokhale	College,Kolha _l	our. , KOL	HAPUR		
Personal Information Full Name: BH/ Write Name in Dev	AT SIDDESH PRA			ľ	Mobile NO :	7 6 2 0	6 1 0 9 0 8
Gender: Male	Religion: HIN	NDU Cast: B	HAT	Physic	al Disability	NOT APPLI	CABLE
Correspondence Add	lress:						
851 A WARD NAVN	IATH NAGAR KC	LHAPUR KALAMBA KO	LHAPUR				
City KOLHAPUR		PIN Code: 416007	Email I	D: sidde	shbhat.10@gn	nail.com	
Study Center: N./	١.						
Fees Details:				Total Fee	₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details : 3/5 75502 English (C	Compulsory) AECC	5 Cr. 4	3/5 75631	ECONOMI	ICS-VII DSE-E71	Cr. 4	
	ICS-VIII DSE-E72		3/5 75633		CS-IX DSE-E73		
3/6 75831 ECONOM	ICS-XII DSE-E196	Cr. 4	3/6 75832	ECONOMI	CS-XIII DSE-E1	97 Cr. 4	
3/6 75833 ECONOM	ICS-XIV DSE-E19	3 Cr. 4	3/6 75834	ECONOMI	CS- XV DSE-E	199 Cr. 4	
3/6 75835 ECONOM	ICS-XVI DSE-E20	O Cr. 4	3/6 75702	English (C	ompulsory) AEC	C 6 Cr. 4	
Optional Subjects:							
	ef. I understand	all statements made in that in the event of a	any information	n being f	ound false or	incorrect,	my candidature is
Place:	Date:	Student's Signature (Plean in the box shown below)	ase sign strictly		Principal's Signin the box show		ıl (Please sign
Specimen Sigature:							

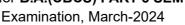
4308998

Form No.:



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)





To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Sociology) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044553 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 6 2 5 9 6 7 0 8 2 **BHOKARE SAIRAJ NETAJI Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: **PACHGAON City KOLHAPUR PIN Code: 416012 Email ID:** BHOKARESAIRAJ@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75611 SOCIOLOGY-VII DSE-E66 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75712 SOCIOLOGY-XIII DSE-E192 Cr. 4 3/6 75711 SOCIOLOGY-XII DSE-E191 Cr. 4 3/6 75713 SOCIOLOGY-XIV DSE-E193 Cr. 4 3/6 75714 SOCIOLOGY-XV DSE-E194 Cr. 4 3/6 75715 SOCIOLOGY-XVI DSE-E195 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



To,						For	m No. :		4 3 1	4 1 1 2
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND	EVALUATIO	N,SHIVA	II UNIVEF	RSITY,K	OLHAPU	R		
	permission to p he papers mention		at the B.A.	(CBCS) F	ART 3 S	SEM 6	(Geogra	phy)	exam	to be held in
PRN: 2021040202	2 College: G	Gopal Krishna Gł	nokhale Coll	ege,Kolha	pur. , KO	LHAPU	R			
Personal Information	on : HORE SURAJ NA	NDKIIMAB				Mobile	NO :	992	2 1 5	5 3 2 3 1
	vanagari (Marath									
Gender: Male	Religion: HII	NDU	Cast: GUR	AV .	Phys	ical Dis	ability N	IOT A	PPLICA	
Correspondence A	ddress:									
City KOLHAPUR		PIN Code:		Email	ID: sura	ajbhore9	9610@gm	ail.co	m	
Study Center: N	I.A.									
Fees Details:					Total Fee	e₹: ()		((Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)									
Subject Details : 2/4 73410 English	Compulsory (AECC	-4) Cr. 4	3	3/5 75502	English (Compuls	ory) AECC	C 5 Cr.	. 4	
3/5 75546 GEOGR	APHY-VII DSE-E10	6 Cr. 4	3	3/6 75702	English (Compuls	ory) AECC	C 6 Cr.	. 4	
3/6 75746 GEOGR	RAPHY-X DSE-E231	Cr. 4	3	8/6 75747	GEOGRA	APHY-XI	DSE-E232	2 Cr. 4	1	
3/6 75748 GEOGR	APHY-XII DSE-E23	3 Cr. 4	3	3/6 75749	GEOGRA	APHY-XI	II DSE-E23	34 (Pra	actical)	Cr. 4
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	35 (Practical) Cr.	4							
Optional Subjects:	1									
Declaration: I here knowledge and be liable to be cancelled	elief. I understand									
Place:	Date:	Student's Signatin the box show		sign strictl	<u> </u>		pal's Signa box show			Please sign
Specimen Sigature:										



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,						Form No). :	4 3 0 8 6	7 8
The DIRECTOR, I	BOARD OF EXAM	IINATIONS AND EV	ALUATION,	SHIVAJ	I UNIVER	SITY,KOLH	APUR		
Sir,I request the March-2024 for t		resent myself at t oned below.	he B.A.(CE	BCS) PA	ART 3 S	SEM 6 (Geo	ography)	exam to b	e held in
PRN: 2021020394	4 College: G	Gopal Krishna Ghokh	nale Colleg	e,Kolha _l	pur. , KO	LHAPUR			
Personal Information	on: HOSALE ROHAN	SANJAY				Mobile NO :	7 2	4 9 7 5 0 0	9 9
Write Name in De	vanagari (Marath	i):							
Gender: Male	Religion: HII	NDU Ca	st: Maratha		Physi	cal Disabilit	y NOT	APPLICABLE	
Correspondence A	ddress:								
BORGAON POST	AJANSODA TE;	CHAKUR ANJANSC	NDA						
City LATUR		PIN Code: 4135	513	Email I	I D: rigal	ooahi336@g	mail.com	l	
Study Center: N	I.A.								
Fees Details:					Total Fee	e₹: 0		(Uni.F	ee. 0)
SEM III), SEM IV),	, SEM V), SEM VI)								
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4	73410	English C	ompulsory (A	ECC-4)	Or. 4	
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6	75702	English (0	Compulsory) A	AECC 6 C	cr. 4	
3/6 75746 GEOGR	RAPHY-X DSE-E231	Cr. 4	3/6	75747	GEOGRA	PHY-XI DSE	-E232 Cr.	4	
3/6 75748 GEOGR	APHY-XII DSE-E23	3 Cr. 4	3/6	75749	GEOGRA	PHY-XIII DSE	E-E234 (P	ractical) Cr. 4	
3/6 75750 GEOGR	APHY-XIV DSE-E2	35 (Practical) Cr. 4	-						
Optional Subjects:									
	elief. I understand	all statements mad I that in the event							
Place:	Date:	Student's Signature in the box shown be		n strictly	1	Principal's in the box s	_	& Seal (Please ow)	sign
Specimen Sigature:									



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,					Form No. :	4 3 1 4 1 5 5
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVAJ	I UNIVERSI	TY,KOLHAPUR	
	permission to p he papers mentio	resent myself at the I	B.A.(CBCS) F	PART 3 SE	EM 6 (Sociology) exam to be held in
PRN: 2021047654	4 College: G	iopal Krishna Ghokhale	College,Kolhar	our. , KOLF	IAPUR	
Personal Information	on : HOSALE MASU SI	DRAM		M	obile NO : 9	5 5 2 2 7 9 2 1 4
Write Name in De	evanagari (Marathi):				
Gender: Male	Religion: HI	NDU Cast: M	AHAR	Physica	I Disability NOT	APPLICABLE
Correspondence A	ddress:					
KOLHAPUR						
City KOLHAPUR		PIN Code: 416004	Email I	D: BHOS	ALEMASU@GMA	AIL.COM
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM III), SEM IV),	, SEM V), SEM VI)					
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4 73410	English Con	npulsory (AECC-4)	Cr. 4
3/5 75611 SOCIOL	OGY-VII DSE-E66	Cr. 4	3/5 75612	SOCIOLOG	Y-VIII DSE-E67 Cr	. 4
3/5 75615 SOCIOL	OGY-XI DSE-E70	Cr. 4	3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75711 SOCIOL	OGY-XII DSE-E191	Cr. 4	3/6 75712	SOCIOLOG	Y-XIII DSE-E192 C	Cr. 4
3/6 75713 SOCIOL	OGY-XIV DSE-E19	3 Cr. 4	3/6 75714	SOCIOLOG	Y-XV DSE-E194 C	r. 4
3/6 75715 SOCIOL	OGY-XVI DSE-E19	5 Cr. 4				
Optional Subjects:						
	elief. I understand		• •		•	correct to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)			Principal's Signatu n the box shown b	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No.	: 43	304310	
The DIRECTOR,	BOARD OF EXAMI	NATIONS AND	EVALUATION,SI	HIVAJI UNIVE	RSITY,KOLHAI	PUR		
-	e permission to p the papers mention	•	at the B.A.(CE	BCS) PART	3 SEM 6 (Hi	story) exa	am to be held	d in
PRN: 202001313	9 College: G	opal Krishna Gh	nokhale College,l	Kolhapur. , K0	DLHAPUR			
Personal Information	on : HOSALE SHUBHA	M SHANKAR			Mobile NO :	9 1 7 5	7 6 1 2 2 7	
	evanagari (Marathi)							
Gender: Male	Religion: HIN	IDU	Cast: Maratha	Phys	ical Disability	NOT APPL	.ICABLE	
Correspondence A	ddress:							
AT POST KAGAL	KOLHAPUR							
City KAGAL		PIN Code: 4	116316 E	mail ID: sou	ırabhbhosale01	04@gmail.c	om:	
Study Center: N	I.A.							
Fees Details:				Total Fe	e ₹: 0		(Uni.Fee. 0))
SEM VI)								
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr 4	3/6 7	75758 HISTOR	Y-XIV DSE-E188	3 Cr 4		
Optional Subjects:	• • • • • • • • • • • • • • • • • • • •	0 01. 4	3/0 /	5750 THOTOIN	T-XIV DOL-LIO	5 OI. 4		
Declaration: I here knowledge and be liable to be cancelled	elief. I understand							
Place:	Date:	Student's Signatin the box show	nture (Please sign s n below)	strictly	Principal's Si in the box sh	-	eal (Please sign	
Specimen Sigature:			<u> </u>			·		
					_			



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,						Form No.	:	4 3 1 0 1 2 2
The DIRECTOR, I	BOARD OF EXAM	IINATIONS AN	D EVALUAT	ION,SHIVAJ	II UNIVERS	SITY,KOLHAI	PUR	
	permission to p he papers mentio	-	at the B.	A.(CBCS) I	PART 3 S	SEM 6 (Soci	iology)	exam to be held in
PRN : 2021008111	College: G	Gopal Krishna (Shokhale Co	ollege,Kolha	pur. , KOL	HAPUR		
Personal Information	on :				ı	Mobile NO :	9 7 (6 3 6 5 8 5 5 4
Full Name: Bo	ORATE VISHAL K	RUSHNAT						
Write Name in De	vanagari (Marathi	i):						
Gender: Male	Religion: Hil	NDU	Cast: DHA	ANGAR	Physic	cal Disability	NOT A	PPLICABLE
Correspondence A	ddress:							
KAWANE								
City KOLHAPUR		PIN Code:	416207	Email	ID : borat	evishal8454@	@gmail.c	om
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM VI)								
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 75711	SOCIOLO	GY-XII DSE-E	191 Cr. 4	
3/6 75712 SOCIOL				3/6 75713	SOCIOLO	GY-XIV DSE-E	E193 Cr.	4
3/6 75714 SOCIOL	OGY-XV DSE-E194	Cr. 4		3/6 75715	SOCIOLO	GY-XVI DSE-E	195 Cr.	4
Optional Subjects:								
.,								
	elief. I understand							rect to the best of my ect, my candidature is
Place:	Date:	Student's Sig in the box sho	•	e sign strictly	У	Principal's Si in the box sh	-	& Seal (Please sign w)
Specimen Sigature:			-					



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,						Form No.	:	4 3 0 4 1 6 0	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUAT	TION,SHIVAJ	II UNIVER	SITY,KOLHA	PUR		
	permission to phe papers mention		f at the E	B.A.(CBCS)	PART 3	SEM 6 (Er	nglish)	exam to be held in	l
PRN: 2020013540	College: G	opal Krishna (Shokhale C	ollege,Kolha	pur. , KO	LHAPUR			
Personal Information	on :					Mobile NO :	7 7	1 9 8 4 2 2 0 1	
Full Name: Cl	HOUGALE ABHISI	HEK APPASO							
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	NDU	Cast: Ma	ratha	Physi	cal Disability	NOT A	APPLICABLE	
Correspondence A	ddress:								
146 CHOUGALE	GALLI NEAR NVIT	THALAI TEMI	PLE KOLHA	APUR					
City KOLHAPUR		PIN Code:	416221	Email	ID: abhi	shekchougale	e0@gma	ail.com	
Study Center: N	I.A.								
Fees Details:					Total Fee	e ₹: 0		(Uni.Fee. 0)	
SEM V), SEM VI)									
Subject Details : 3/5 75531 ENGLIS	:H-VII DSE-E11 Cr. 4	4		3/6 75702	English (Compulsory) AE	ECC 6 C	cr. 4	
3/6 75731 ENGLIS	H-XII DSE-E136 Cr	. 4		3/6 75733	ENGLISH	I-XIV DSE-E13	8 Cr. 4		
Optional Subjects:				•					
	elief. I understand							prrect to the best of my rrect, my candidature is	
Place:	Date:	Student's Sig in the box sho		se sign strictly	<i>y</i>	Principal's S in the box sh	_	& Seal (Please sign ow)	
Specimen Sigature:									



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4309079 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021047611 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 6 6 6 3 0 1 0 4 9 Full Name: **CHOUGALE KEDAR SAGAR** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: 2604 B WARD SATH MARI MANGALWAR PETH **City KOLHAPUR PIN Code:** 416012 Email ID: KEDARCHOUGALE@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)

To,					Form N	10. :	4 3 0 9 4 4 0
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ΓΙΟΝ,SHIVAJ	I UNIVER	SITY,KOLI	HAPUR	
	permission to phe papers mention	present myself at the lined below.	B.A.(CBCS)	PART 3	SEM 6	(Marathi)	exam to be held in
PRN: 2021044574	4 College: G	opal Krishna Ghokhale C	College,Kolha	pur. , KO	LHAPUR		
Personal Information	on :				Mobile NO	7 5	5 9 2 3 9 5 9 6
Full Name: Cl	HOUGULE ROHIT	MADHUKAR					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast : Ma	ıratha	Physi	cal Disabil	ity NOT A	APPLICABLE
Correspondence A	ddress:						
VANDUR							
City KOLHAPUR		PIN Code : 416216	Email	ID: ROH	HITCHOUG	ULE113@	GMAIL.COM
Study Center: N	I.A.						
Fees Details:				Total Fee	e ₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75571	MARATH	I-VII DSE-E	1 Cr. 4	
	HI-VIII DSE-E2 Cr. 4		3/5 75574		I-X DSE-E4		
	(Compulsory) AECC		3/6 75771		I-XII DSE-E		
	HI-XIII DSE-E127 C		3/6 75773	MARATH	I-XIV DSE-E	 128 Cr. 4	
3/6 75774 MARATI	HI-XV DSE-E129 Cr	: 4	3/6 75775	MARATH	I-XVI DSE-E	130 Cr. 4	
Optional Subjects:							
	elief. I understand	all statements made in that in the event of a					
Place:	Date:	Student's Signature (Pleasin the box shown below)	se sign strictly	/	1	s Signature s shown belo	& Seal (Please sign ow)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,						Fo	rm No. :	4 3 1	1 4 4 1
The DIRECTOR,	BOARD OF EXAM	INATIONS AND E	EVALUATIO	N,SHIVAJ	I UNIVER	RSITY,Ł	KOLHAPUR		
	e permission to p he papers mentio		at the B.A	(CBCS)	PART 3	SEM	6 (History)	exam	to be held in
PRN: 2021027389	9 College: G	opal Krishna Gho	okhale Colle	-ge,Kolha	pur. , KO	LHAPU	JR		
Personal Information	on :					Mobile	NO: 7	6 6 6 1	18139
Full Name: D	ABHADE OMKAR	UTTAM							
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	NDU (Cast: MANO	;	Physi	ical Dis	sability NO	T APPLIC	ABLE
Correspondence A	ddress:								
AT POST ISPURL	.I								
City KOLHAPUR		PIN Code: 4	16207	Email	ID: pish	war199	94@gmail.co	m	
Study Center: N	I.A.								
Fees Details:					Total Fee	e ₹: (0		(Uni.Fee. 0)
SEM V), SEM VI)									
Subject Details: 3/5 75556 HISTOR	Y-VII DSE-E61 Cr.	4	3	/5 75558	HISTORY	/-IX DSI	E-E63 Cr. 4		
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3	/6 75756	HISTORY	/-XII DS	SE-E186 Cr. 4		
3/6 75757 HISTOR	Y-XIII DSE-E187 C	r. 4	3	/6 75758	HISTORY	/-XIV D	SE-E188 Cr.	4	
3/6 75759 HISTOR	Y-XV DSE-E189 Cr	. 4	3	/6 75760	HISTORY	/-XVI D	SE-E190 Cr.	4	
Optional Subjects:									
Declaration: I here knowledge and be liable to be cancelled	elief. I understand								
Place:	Date:	Student's Signat in the box showr	•	ign strictly	/		ipal's Signatu box shown b		Please sign
Specimen Sigature:									



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



То,					Form No. :	4 3 0 4 0 8	5
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVAL	UATION,SHIVA	JI UNIVERS	SITY,KOLHAF	·UR	
	permission to p he papers mention	resent myself at the ned below.	B.A.(CBCS)	PART 3 SE	EM 6 (Econo	omics) exam to be	held in
PRN: 2020006886	6 College: G	opal Krishna Ghokhal	e College,Kolh	apur. , KOL	HAPUR		
Personal Information	on :			N	lobile NO :	7 0 2 8 8 2 1 7	1 9
Full Name: Da	ALAVI SACHIN SA	DASHIV					
Write Name in De	evanagari (Marathi):					
Gender: Male	Religion: HI	NDU Cast :	Maratha	Physic	al Disability	NOT APPLICABLE	
Correspondence A	ddress:						
NEW VADADE VA	ASAHAT DALAVI G	ALLI, RAMLING MAN	DIR , GADMUI	SHINGI OL	HAPUR		
City KOLHAPUR		PIN Code: 416119	Emai	II D: Sachi	ndalavi1010@	ngmail.com	
Study Center: N	I.A.						
Fees Details:				Total Fee	₹: 0	(Uni.Fe	e. 0)
SEM V), SEM VI)							
Subject Details : 3/5 75635 ECONO	MICS-XI DSE-E75	Cr. 4	3/6 7583	1 ECONOMI	CS-XII DSE-E	196 Cr. 4	
3/6 75832 ECONO	MICS-XIII DSE-E19	7 Cr. 4	3/6 75833	B ECONOMI	CS-XIV DSE-E	198 Cr. 4	
3/6 75834 ECONO	MICS- XV DSE-E19	99 Cr. 4	3/6 7583	5 ECONOMI	CS-XVI DSE-E	200 Cr. 4	
3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:	:						
	elief. I understand					and correct to the be r incorrect, my cand	
Place:	Date:	Student's Signature (Fin the box shown below	-	ly	Principal's Sign the box sho	gnature & Seal (Please s own below)	ign
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



То,				Form No. :	4	3 0 9 1 1 2
The DIRECTOR, BOARD OF EXAMINATIONS	AND EVALUATION	I,SHIVAJI UN	- IIVERSIT	Y,KOLHAPU	JR	
Sir,I request the permission to present my March-2024 for the papers mentioned below		CBCS) PART	T 3 SEN	/I 6 (Sociol	ogy) e	exam to be held in
PRN: 2021047552 College: Gopal Krish	na Ghokhale Colle	ge,Kolhapur.	, KOLHA	PUR		
Personal Information : Full Name: DESAI RUSHIKESH VIJAY Write Name in Devanagari (Marathi):			Mot	oile NO :	9 0 4	9 2 2 0 7 2 5
Gender: Male Religion: HINDU	Cast: LOHAF	R 1	Physical	Disability i	NOT AP	 PLICABLE
Correspondence Address:						
457E WORD VENUS CORNER SHAHUPUR S	SHAHAROAD KOLH	HPAURA				
City KOLHAPUR PIN Co	de : 416001	Email ID:	pishwar	1994@gmai	l.com	
Study Center: N.A.						
Fees Details:		Tota	al Fee ₹:	0		(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details: 3/5 75611 SOCIOLOGY-VII DSE-E66 Cr. 4	1 00	- 75040 004		VIII DOE EC	7 0 - 4	
	3/8			-VIII DSE-E67 pulsory) AEC		
3/5 75615 SOCIOLOGY-XI DSE-E70 Cr. 4 3/6 75711 SOCIOLOGY-XII DSE-E191 Cr. 4	3/6		·	-XIII DSE-E19		r
3/6 75713 SOCIOLOGY-XIV DSE-E193 Cr. 4		6 75714 SO				
3/6 75715 SOCIOLOGY-XVI DSE-E195 Cr. 4	[0/1					
Optional Subjects:		_				
Declaration: I hereby declare that all statement knowledge and belief. I understand that in the liable to be cancelled or reject.	he event of any i	nformation b	eing fou	nd false or	incorre	ct, my candidature is
Place: Date:	Signature (Please si shown below)	gn strictly		incipal's Sigr the box shov		Seal (Please sign ')
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,						Form No. :	•	4 3 0 2 8 9 2
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUATIO	N,SHIVAJ	UNIVERS	ITY,KOLHAF	PUR	
	permission to p he papers mentio		at the B.	A.(CBCS)	PART 3 S	SEM 6 (En	glish)	exam to be held in
PRN: 2018006110	College: G	opal Krishna G	hokhale Coll	ege,Kolha _l	our. , KOLŀ	HAPUR		
Personal Information	on :				М	obile NO :	7 3	5 0 1 9 1 7 0 7
Full Name: DI	EVKULE STISH SA	TAPPA						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	IDU	Cast: MAN	G	Physica	al Disability	NOT A	APPLICABLE
Correspondence A	ddress:							
AT POST VADAK	SHIWALE, HIRIJAI	Ν,						
City KOLHAPUR		PIN Code:	416207	Email I	D : devku	lesatish@gm	nail.com	1
Study Center: N	I.A.							
Fees Details:					Total Fee ₹	t: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details : 3/5 75531 ENGLIS	H-VII DSE-E11 Cr. 4	1	[;	3/6 75702	English (Co	mpulsory) AE	CC 6 C	r. 4
3/6 75731 ENGLIS	H-XII DSE-E136 Cr.	4] :	3/6 75733	ENGLISH-X	(IV DSE-E138	3 Cr. 4	
3/6 75735 ENGLIS	H-XVI DSE-E140 Cı	r. 4		_				
Optional Subjects:								
	elief. I understand							rrect to the best of my rect, my candidature is
Place:	Date:	Student's Sign		sign strictly		Principal's Sign the box sho	-	& Seal (Please sign ow)
Specimen Sigature:								



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4308985 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021043905 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 6 2 5 0 9 3 3 3 6 **DHADWAD SURAJ SAVALERAM Full Name:** Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: MAHADEV KOLI Physical Disability NOT APPLICABLE Correspondence Address: PLOT NO 41R51001092 SANEGURUJI **City KOLHAPUR PIN Code: 416012** Email ID: SSD@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,				Fo	rm No. :	4 3 0 3	1 1 6
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI UNIV	/ERSITY,I	KOLHAPUR		
	e permission to p he papers mentio	present myself at the ned below.	B.A.(CBCS) PART	3 SEM	6 (History)	exam to	be held in
PRN: 2019000577	7 College : G	opal Krishna Ghokhale(College,Kolhapur. ,	KOLHAPI	JR		
Personal Information	on :			Mobile	NO: 9	970161	7 5 2
Full Name: Di	HANGAR YUVRAJ	ANANDA					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: DI	HANGAR Ph	nysical Di	sability NO	T APPLICABL	.E
Correspondence A	ddress:						
KARNUR							
City KOLHAPUR		PIN Code: 416216	Email ID: F	RAR@GM	AIL.COM		
Study Center: N	I.A.						
Fees Details:			Total	Fee ₹:	0	(Ur	ni.Fee. 0)
SEM VI)							
Subject Details :							
3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:							
	elief. I understand	all statements made in that in the event of a					
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		ipal's Signatu box shown b	re & Seal (Plea elow)	se sign
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,						Form No. :	4 3 1 1 1 1 3	
The DIRECTOR,	BOARD OF EXAM	IINATIONS ANI	D EVALUATI	ON,SHIVA	II UNIVER:	SITY,KOLHAPUR		
	permission to phenomenation		at the B.	A.(CBCS)	PART 3 S	SEM 6 (Sociolog	y) exam to be held	in
PRN: 202102385	7 College: G	Gopal Krishna G	Shokhale Co	llege,Kolha	pur. , KOL	HAPUR		
	on : HAVALE AMRUT I evanagari (Marath				I	Mobile NO: 7	2 7 6 7 7 3 1 3 2	
							T 4 DDI 10 4 DI E	
Gender: Male	Religion: HII	טטע	Cast: Mar	atna 	Physic	cal Disability NO	OT APPLICABLE	
Correspondence A	aaress:							
ROLLIAFOR								
City KOLHAPUR		PIN Code:	410024	Email	ID: pishv	var1994@gmail.co	om	
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0	(Uni.Fee. 0)	
SEM III), SEM IV)	, SEM V), SEM VI)							
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr 4		2/4 73450	Sociolay-\	/ DSC-D31 Cr. 4		
	OGY-VII DSE-E66		<u>_</u>			GY-VIII DSE-E67 C	: 4	
	(Compulsory) AECC					GY-XII DSE-E191 (
	OGY-XIII DSE-E19					GY-XIV DSE-E193		
	OGY-XV DSE-E194					GY-XVI DSE-E195		
Optional Subjects:								
	elief. I understand	I that in the e	event of an	y information	on being		correct to the best of correct, my candidature	
Place:	Date:	Student's Sign in the box sho		sign strictl	y	Principal's Signati	ure & Seal (Please sign below)	
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No. :	4 3	0 9 4 5 8
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND EVAL	UATION,SHIVAJI	UNIVERS	SITY,KOLHAP	UR	
Sir,I request the March-2024 for the		present myself at the ned below.	e B.A.(CBCS)	PART 3	SEM 6 (Eng	ılish) exar	m to be held in
PRN : 2021047624	College: G	opal Krishna Ghokhale	e College,Kolhap	our. , KOL	HAPUR		
Personal Information	on : HUMAL SAURABH	I BHAGAVAN		N	Mobile NO :	9653	2 3 0 4 5 2
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast:	Maratha	Physic	al Disability	NOT APPLI	CABLE
Correspondence Ac	ldress:						
YENAPE							
City KARAD		PIN Code: 415111	Email II	D: SAUF	RABHDHUMA	L4267@GM	AIL.COM
Study Center: N	.A.						
Fees Details:				Total Fee	₹: 0		(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)						
Subject Details : 2/4 73410 English (Compulsory (AECC	-4) Cr. 4	3/5 75502	English (Co	ompulsory) AEC	CC 5 Cr. 4	
3/5 75531 ENGLIS	H-VII DSE-E11 Cr.	4	3/5 75532	ENGLISH-	VIII DSE-E12 (Cr. 4	
3/5 75533 ENGLIS	H-IX DSE-E13 Cr. 4	ļ	3/5 75534	ENGLISH-	X DSE-E14 Cr.	. 4	
3/5 75535 ENGLIS	H-XI DSE-E15 Cr. 4	ļ	3/6 75702	English (Co	ompulsory) AEC	CC 6 Cr. 4	
3/6 75731 ENGLIS	H-XII DSE-E136 Cr	. 4	3/6 75732	ENGLISH-	XIII DSE-E137	Cr. 4	
3/6 75733 ENGLIS	H-XIV DSE-E138 C	r. 4	3/6 75734	ENGLISH-	XV DSE-E139	Cr. 4	
3/6 75735 ENGLIS	H-XVI DSE-E140 C	r. 4					
Optional Subjects:							
	lief. I understand	all statements made i that in the event of					
Place:	Date:	Student's Signature (P			Principal's Sig		l (Please sign
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,						Form No. :	4	3 1 3 0 2 8
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUATIO	N,SHIVAJ	I UNIVER	SITY,KOLHAPU	ıR	
	permission to phe papers mention		at the B./	۱.(CBCS)	PART 3	SEM 6 (Engli	sh) ex	am to be held in
PRN: 2021037330	College: G	iopal Krishna G	hokhale Coll	ege,Kolha	pur. , KOL	_HAPUR		
Personal Information	on :				ı	Mobile NO :	7 0 8 3	3 9 7 9 9 9 5
Full Name: G	ADGIL AKASH PR	AKASH						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU	Cast: Mara	tha	Physic	cal Disability	1OT APP	LICABLE
Correspondence A	ddress:							
PACHAGAON KO	LHAPUR							
City KOLHAPUR		PIN Code:	416013	Email	ID: akas	hgadgil9995@g	mail.com	
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	[:	3/5 75533	ENGLISH-	-IX DSE-E13 Cr.	4	
3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 75731	ENGLISH	-XII DSE-E136 C	r. 4	
3/6 75732 ENGLIS	H-XIII DSE-E137 C	r. 4	[3	3/6 75733	ENGLISH	-XIV DSE-E138(Or. 4	
3/6 75734 ENGLIS	H-XV DSE-E139 Cr	. 4	[:	3/6 75735	ENGLISH	-XVI DSE-E140(Cr. 4	
Optional Subjects:								
	elief. I understand							t to the best of my t, my candidature is
Place:	Date:	Student's Sign in the box show	•	sign strictly	′	Principal's Sign in the box show		eal (Please sign
Specimen Sigature:								



To,

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



Form No.: 4 3 0 4 0 3 0

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

Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2020004098 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 4 1 0 1 9 9 8 7 1 **Full Name: GAIKWAD UMESH SUNIL** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: MAHAR Correspondence Address: ROOM NO 10 MHADA COLONY GAJANAN MAHARAJ NAGAR MANGALWAR PETH KOLHAPUR **City KOLHAPUR PIN Code: 416012** Email ID: jaykumarnarsugade@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 2/4 73487 Environmental Studies Cr. 0 3/5 75552 HINDI-VIII DSE-E7 Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75553 HINDI-IX DSE-E8 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4

3/6 75755 HINDI-XVI DSE-E135 Cr. 4

Optional Subjects:

3/6 75753 HINDI-XIV DSE-E133 Cr. 4

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.

3/6 75754 HINDI-XV DSE-E134 Cr. 4

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			
Sigature:			



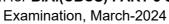
Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



То,					Form No. :	4 3 0 9 4 5 9
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJ	I UNIVERS	ITY,KOLHAPUR	
Sir,I request the March-2024 for the		resent myself at the l ned below.	B.A.(CBCS) P.	ART 3 SE	EM 6 (Economics	e) exam to be held in
PRN: 2021047628	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLI	HAPUR	
Personal Information	on : AVALI ANMOL MA	RUTI		N	lobile NO : 8 9	9 5 6 3 0 4 0 6 3
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: Hil	NDU Cast: G	GAVALI	Physic	al Disability NOT	APPLICABLE
Correspondence Ac						
163/4 PACHGAON	N					
City KOLHAPUR		PIN Code: 416013	Email I	D : GAVA	LIANMOL@GMAI	L.COM
Study Center: N	I.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM III), SEM IV),	SEM V), SEM VI)					
Subject Details: 2/3 73323 English	Compulsory- AECC	3 Cr 4	L 2/4 73/10	English Co	mpulsory (AECC-4)	Cr 4
	ogy-VI DSC-D40 Cr				ompulsory) AECC 5	
-	MICS-VII DSE-E71		3/5 75632		CS-VIII DSE-E72 CI	
	MICS-IX DSE-E73		3/5 75634		CS-X DSE-E74 Cr.	
	MICS-XI DSE-E75		3/6 75831		CS-XII DSE-E196 C	
	MICS-XIII DSE-E19		3/6 75833		CS-XIV DSE-E198	
	MICS- XV DSE-E19		3/6 75835		CS-XVI DSE-E200	
	(Compulsory) AECC		10,0			<u></u>
Optional Subjects:	· · · · · · · · · · · · · · · · · · ·					
Optional Gabjects.						
	lief. I understand					correct to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (Ple			Principal's Signatur	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





To,							l	orm N	o. :	4 3	0 4 0 2 6	
The DIRECTOR, BO	DARD OF EXAMI	NATIONS AN	ID EVALUAT	ION,	SHIVAJ	I UNIVE	ERSIT	/,KOLH	HAPUR			
Sir,I request the March-2024 for the			If at the E	3.A.(C	CBCS)	PART	3 SE	M 6 ((History)	exam	n to be h	eld in
PRN: 2020013227	College: G	opal Krishna (Ghokhale Co	ollege	e,Kolha	pur. , K	OLHA	PUR				
Personal Information	:						Mob	ile NO :	7 :	5 0 7 3	3 8 3 8 1	2
Full Name: GAV	AS OMKAR SAT	TSH										
Write Name in Deva	anagari (Marathi)):										
Gender: Male	Religion: HIN	IDU	Cast: Mar	ratha		Phy	/sical [Disabili	ity NOT	APPLIC	CABLE	
Correspondence Add	ress:											
PATIL NAGAR NER	LI TAL-KARVEEF	R DIS-KOLHA	\PUR									
City KOLHAPUR		PIN Code:	416234		Email	I D : ga	avasom	kar200)2@gma	il.com		
Study Center: N.A	۸.											
Fees Details:						Total F	ee ₹:	0			(Uni.Fee.	0)
SEM VI)												
Subject Details :												
3/6 75702 English (C	ompulsory) AECC	6 Cr. 4		3/6	75756	HISTO	RY-XII	DSE-E1	86 Cr. 4			
3/6 75757 HISTORY	-XIII DSE-E187 Cr	. 4		3/6	75759	HISTO	RY-XV	DSE-E1	89 Cr. 4			
3/6 75760 HISTORY	-XVI DSE-E190 Cr	: 4										
Optional Subjects:												
Declaration: I hereby knowledge and belief liable to be cancelled	ef. I understand	that in the	event of ar	ny inf	ormatio	on bein		•				•
Place:	Date:	Student's Sig		e sigr	strictly	/		-	Signatur shown b		(Please sign	n
Specimen Sigature:			· ·							-		



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,						Form No. :		4 3 0 3 1 7 6
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUATI	ON,SHIVA	JI UNIVERS	SITY,KOLHAP	'UR	
	permission to phe papers mention		f at the B	.A.(CBCS)	PART 3	SEM 6 (Mai	athi)	exam to be held in
PRN: 2019001895	5 College: G	iopal Krishna (Shokhale Co	llege,Kolha	pur. , KOL	HAPUR		
Personal Information	on :				ı	Mobile NO :	7 0 5	57290902
Full Name: GI	HATAGE ONKAR	SHANKAR						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU	Cast: Ling	ayat	Physic	cal Disability	NOT A	PPLICABLE
Correspondence A	ddress:							
HARIJAN GALLI,	SHANKARWADI							
City KOLHAPUR		PIN Code:	416232	Email	ID: AKSI	HAYAAPP@GI	MAIL.C	ОМ
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM VI)								
Subject Details :	/O					\// BOE E400		
3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 75771	MARATHI	XII DSE-E126	Cr. 4	
3/6 75772 MARATI	HI-XIII DSE-E127 C	r. 4		3/6 75773	MARATHI	XIV DSE-E128	Cr. 4	
3/6 75774 MARATI	HI-XV DSE-E129 Cr	. 4		3/6 75775	MARATHI	XVI DSE-E130	Cr. 4	
Optional Subjects:								
	elief. I understand							rect to the best of my rect, my candidature is
Place:	Date:	Student's Sign	•	sign strictl	y	Principal's Sig	-	& Seal (Please sign
Specimen Sigature:			· ,					<u>, , </u>
U	•	•						

(Uni.Fee. 0)



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Marathi)**Examination, March-2024



4 3 1 1 4 6 8 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021023876 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9890391895 Full Name: **GHATGE SATYAM PUNDLIK** Write Name in Devanagari (Marathi): Cast: MANG Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Correspondence Address: RAJARAMPRI KOLHAPUR **City KOLHAUR PIN Code: 416001** Email ID: AK@GMAIL.CIM

SEM	SEM III), SEM IV), SEM V), SEM VI)									
Subje	ct Details :									
2/3 73	323 English Compulsory- AECC 3 Cr. 4	2/4 73410 English Compulsory (AECC-4) Cr. 4								
3/5 75	502 English (Compulsory) AECC 5 Cr. 4	3/5 75571 MARATHI-VII DSE-E1 Cr. 4								
3/5 75	572 MARATHI-VIII DSE-E2 Cr. 4	3/5 75573 MARATHI-IX DSE-E3 Cr. 4								
3/5 75	574 MARATHI-X DSE-E4 Cr. 4	3/5 75575 MARATHI-XI DSE-E5 Cr. 4								
3/6 75	702 English (Compulsory) AECC 6 Cr. 4	3/6 75771 MARATHI-XII DSE-E126 Cr. 4								
3/6 75	772 MARATHI-XIII DSE-E127 Cr. 4	3/6 75773 MARATHI-XIV DSE-E128 Cr. 4								

Total Fee ₹:

3/6 75775 MARATHI-XVI DSE-E130 Cr. 4

Optional Subjects:

3/6 75774 MARATHI-XV DSE-E129 Cr. 4

Study Center: N.A.

Fees Details:

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			
Sigature:			



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



Form No.: 4303991 To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2020013238 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 3 8 7 9 6 3 9 4 8 Full Name: **GHORPADE AMAR SANAJ** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: NARHARI GALLI GADMUDSHINGI **City KOLHAPUR PIN Code: 416119** Email ID: Amarghorpade239@gmil.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **Optional Subjects:** Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of my

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 Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,					For	m No. :	430311	7
The DIRECTOR,	BOARD OF EXAM	INATIONS AN	D EVALUATION,S	SHIVAJI UN	IVERSITY,K	OLHAPUR		
	permission to phe papers mention		If at the B.A.(C	BCS) PAR	T 3 SEM	6 (Marathi)	exam to be	held in
PRN: 2019000582	2 College: G	iopal Krishna (Ghokhale College	,Kolhapur.	, KOLHAPUI	₹		
Personal Information	on :				Mobile N	IO: 7 0	2 0 7 6 6 0	0 4
Full Name: Gi	HORPADE SANGF	RAM SANJAY						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HI	NDU	Cast: Maratha	P	hysical Disa	ability NOT	APPLICABLE	
Correspondence A	ddress:							
NARAHAR GALLI	I, GADMUDSHING	il						
City KOLHAPUR		PIN Code:	416119	Email ID:	RAR@GMA	IL.COM		
Study Center: N	I.A.							
Fees Details:				Tota	l Fee ₹: 0		(Uni.Fe	ee. 0)
SEM VI)								
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4						
Optional Subjects:								
Declaration: I here knowledge and be liable to be cancelled	elief. I understand							
Place:	Date:	Student's Sig	nature (Please sign own below)	strictly		oal's Signature box shown be	e & Seal (Please s low)	sign
Specimen Sigature:			•					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,						Form No. :		4 3 0 3 8 1 1
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUA	TION,SHIVAJI U	JNIVERS	ITY,KOLHAF	PUR	
	permission to po he papers mentio		at the B	.A.(CBCS) PAF	RT 3 SE	M 6 (Econo	omics)	exam to be held in
PRN: 2020013583	College: G	opal Krishna (Ghokhale C	College,Kolhapu	r. , KOLH	HAPUR		
Personal Information	on :				М	obile NO :	9 3	7 0 6 9 6 0 2 0
Full Name: Go	OUD PRASAD DH	ARMENDRA						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU	Cast: Ma	ıratha	Physica	al Disability	NOTA	APPLICABLE
Correspondence Ad	ddress:							
TIPUGADE GALL	I KALAMA TARFE	THANE						
City KOLHAPUR		PIN Code:	416119	Email ID	: prasac	lgoud6020@	gmail.c	com
Study Center: N	I.A.							
Fees Details:				Ţ	otal Fee ₹	: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details : 3/5 75631 ECONO	MICS-VII DSE-E71	Cr. 4		3/5 75632 E	CONOMIC	S-VIII DSE-E	72 Cr. 4	4
3/6 75702 English	(Compulsory) AECC	6 Cr. 4						
Optional Subjects:								
	lief. I understand							rrect to the best of my rect, my candidature is
Place:	Date:	Student's Sig in the box sho	•	se sign strictly		Principal's Sig	-	& Seal (Please sign ow)
Specimen Sigature:			·					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					Form No. :	4 3 1 3 0 5 0
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJ	I UNIVERSI	TY,KOLHAPUR	
Sir,I request the March-2024 for t		resent myself at the B ned below.	.A.(CBCS) P	ART 3 SE	M 6 (Geography	y) exam to be held in
PRN: 2021036955	College: G	opal Krishna Ghokhale(College,Kolha	pur. , KOLH	IAPUR	
Personal Information	on :	TH SUNIL		M	obile NO: 9	3 7 0 7 6 2 6 3 7
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HI	NDU Cast: MA	AHAR	Physica	I I Disability NOT	APPLICABLE
Correspondence Ad	ddress:					
KASABA BAWADA	A KOLHAPUR					
City kolhapur		PIN Code: 416006	Email	I D: sidhar	thhankare@gmail	.com
Study Center: N	l.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM III), SEM IV),	SEM V), SEM VI)					
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4 73410	English Con	npulsory (AECC-4)	Cr. 4
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75546	GEOGRAPI	HY-VII DSE-E106(Or. 4
3/5 75548 GEOGR	APHY-IX DSE-E108	Cr. 4	3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRAPI	HY-XI DSE-E232 C	r. 4
3/6 75748 GEOGR	APHY-XII DSE-E23	3 Cr. 4	3/6 75749	GEOGRAPI	HY-XIII DSE-E234 (Practical) Cr. 4
3/6 75750 GEOGR	APHY-XIV DSE-E23	35 (Practical) Cr. 4				
Optional Subjects:						
	•				•	correct to the best of my
knowledge and be liable to be cancelled		that in the event of a	iny informatio	on being fo	und false or inc	orrect, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signatur in the box shown b	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,						Form No.		4 3 1 3 0 2 6
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUATION	I,SHIVAJ	II UNIVER	SITY,KOLHAF	PUR	
Sir,I request the March-2024 for t	permission to p he papers mentio		at the B.A.(0	BCS) P	ART 3 S	EM 6 (Geog	raphy)	exam to be held in
PRN: 2021037260	College: G	iopal Krishna Gh	okhale Colle	ge,Kolha	pur. , KOl	_HAPUR		
Personal Information	on :					Mobile NO :	9 0	7 5 8 3 3 5 6 1
Full Name: HA	AWALDAR VINESI	H PRAKASH						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU	Cast: Marath	а	Physic	cal Disability	NOTA	PPLICABLE
Correspondence Ad	ddress:							
PACHAGAON KO	LHAPUR							
City KOLHAPUR		PIN Code: 4	16013	Email	ID: vines	shhawaldar07	5@gmai	il.com
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details: 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/	6 75702	English (C	compulsory) AE	CC 6 Cr	. 4
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/	6 75747	GEOGRA	PHY-XI DSE-E:	232 Cr. 4	4
3/6 75748 GEOGR	APHY-XII DSE-E23	3 Cr. 4	3/	3 75749	GEOGRA	PHY-XIII DSE-	E234 (Pra	actical) Cr. 4
3/6 75750 GEOGR	APHY-XIV DSE-E23	35 (Practical) Cr.	4	_				
Optional Subjects:								
	lief. I understand	that in the ev	ent of any i	nformatio	on being	found false o	r incorr	rrect to the best of mrect, my candidature
Place:	Date:	Student's Signa in the box show	•	gn strictly	′	Principal's Si in the box she	-	& Seal (Please sign ow)
Specimen Sigature:								



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



To,							ŀ	orm No.	:	4 3 1	1 3 5 0
The DIRECTOR, I	BOARD OF EXAM	IINATIONS AN	D EVALUAT	ΓΙΟΝ,S	SHIVAJ	I UNIVE	RSIT	,KOLHA	PUR		
	permission to p he papers mentio	-	at the B.	A.(CB	CS) P	ART 3	SEM	6 (Geo	graphy)	exan	n to be held in
PRN: 2021023868	Gollege: G	Gopal Krishna (Ghokhale C	ollege	,Kolha _l	pur. , K0	OLHA	PUR			
Personal Information	on :						Mob	ile NO :	9 8	2 3 4	8 5 3 8 9
Full Name: Hi	EGADE SHRDDHA	SUNIL									
Write Name in De	vanagari (Marathi	i):									
Gender: Male	Religion: HI	NDU	Cast: MA	NG		Phys	sical [Disability	NOT A	PPLIC	ABLE
Correspondence A	ddress:										
KALABA											
City KOLHAPUR		PIN Code:	416007		Email I	I D : DIF	PATHO	DRAF70@)GMAIL	.COM	
Study Center: N	I.A.										
Fees Details:						Total Fe	ee ₹:	0			(Uni.Fee. 0)
SEM VI)											
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6	75746	GEOGR	RAPHY	-X DSE-E	231 Cr. 4	1	
3/6 75747 GEOGR	APHY-XI DSE-E232	2 Cr. 4		3/6	75748	GEOGR	RAPHY	-XII DSE-I	E233 Cr.	4	
3/6 75749 GEOGR	APHY-XIII DSE-E23	34 (Practical) Ci	r. 4	3/6	75750	GEOGR	RAPHY	-XIV DSE	-E235 (Pr	actical)	Cr. 4
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelled	elief. I understand										
Place:	Date:	Student's Sig	•	se sign	strictly	I		ncipal's S he box sh	-		(Please sign
Specimen Sigature:											
		-					-				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



То,			Form No. :	4 3 0 8 4 9 6			
The DIRECTOR, BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI UNIVEF	SITY,KOLHAPUR				
Sir,I request the permission to p March-2024 for the papers mention		.A.(CBCS) PART 3 S	SEM 6 (Economics)	exam to be held in			
PRN: 2021020126 College: C	Gopal Krishna Ghokhale(College,Kolhapur. , KO	LHAPUR				
Personal Information : Full Name: INGALE RUTURAJ	SANJAY		Mobile NO: 9 3	2 2 4 0 1 4 1 6			
Write Name in Devanagari (Marath							
Gender: Male Religion: HI	NDU Cast: Ma	aratha Phys	cal Disability NOT	APPLICABLE			
Correspondence Address:							
133/599 B WAED BALAJI PARA ,RA	AMANAND NAGAR ROAD	KOLHAPUR.					
City Kolhapur	PIN Code: 416007	Email ID: rutu	rajinggale51@gmail.d	com			
Study Center: N.A.							
Fees Details:		Total Fee	e₹: 0	(Uni.Fee. 0)			
SEM IV), SEM V), SEM VI)							
Subject Details: 2/4 73410 English Compulsory (AECC	C-4) Cr. 4	2/4 73423 Logic-T-I	Cr. 4				
3/5 75502 English (Compulsory) AECC	C 5 Cr. 4	3/5 75631 ECONOM	MICS-VII DSE-E71 Cr.	4			
3/5 75632 ECONOMICS-VIII DSE-E72	. Cr. 4	3/5 75633 ECONOM	MICS-IX DSE-E73 Cr. 4	1			
3/5 75634 ECONOMICS-X DSE-E74	Cr. 4	3/5 75635 ECONOM	MICS-XI DSE-E75 Cr. 4	1			
3/6 75831 ECONOMICS-XII DSE-E19	6 Cr. 4	3/6 75832 ECONOM	MICS-XIII DSE-E197 C	r. 4			
3/6 75833 ECONOMICS-XIV DSE-E19	98 Cr. 4	3/6 75834 ECONOM	MICS- XV DSE-E199 C	Cr. 4			
3/6 75835 ECONOMICS-XVI DSE-E20	00 Cr. 4	3/6 75702 English (Compulsory) AECC 6 (Or. 4			
Optional Subjects:							
Declaration: I hereby declare that knowledge and belief. I understand liable to be cancelled or reject.							
Place: Date:	Student's Signature (Plea in the box shown below)	se sign strictly	Principal's Signature & Seal (Please sign in the box shown below)				
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



Examination, March-2024

4 3 1 3 0 3 3 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Sociology) exam to be held in March-2024 for the papers mentioned below. PRN: 2021027744 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 5 5 2 0 3 4 8 7 2 **INGAVALE GANESH SURESH Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: KHATIK Correspondence Address: 1052 D WARD LONAR GALLI SHANIWAR PETH **City KOLHAPUR PIN Code: 416002** aabc@gmail.com Email ID: Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75611 SOCIOLOGY-VII DSE-E66 Cr. 4 3/5 75612 SOCIOLOGY-VIII DSE-E67 Cr. 4 3/5 75613 SOCIOLOGY-IX DSE-E68 Cr. 4 3/5 75614 SOCIOLOGY-X DSE-E69 Cr. 4 3/5 75615 SOCIOLOGY-XI DSE-E70 Cr. 4 3/6 75711 SOCIOLOGY-XII DSE-E191 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75712 SOCIOLOGY-XIII DSE-E192 Cr. 4 3/6 75713 SOCIOLOGY-XIV DSE-E193 Cr. 4 3/6 75714 SOCIOLOGY-XV DSE-E194 Cr. 4 3/6 75715 SOCIOLOGY-XVI DSE-E195 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No.:	4 3 0 8 6 0 2
The DIRECTOR, E	OARD OF EXAMIN	ATIONS AND EVALUA	TION,SHIVAJ	I UNIVERS	ITY,KOLHAPUR	
	permission to prene papers mentione	esent myself at the ed below.	B.A.(CBCS)	PART 3 S	SEM 6 (English) exam to be held in
PRN: 2021020913	College: Gop	oal Krishna Ghokhale(College,Kolha	pur. , KOLH	IAPUR	
Personal Informatio	n :			М	obile NO : 9	1 3 0 3 8 2 4 8 6
Full Name: INC	GOLE SAGAR RAM	ESH				
Write Name in Dev	vanagari (Marathi):					
Gender: Male	Religion: HIND	U Cast : G0	OSAVI	Physica	al Disability NO	TAPPLICABLE
Correspondence Ad	ldress:					
POLT NO 24 R S N	N 904, SARADAR PA	ARK, DEVAKAR PANAI	ND, KALAMB	A, KOLHAP	UR	
City Kolhapur		PIN Code: 416007	Email	I D: sagari	ngole2003@gma	il.com
Study Center: N	.A.					
Fees Details:				Total Fee ₹	: O	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details: 3/5 75533 ENGLISH	H-IX DSE-E13 Cr. 4		3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75731 ENGLISH	H-XII DSE-E136 Cr. 4		3/6 75732	ENGLISH-X	(III DSE-E137 Cr.	4
3/6 75733 ENGLISH	H-XIV DSE-E138 Cr. 4	1	3/6 75734	ENGLISH-X	(V DSE-E139 Cr. 4	4
3/6 75735 ENGLISH	H-XVI DSE-E140 Cr. 4	1				
Optional Subjects:						
	lief. I understand t d or reject.	hat in the event of a	iny information	on being fo	und false or in	correct to the best of my correct, my candidature is
Place:	Doto	Student's Signature (Plea n the box shown below)	se sign strictly		Principal's Signatu in the box shown I	ure & Seal (Please sign below)
Specimen Sigature:		·				



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,							Form No. :		4 3 1 3	9 1 0
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUAT	ION,SHIV	AJI UNIVI	ERSIT	Y,KOLHAF	PUR		
	permission to p he papers mentio		at the B.	A.(CBCS)	PART 3	SEM	6 (Geogr	raphy)	exam t	o be held in
PRN: 2021044521	1 College: G	Gopal Krishna (Ghokhale C	ollege,Kol	hapur. , k	KOLHA	PUR			
Personal Information	on :					Mob	ile NO :	9 5	5 1 5 3	2 1 2 1
Full Name: JA	ADHAV SANKET S	URESH								
Write Name in De	vanagari (Marathi	i):								
Gender: Male	Religion: HIN	NDU	Cast: Mai	ratha	Phy	ysical I	Disability	NOTA	PPLICAB	LE
Correspondence Ad	ddress:									
MANGALWAR PE	TH									
City KOLHAPUR		PIN Code:	416012	Ema	iil ID: S	J18474	5@GMAIL	COM		
Study Center: N	I.A.									
Fees Details:					Total F	ee ₹:	0		(L	Jni.Fee. 0)
SEM VI)										
Subject Details: 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 7574	16 GEOG	RAPHY	'-X DSE-E2	31 Cr. 4	ı	
	APHY-XI DSE-E232			3/6 7574	18 GEOG	RAPHY	'-XII DSE-E	233 Cr.	4	
3/6 75749 GEOGR	APHY-XIII DSE-E23	34 (Practical) Cr	. 4	3/6 757	50 GEOG	RAPHY	'-XIV DSE-E	E235 (Pr	actical) C	r. 4
Optional Subjects:										
Declaration: I here knowledge and be liable to be cancelled	elief. I understand									
Place:	Date:	Student's Sig	•	e sign stri	ctly		incipal's Sig	-		ease sign
Specimen Sigature:										
y		•								



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



То,				Form No. :	4 3 0 3 8 1 3
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUATION	I,SHIVAJI UNIVERS	SITY,KOLHAF	PUR
	permission to p he papers mentio	resent myself at the B.A.(oned below.	CBCS) PART 3 S	EM 6 (Socio	ology) exam to be held in
PRN: 2020013585	College: G	opal Krishna Ghokhale Colle	ge,Kolhapur. , KOLl	HAPUR	
Personal Information	on :			lobile NO :	9 1 4 6 9 7 8 0 8 6
Full Name: JA	ADHAV SUDARSH	AN MAHADEV			
Write Name in De	vanagari (Marathi):			
Gender: Male	Religion: HIN	NDU Cast: NHAVI	Physic	al Disability	NOT APPLICABLE
Correspondence A	ddress:				
SANGAWADE WA	ADI JADHAV GALL	.l			
City KOLHAPUR		PIN Code: 416119	Email ID: sudar	shanjadhav01	107@gmail.com
Study Center: N	I.A.				
Fees Details:			Total Fee	₹: 0	(Uni.Fee. 0)
SEM VI)					
Subject Details :					
3/6 75711 SOCIOL	OGY-XII DSE-E191	Cr. 4	-		
Optional Subjects:					
	elief. I understand				and correct to the best of my r incorrect, my candidature is
Place:	Date:	Student's Signature (Please sign the box shown below)	n strictly	Principal's Sig	gnature & Seal (Please sign own below)
Specimen Sigature:					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No. :		4 3 0 4 4 1 5
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	ON,SHIVAJI UN	NIVERSI	Y,KOLHAF	PUR	
	permission to pi he papers mentio	resent myself at the B	A.(CBCS) PART	7 3 SEN	1 6 (Geog	raphy)	exam to be held in
PRN: 2020013213	Gollege: G	opal Krishna Ghokhale C	ollege,Kolhapur.	, KOLH	APUR		
Personal Information	on :			Мо	bile NO :	762	2 0 6 1 5 4 5 0
Full Name: JA	AGTAP VAIBHAV F	AJU					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	IDU Cast: MA	NG I	Physical	Disability	NOT A	PPLICABLE
Correspondence A	ddress:						
TEMBALAI NAKA	, RAILWAY PHATA	AK GATE NO.2 RAJARAN	PURI KOLHAPU	JR			
City KOLHAPUR		PIN Code: 416008	Email ID:	jagtapv	aibhav2002	@gmail	.com
Study Center: N	I.A.						
Fees Details:			Tota	al Fee ₹:	0		(Uni.Fee. 0)
SEM VI)							
Subject Details :							
3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:							
	elief. I understand	all statements made in t that in the event of ar					
Place:	Date:	Student's Signature (Pleasin the box shown below)	e sign strictly		rincipal's Sig	-	& Seal (Please sign w)
Specimen Sigature:							
<u> </u>							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,							Fo	orm No.	:	4 3	1 1 5 1 6	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUAT	ION,SH	IIVAJI	UNIVER	SITY,	KOLHAI	PUR			
	permission to p he papers mentio		at the B.A	A.(CBC	S) PA	ART 3 S	EM 6	6 (Geog	graphy)	exar	m to be held ir	1
PRN: 2021023878	S College: G	Gopal Krishna (Ghokhale Co	ollege,k	Colhap	our. , KOI	LHAP	UR				
Personal Information	on :						Mobile	e NO :	7 7	5 6 8	3 2 5 1 2 4	
Full Name: JA	ALAKE HARSHVA	RDHAN HANN	IANT									
Write Name in De	evanagari (Marath										_	
Gender: Male	Religion: HII	NDU	Cast: MA	HAR		Physic	cal Di	isability	NOT	APPLIC	CABLE	
Correspondence A	ddress:											
MAHADEV COLA	NY MIRAJ											
City Kolhapur		PIN Code:	416410	E	mail II	D : hars	hvard	hanjalak	æ336@	gmail.	com	
Study Center: N	I.A.											
Fees Details:						Total Fee	:₹:	0			(Uni.Fee. 0)	
SEM VI)												
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 7	5746	GEOGRA	PHY-X	X DSE-E2	231 Cr.	4		
3/6 75747 GEOGR				3/6 7	5748	GEOGRA	.PHY-	XII DSE-E	E233 Cr	. 4		
3/6 75749 GEOGR	RAPHY-XIII DSE-E23	34 (Practical) Ci	. 4	3/6 7	5750	GEOGRA	.PHY-	XIV DSE-	E235 (P	ractical) Cr. 4	
Optional Subjects:												
Declaration: I here												
knowledge and be liable to be cancelled		that in the	event of an	y infor	matio	n being	found	l false o	or inco	rrect, i	my candidature	is
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 Sigature:												



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No. :	4 3 ′	1 1 4 1 9
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUAT	ION,SHIVAJ	II UNIVER	SITY,KOLHAPI	JR	
	permission to p he papers mentio	resent myself at the B. ned below.	A.(CBCS) P	ART 3 S	EM 6 (Geogra	aphy) exar	m to be held in
PRN: 2021047389	9 College: G	opal Krishna Ghokhale C	ollege,Kolha	pur. , KOL	HAPUR		
Personal Information	on:	ABULRAZZAK		ı	Mobile NO :	3 0 2 1 5	8 6 9 1 0
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: MU	SLIM	Physic	cal Disability	NOT APPLIC	ABLE
Correspondence A	ddress:						
RAJARAMPURI K	COLHAPUR						
City KOLHAPUR		PIN Code: 416008	Email	I D : sahil	5555jamadar@	gmail.com	
Study Center: N	I.A.						
Fees Details:				Total Fee	₹: 0		(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)						
Subject Details :			_				
2/4 73410 English	Compulsory (AECC	-4) Cr. 4	2/4 73487	Environme	ental Studies Cr.	0	
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (C	ompulsory) AEC	C 6 Cr. 4	
3/6 75746 GEOGR	RAPHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRA	PHY-XI DSE-E23	32 Cr. 4	
3/6 75748 GEOGR	RAPHY-XII DSE-E23	3 Cr. 4	3/6 75749	GEOGRA	PHY-XIII DSE-E2	234 (Practical)	Cr. 4
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	35 (Practical) Cr. 4					
Optional Subjects:							
	elief. I understand	all statements made in t that in the event of ar			found false or	incorrect, r	my candidature is
Place:	Date:	Student's Signature (Pleas in the box shown below)	e sign strictly	′	Principal's Sign in the box show		(Please sign
Specimen Sigature:							



Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination March-2024



Examination, March-2024

4309454 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044492 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 4 2 1 6 3 5 3 0 0 **JAVEER ROHAN ASHOK Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Other Correspondence Address: C WARD LAXMIPURI 876 **City KOLHAPUR** PIN Code: 416002 **Email ID:** ROHANJAVEER@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below)



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,							F	orm No	.:	4 3 1	11166
The DIRECTOR, E	BOARD OF EXAMI	NATIONS AN	D EVALUAT	ION,S	SHIVAJ	I UNIVEI	RSITY	,KOLHA	APUR		
	permission to prone papers mention		at the B.	A.(CB	CS) P	ART 3	SEM	6 (Geo	graphy)	exan	m to be held in
PRN: 2021044489	College: Go	opal Krishna (Shokhale C	ollege	,Kolha _l	pur. , KC	DLHAI	PUR			
Personal Information	on:						Mobi	le NO :	9 8	3 4 6	7 2 7 4 7
Full Name: KA	ABALE GOURAV	PANDURAN									
Write Name in De	vanagari (Marathi)	:									
Gender: Male	Religion: HIN	DU	Cast: MA	HAR		Phys	sical E	Disability	, NOT	APPLIC	ABLE
Correspondence Ac	ldress:										
SIDDHNERLI											
City KOLHAPUR		PIN Code:	416232		Email I	D : GA	URAV	′2003KA	MBLE@)GMAIL	OCM
Study Center: N	.A.										
Fees Details:						Total Fe	e ₹:	0			(Uni.Fee. 0)
SEM VI)											
Subject Details: 3/6 75702 English ((Compulsory) AECC	6 Cr. 4		3/6	75746	GEOGR	APHY	-X DSE-E	231 Cr.	4	
	APHY-XI DSE-E232					GEOGR					
3/6 75749 GEOGR	APHY-XIII DSE-E234	l (Practical) Cr	. 4	3/6	75750	GEOGR	APHY	-XIV DSE	E-E235 (F	ractical)) Cr. 4
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelle	lief. I understand										
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 Sigature:											



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



То,						Form No. :	: 4	4313911	
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND E	VALUATION	I,SHIVAJI	UNIVER	SITY,KOLHAF	PUR		
	permission to po he papers mentio		the B.A.(C	BCS) PA	ART 3 S	EM 6 (Econo	omics)	exam to be held i	n
PRN: 2021044493	College : G	opal Krishna Ghol	khale Colle	ge,Kolhar	our. , KOL	HAPUR			
Personal Information	on :				ı	Mobile NO :	9 5 2	29293972	
Full Name: KA	ADAM OMKAR MA	NOHAR							
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	IDU C	ast: DHOR		Physic	cal Disability	NOT AF	PLICABLE	
Correspondence Ad	ddress:								
MOREWADI									
City KOLHAPUR		PIN Code: 416	6012	Email I	D: KAD	AMOMKAR03	53@GM	AIL.COM	
Study Center: N	l.A.								
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)	
SEM V), SEM VI)									
Subject Details: 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5	75635	ECONOM	ICS-XI DSE-E7	'5 Cr. 4		
3/6 75831 ECONO	MICS-XII DSE-E196	Cr. 4	3/6	75832	ECONOM	ICS-XIII DSE-E	197 Cr. 4	4	
3/6 75833 ECONO	MICS-XIV DSE-E19	8 Cr. 4	3/6	75834	ECONOM	ICS- XV DSE-I	E199 Cr.	4	
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4	3/6	75702	English (C	ompulsory) AE	CC 6 Cr.	4	
Optional Subjects:									
	lief. I understand							rect to the best of r ect, my candidature	
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 Sigature:									



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)





To,					Form No. :	4 3	0 4 4 6 6
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EV	/ALUATION,SHIVAJ	II UNIVERS	ITY,KOLHAP	UR	
	permission to լ he papers mentio		the B.A.(CBCS)	PART 3 S	SEM 6 (Mai	rathi) exa	am to be held in
PRN: 2020013058	B College: G	opal Krishna Ghok	hale College,Kolha	pur. , KOLH	HAPUR		
Personal Information	on :			М	obile NO :	9067	1 5 0 2 2 5
Full Name: KA	ALAMKAR ADINA	TH ANANDA					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HI	NDU C a	ast: Maratha	Physica	al Disability	NOT APPL	ICABLE
Correspondence A	ddress:						
HANBAR GALLI							
City KOLHAPUR		PIN Code: 416	216 Email	ID: adinat	hkalamkar23	@gmail.cor	n
Study Center: N	I.A.						
Fees Details:				Total Fee ₹	t: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details: 3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:							
	elief. I understand						to the best of my my candidature is
Place:	Date:	Student's Signatur in the box shown b	e (Please sign strictly pelow)		Principal's Sig		al (Please sign
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (English) exam to be held March-2024 for the papers mentioned below. PRN: 2020013644 College: Gopal Krishna Ghokhale College, Kolhapur., KOLHAPUR Personal Information: Mobile NO: 8 4 8 5 0 4 1 7 4 9 Full Name: KALKUTKI ROHIT VASANT Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: VADAR Physical Disability NOT APPLICABLE Correspondence Address: plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com		orm No. : 4 3 0 4 0 1 1				To,
March-2024 for the papers mentioned below. PRN: 2020013644		KOLHAPUR	SHIVAJI UNIVERS	ONS AND EVALUATIO	BOARD OF EXAMINATION	The DIRECTOR,
Personal Information: Full Name: KALKUTKI ROHIT VASANT Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: VADAR Physical Disability NOT APPLICABLE Correspondence Address: plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com	eld in	l 6 (English) exam to be he	BCS) PART 3 S			
Full Name: KALKUTKI ROHIT VASANT Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: VADAR Physical Disability NOT APPLICABLE Correspondence Address: plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com		UR	,Kolhapur. , KOLŀ	Krishna Ghokhale Coll	4 College: Gopal Kri	PRN: 202001364
Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: VADAR Physical Disability NOT APPLICABLE Correspondence Address: plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com	9	e NO: 8 4 8 5 0 4 1 7 4	М		ion :	Personal Information
Gender: Male Religion: HINDU Cast: VADAR Physical Disability NOT APPLICABLE Correspondence Address: plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com				IT	ALKUTKI ROHIT VASANT	Full Name: K
Correspondence Address: plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com					evanagari (Marathi):	Write Name in De
plot no 49, Jagruti nagar kolhapur City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com		sability NOT APPLICABLE	Physica	Cast: VADA	Religion: HINDU	Gender: Male
City KOLHAPUR PIN Code: 416008 Email ID: rohitkalkutki1218@gmail.com					Address:	Correspondence A
					ti nagar kolhapur	plot no 49, Jagrut
Study Center: NA		tki1218@gmail.com	Email ID: rohitka	l Code: 416008	PIN (City KOLHAPUR
otady deficer. 1976.					N.A.	Study Center: N
Fees Details: Total Fee ₹: 0 (Uni.Fee. 0)	0)	0 (Uni.Fee.	Total Fee ₹			Fees Details:
SEM VI)						SEM VI)
Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75731 ENGLISH-XII DSE-E136 Cr. 4		SE-E136 Cr. 4	75731 ENGLISH->	4 3	ı (Compulsory) AECC 6 Cr. 4	•
3/6 75733 ENGLISH-XIV DSE-E138 Cr. 4					SH-XIV DSE-E138 Cr. 4	3/6 75733 ENGLIS
Optional Subjects:					::	Optional Subjects:
Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidatus liable to be cancelled or reject.	ture is	I false or incorrect, my candida	ormation being fo	in the event of any	elief. I understand that ir led or reject.	knowledge and be
Place: Student's Signature (Please sign strictly in the box shown below) Principal's Signature & Seal (Please sign in the box shown below)			-	•	I Dato:	Place:
Specimen Sigature:		·		,		•



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,							F	orm No.	:	4 3 1	1 2 8 0
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUAT	ION,	SHIVAJ	I UNIVE	RSIT	/,KOLHA	PUR		
	permission to pr he papers mentio		at the B.A	A.(CE	BCS) P	ART 3	SEM	6 (Geo	graphy)	exam	to be held in
PRN: 2021023730	College: G	opal Krishna (Shokhale Co	ollege	e,Kolha	pur. , K	OLHAI	PUR			
Personal Information	on :						Mobi	ile NO :	8 7	6 6 9	6 8 7 2 9
Full Name: KA	AMBALE OMKAR	PANDURNA	G								
Write Name in De	vanagari (Marathi):									_
Gender: Male	Religion: HIN	NDU	Cast: MAI	HAR		Phy	sical [Disability	NOTA	APPLICA	ABLE
Correspondence Ad	ddress:										
SIDDHANERLI											
City KOLHAAPUR	R	PIN Code:	416232		Email	I D : om	nkarj87	'29@gma	ail.com		
Study Center: N	I.A.										
Fees Details:						Total Fe	ee ₹:	0		(Uni.Fee. 0)
SEM VI)											
Subject Details: 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6	75746	GEOGF	RAPHY	-X DSE-E	231 Cr. 4	4	
3/6 75747 GEOGR	APHY-XI DSE-E232	Cr. 4		3/6	75748	GEOGF	RAPHY	-XII DSE-	E233 Cr.	. 4	
3/6 75749 GEOGR	APHY-XIII DSE-E23	4 (Practical) Cr	. 4	3/6	75750	GEOGF	RAPHY	-XIV DSE	-E235 (Pi	ractical)	Cr. 4
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelled	elief. I understand										•
Place:	Date:	Student's Sig	•	e sigr	n strictly	/		ncipal's S he box sl	_		Please sign
Specimen Sigature:			,							-	



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,						Form No	D. :	4 3 0 8 5 3 4	
The DIRECTOR, B	OARD OF EXAM	INATIONS AN	D EVALUAT	ION,SHIVA	II UNIVERS	SITY,KOLH	APUR		
Sir,I request the March-2024 for th			lf at the B	.A.(CBCS)	PART 3	SEM 6 (I	History)	exam to be held	d in
PRN: 2021020900	College: G	opal Krishna (Shokhale Co	ollege,Kolha	pur. , KOL	HAPUR			
Personal Information	1:				N	Nobile NO :	8 8	0 6 4 3 9 6 3 5	
Full Name: KA	MBLE AKASH NA	ANDKUMAR							
Write Name in Dev	anagari (Marathi):							
Gender: Male	Religion: HIN	NDU	Cast: MAI	HAR	Physic	al Disabilit	y NOTA	APPLICABLE	
Correspondence Add	dress:								
SULAKUD									
City KAGAL		PIN Code:	416216	Email	I D: akash	nkamble230	0101@gn	nail.com	
Study Center: N.	A.								
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0))
SEM VI)									
Subject Details: 3/6 75702 English (0	Compulsory) AFCC	6 Cr 4	ĺ	3/6 75756	HISTORY-	XII DSE-E18	36 Cr. 4		
	'-XIII DSE-E187 C		L	3/6 75758		XIV DSE-E1			
3/6 75759 HISTORY						XVI DSE-E1			
Optional Subjects:		<u> </u>		<u> </u>					
Optional Subjects.									
Declaration: I hereb knowledge and beli liable to be cancelled	ef. I understand					•			•
Place:	Date:	Student's Sig	•	e sign strictly	′	Principal's in the box s	•	& Seal (Please sign ow)	
Specimen Sigature:			· ·						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					FOITH NO	4 3	14149	
The DIRECTOR,	BOARD OF EXAM	NATIONS AND EVALUAT	TON,SHIVAJ	II UNIVERS	ITY,KOLHAP	·UR		
-	permission to pr he papers mentio	esent myself at the B. ned below.	A.(CBCS) P	ART 3 SE	EM 6 (Geogi	raphy) exa	ım to be held	in
PRN: 2021044539	9 College: G	opal Krishna Ghokhale C	ollege,Kolha	pur. , KOLI	HAPUR			
Personal Information	on : AMBLE DHAIRYAS	SHIL VINOD		M	lobile NO :	9096	7 4 3 6 8 8	
	evanagari (Marathi							
Gender: Male	Religion: HIN	IDU Cast : MA	HAR	Physic	al Disability	NOT APPLI	CABLE	
Correspondence A	ddress:							
City		PIN Code:	Fmail	ID. DHAII	DVV 6MII KU%		1	
Study Center: N	JΑ	Fin Code.	Email	ib. DilAli	RYASHILK9@	<u>yGIVIAIL.COI</u>	VI	
Fees Details:	4.7 \.			Total Fee	₹: 0		(Uni.Fee. 0)	
SEM IV), SEM V),	SEM VI)						,	
Subject Details : 2/4 73410 English	Compulsory (AECC-	4) Cr. 4	2/4 73423	Logic-T-II	Cr. 4			
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (Co	ompulsory) AE0	CC 6 Cr. 4		
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRAP	PHY-XI DSE-E2	232 Cr. 4		
3/6 75748 GEOGR	RAPHY-XII DSE-E233	3 Cr. 4	3/6 75749	GEOGRAP	PHY-XIII DSE-E	234 (Practica	I) Cr. 4	
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	5 (Practical) Cr. 4						
Optional Subjects:								
	elief. I understand	Il statements made in t that in the event of ar						
Place:	Date:	Student's Signature (Pleas in the box shown below)	e sign strictly		Principal's Sig		l (Please sign	
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No.	:	4 3 0 4 4 6 8
The DIRECTOR, I	BOARD OF EXAM	NATIONS AND EVAL	UATION,SHIVAJI U	INIVERSI	TY,KOLHAI	PUR	
	permission to po he papers mentio	esent myself at the ned below.	B.A.(CBCS) PAR	RT 3 SE	M 6 (Geog	ıraphy)	exam to be held in
PRN: 2020013108	College: G	opal Krishna Ghokhale	College,Kolhapur	r. , KOLH	IAPUR		
Personal Information	on :			Me	obile NO :	9 5	7 9 2 9 0 0 5 4
Full Name: KA	AMBLE NIKHIL PA	NDIT					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	IDU Cast:	MAHAR	Physica	l Disability	NOT A	PPLICABLE
Correspondence A	ddress:						
AMBEDAKAR GA	LLI , MU. PO KAL	MBE TARFE THANE I	KALMBA KOLHAPI	JR			
City KALAMBE TA	ARF THANE	PIN Code: 416007	' Email ID:	nikhlya	kamble007	@gmail.	com
Study Center: N	I.A.						
Fees Details:			To	otal Fee ₹	: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details :							
3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:							
	elief. I understand						rect to the best of my rect, my candidature is
Place:	Date:	Student's Signature (P			Principal's Si n the box sh	-	& Seal (Please sign w)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)





To,						Form No.	:	4 3 0 4 3 8 4	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUATION,	SHIVAJI UN	IVERSI	ΓΥ,ΚOLHAF	PUR		
	permission to p he papers mentio		at the B.A.(Cl	BCS) PART	3 SEM	∕I 6 (Geog	raphy)	exam to be held in	1
PRN: 2020012364	4 College: G	opal Krishna G	hokhale Colleg	e,Kolhapur.	, KOLH	APUR			
Personal Information	on :				Мо	bile NO :	8 9	5 6 1 8 1 2 0 9	
Full Name: KA	AMBLE OMKAR S	HANKAR							
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	NDU	Cast: MAHAR	F	Physical	Disability	NOT A	PPLICABLE	
Correspondence A	ddress:								
538, HARIJAN VA	SAHAT NARHARI	GALLI AMBED	KAR CHOWK (SADMUDSH	INGI				
City KOLHAPUR		PIN Code:	416119	Email ID:	kamble	omkar2000	@gmail	l.com	
Study Center: N	I.A.								
Fees Details:				Tota	al Fee ₹:	0		(Uni.Fee. 0)	
SEM V)									
Subject Details :									_
3/5 75502 English	(Compulsory) AECC	5 Cr. 4							
Optional Subjects:									
	elief. I understand							rrect to the best of m rect, my candidature	
Place:	Date:	Student's Sign in the box sho	ature (Please sig wn below)	n strictly		rincipal's Si	_	& Seal (Please sign ow)	
Specimen									_
Sigature:									_



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



То,					Form No. :	4	3 0 3 1 4 1
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUAT	TON,SHIVAJI UNI	IVERSI	TY,KOLHAP	UR	
	permission to phe papers mention	present myself at the E ned below.	3.A.(CBCS) PAR	T 3 S	EM 6 (Mar	athi) e	exam to be held in
PRN: 2019000514	4 College : G	opal Krishna Ghokhale C	ollege,Kolhapur.	, KOLH	APUR		
Personal Information	on :			Мо	bile NO :	9 1 4	5 1 1 0 2 0 1
Full Name: KA	AMBLE PRAJWAL	. BALASO					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: MA	HAR P	Physical	l Disability	NOT AP	PLICABLE
Correspondence A	ddress:						
GADMUDSHINGI							
City KOLHAPUR		PIN Code : 416119	Email ID:	R10@0	GMAIL.COM		
Study Center: N	I.A.						
Fees Details:			Tota	al Fee ₹:	0		(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details : 3/5 75571 MARAT	HI-VII DSF-F1 Cr 4		3/6 75702 Engl	lish (Con	npulsory) AFC	CC 6 Cr.	4
Optional Subjects:			<u> 6.6 1.1.2 2.1.9</u> 1		···		
- p							
	elief. I understand	all statements made in t that in the event of a					
Place:	Date:	Student's Signature (Pleas in the box shown below)	se sign strictly		rincipal's Sig		Seal (Please sign v)
Specimen Sigature:							
<u> </u>							



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (Hindi)



To,					Form No. :	4 3	0 4 3 8 6
The DIRECTOR,	BOARD OF EXAM	INATIONS AND	EVALUATION,S	SHIVAJI UNIVE	RSITY,KOLHAF	PUR	
	e permission to the papers mention		f at the B.A.(CBCS) PART	3 SEM 6 (H	lindi) exar	m to be held in
PRN: 2020012368	8 College: G	Sopal Krishna G	hokhale College	,Kolhapur. , KC	DLHAPUR		
Personal Information	on :				Mobile NO :	7 3 9 7	9 4 3 1 0 1
Full Name: KA	AMBLE ROHIT AN	ANDA					
Write Name in De	evanagari (Marathi):					
Gender: Male	Religion: HIN	NDU	Cast: MAHAR	Phys	ical Disability	NOT APPLI	CABLE
Correspondence A	ddress:						
PANCHSHIL NGA	AR GOKULSHIRGA	AON KOLHAPU	R				
City KOLHAPUR		PIN Code:	416234	Email ID: Rob	nitkamble0103@	gmail.com	
Study Center: N	I.A.						
Fees Details:				Total Fe	e ₹: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:	:						
	elief. I understand						to the best of my my candidature is
Place:	Date:	Student's Sign in the box show	ature (Please sign wn below)	strictly	Principal's Sign the box sho	-	al (Please sign
Specimen Sigature:							
	•				•		



Application Form for B.A.(CBCS) PART 3 SEM 6 (Hindi)



Examination, March-2024

To,				Form No. :	4 3 0 3 1 4 3
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUATION	N,SHIVAJI UNIVER	SITY,KOLHAPU	R
	e permission to he papers mentio	present myself at the B.Anned below.	A.(CBCS) PART (3 SEM 6 (Hin	di) exam to be held in
PRN: 201900051	5 College: G	iopal Krishna Ghokhale Colle	ge,Kolhapur. , KO	LHAPUR	
Personal Information	on :			Mobile NO :	8 7 6 6 9 9 1 1 8 8
Full Name: K	AMBLE SHUBHAN	/ SUNIL			
Write Name in De	evanagari (Marathi):			
Gender: Male	Religion: HIN	NDU Cast : MAHA	R Phys i	cal Disability N	IOT APPLICABLE
Correspondence A	ddress:				
GADMUDSHINI K	COLHAPUR				
City KOLHAPUR		PIN Code : 416119	Email ID: R10	@GMAIL.COM	
Study Center: N	I.A.				
Fees Details:			Total Fee	e₹: 0	(Uni.Fee. 0)
SEM IV)					
Subject Details : 2/4 73458 History-	VI DSC-C30 Cr. 4		_		
Optional Subjects:					
	elief. I understand	that in the event of any	information being	found false or	d correct to the best of my incorrect, my candidature is
Place:	Date:	Student's Signature (Please s in the box shown below)	gn strictly	Principal's Sign in the box show	ature & Seal (Please sign m below)
Specimen Sigature:					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



То,								Form N	lo. :	4 3	102	7 8
The DIRECTOR, I	BOARD OF EXAM	INATIONS ANI	D EVALUAT	ΓΙΟΝ,SHIV	AJI	יואט	VERSI	ΓΥ,ΚΟLΙ	HAPUR			
	permission to p he papers mentio		at the B	.A.(CBCS)	PA	ART	3 SE	M 6 (S	ociology) exa	m to b	e held in
PRN: 2021008149	9 College: G	opal Krishna G	Shokhale C	ollege,Koll	napı	ur. ,	KOLH	APUR				
Personal Information	on :						Мо	bile NO :	9	1 5 6	9 4 2	184
Full Name: KA	ANKATRE SURAJ	CHANDRAKA	NT									
Write Name in De	vanagari (Marathi):										
Gender: Male	Religion: HIN	NDU	Cast: TE	LI		P	hysical	Disabil	ity NO	ΓAPPLI	CABLE	
Correspondence A	ddress:											
KOLHAPUR												
City KOLHAPUR		PIN Code:	416005	Ema	il IC): :	surajka	nkatre1	@gmail.d	com		
Study Center: N	I.A.											
Fees Details:						Total	Fee ₹:	0			(Uni.l	Fee. 0)
SEM V), SEM VI)												
Subject Details: 3/5 75611 SOCIOL	OGY-VII DSE-E66	Cr. 4		3/6 7570)2 I	Engli	sh (Con	npulsory)	AECC 6	Cr. 4		
3/6 75711 SOCIOL	OGY-XII DSE-E191	Cr. 4		3/6 757	12 :	soc	IOLOGY	/-XIII DS	E-E192 (Cr. 4		
3/6 75713 SOCIOL	OGY-XIV DSE-E19	3 Cr. 4		3/6 757	14 :	soc	IOLOGY	/-XV DSI	E-E194 C	Cr. 4		
3/6 75715 SOCIOL	.OGY-XVI DSE-E19	5 Cr. 4										
Optional Subjects:												
Declaration: I here knowledge and be liable to be cancelled	elief. I understand											
Place:	Date:	Student's Sign in the box sho	•	se sign stri	tly			-	s Signatu shown b		l (Please	sign
Specimen Sigature:												



Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



To, Form No. : 4 3 1 4 3 4 7

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021043586 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 2 6 1 9 8 5 5 0 2 KARNURKAR ABHAY MAHESH **Full Name:** Write Name in Devanagari (Marathi): Cast: MAHAR Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Correspondence Address: City **PIN Code: Email ID:** ABHAYKARNURKAR09@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below)



Application Form for B.A.(CBCS) PART 3 SEM 6 (Hindi)



To,						Form No. :	: '	4 3 0 4	4013
The DIRECTOR,	BOARD OF EXAM	INATIONS AN	D EVALUATIO	N,SHIVAJI UI	NIVERSI	TY,KOLHAF	PUR		
	e permission to he papers mentio		elf at the B.A	A.(CBCS) PA	ART 3	SEM 6 (H	lindi)	exam to	o be held in
PRN: 2020013632	2 College: G	iopal Krishna 0	Ghokhale Colle	ge,Kolhapur.	, KOLH	IAPUR			
Personal Information	on :				Mo	obile NO :	7 6 2	2 0 1 7	4177
Full Name: Ki	ENGAR GANESH	RANDHIR							
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	NDU	Cast: Other		Physica	l Disability	NOT A	PPLICAE	3LE
Correspondence A	ddress:								
R B PATIL COLO	NY YUTH BANK M	ANG GADMUI	DSHINGI						
City KOLHAPUR		PIN Code:	416119	Email ID:	nilesh	k1289@gma	ail com		
Study Center: N	I.A.	T III Couc.	110110	Linuii ib.	111100111	<u>200@g</u>	411.00111		
Fees Details:				Tot	al Fee ₹	: 0		(1	Uni.Fee. 0)
SEM VI)						•			······································
Subject Details :									
3/6 75702 English		6 Cr. 4		_					
Optional Subjects:									
Declaration: I here knowledge and be liable to be cancelled	elief. I understand								
Place:	Date:	Student's Sigi	nature (Please si own below)	gn strictly		Principal's Sign the box sho	-	•	ease sign
Specimen Sigature:									



Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



Examination, March-2024

4314147 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (English) exam to be held in March-2024 for the papers mentioned below. PRN: 2021043679 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 4 0 4 3 1 4 0 5 6 **KESARKAR ABHISHEK BHIKAJI Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: **JALKEWADI City KOLHAPUR PIN Code:** 416013 **Email ID:** KESARKARABHISHEK17@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75531 ENGLISH-VII DSE-E11 Cr. 4 3/5 75533 ENGLISH-IX DSE-E13 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75731 ENGLISH-XII DSE-E136 Cr. 4 3/6 75732 ENGLISH-XIII DSE-E137 Cr. 4 3/6 75733 ENGLISH-XIV DSE-E138 Cr. 4 3/6 75734 ENGLISH-XV DSE-E139 Cr. 4 3/6 75735 ENGLISH-XVI DSE-E140 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below)

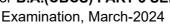
4308535

Form No.:



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)





To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Geography) exam to be held in March-2024 for the papers mentioned below. College: Gopal Krishna Ghokhale College, Kolhapur., KOLHAPUR PRN: 2021020302 Personal Information: Mobile NO: 9 9 7 5 2 6 6 3 1 1 KHAIRMODE AADINATH ASHOK **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: Kolhapur City Kolhapur PIN Code: 416002 **Email ID:** aadinathkharmode10@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75546 GEOGRAPHY-VII DSE-E106 Cr. 4 3/5 75548 GEOGRAPHY-IX DSE-E108 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75746 GEOGRAPHY-X DSE-E231 Cr. 4 3/6 75747 GEOGRAPHY-XI DSE-E232 Cr. 4 3/6 75748 GEOGRAPHY-XII DSE-E233 Cr. 4 3/6 75749 GEOGRAPHY-XIII DSE-E234 (Practical) Cr. 4 3/6 75750 GEOGRAPHY-XIV DSE-E235 (Practical) Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,						For	rm No. :	4	3 0 9 4	4 5 2	
The DIRECTOR, E	BOARD OF EXAM	INATIONS ANI	D EVALUA	TION,SHIVA	II UNIVER	SITY,K	(OLHAPU	IR			
Sir,I request the March-2024 for the			f at the	B.A.(CBCS)	PART 3	SEM	6 (Histo	ory) ex	kam to	be hel	d in
PRN: 2021044160	College: G	opal Krishna G	Shokhale	College,Kolha	pur. , KO	LHAPU	JR				
Personal Information	on : HEDAKAR AVADH	UT GAJANAN				Mobile	NO :	988	1667	2 6 0	
Write Name in De	vanagari (Marathi):									
Gender: Male	Religion: HIN	IDU	Cast: N	HAVI	Physi	cal Dis	ability N	NOT APF	PLICABL	E	
Correspondence Ac	ddress:										
SAMBHAJI NAGA	.R										
City KOLHAPUR		PIN Code:	416007	Email	ID : AVD	HUTKI	HEDKAR(@GMAIL	COM		
Study Center: N	.A.										
Fees Details:					Total Fee	e₹: (0		(Un	i.Fee. 0)
SEM IV), SEM V),	SEM VI)										
Subject Details : 2/4 73410 English	Compulsory (AECC	-4) Cr 4		2/4 73433	Marathi-V	/ DSC-C	25 Cr 4				
	VI DSC-C26 Cr. 4	.,		3/5 75502			sory) AEC	C 5 Cr 4			
·	Y-VII DSE-E61 Cr.	4		3/5 75557			SE-E62 Cr				
	Y-IX DSE-E63 Cr. 4			3/5 75560			E-E65 Cr.				
	(Compulsory) AECC			3/6 75756			E-E186 C				
	Y-XIII DSE-E187 C			3/6 75758			SE-E188 (
	Y-XV DSE-E189 Cr			3/6 75760							
3/6 75759 HISTORY-XV DSE-E189 Cr. 4 3/6 75760 HISTORY-XVI DSE-E190 Cr. 4 Optional Subjects:											
Optional Subjects.											
Declaration: I here knowledge and be liable to be cancelle	lief. I understand										
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 Sigature:											
						_			·	· <u> </u>	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,							ı	Form No	.:	4 3 0	9200
The DIRECTOR, E	BOARD OF EXAM	INATIONS AN	D EVALUAT	ΓΙΟN,	SHIVAJ	I UNIVE	RSIT	,KOLH	APUR		
Sir,I request the March-2024 for the			at the B.	A.(CE	BCS) P	ART 3	SEM	6 (Geo	graphy)	exan	n to be held in
PRN: 2021020375	College: G	opal Krishna (Ghokhale C	ollege	e,Kolha	pur. , K0	OLHA	PUR			
Personal Informatio	n :						Mob	ile NO :	9 0	4 9 2	1 2 3 3 3
Full Name: KH	IEDKAR KARAN	VISHWAS									
Write Name in Dev	vanagari (Marathi):									_
Gender: Male	Religion: HIN	NDU	Cast: NH	IAVI		Phys	sical I	Disabilit	y NOT	APPLIC	ABLE
Correspondence Ad	ldress:										
SHIVAJI PETH KC	LHAPUR										
City KOLHAPUR		PIN Code:	416012		Email I	I D : KA	RAN	KHEDKA	R333@0	GAMIL.	СОМ
Study Center: N	.A.										
Fees Details:						Total Fe	ee ₹:	0			(Uni.Fee. 0)
SEM VI)											
Subject Details : 3/6 75702 English (Compulsory) AECC	6 Cr. 4		J 3/6	75746	GEOGR	APHY	-X DSE-F	≣231 Cr.	4	
,	APHY-XI DSE-E232					GEOGR					
3/6 75749 GEOGRA	APHY-XIII DSE-E23	4 (Practical) Cı	·. 4	3/6	75750	GEOGR	APHY	-XIV DSE	E-E235 (P	ractical)	Cr. 4
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelle	lief. I understand										
Place:	Date:	Student's Sig	•	se sigr	n strictly	1		-	Signature hown bel		(Please sign
Specimen Sigature:			,							-	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No.	:	4 3 0 4 1 5 9
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJI U	- INIVERSI	TY,KOLHAF	PUR	
	permission to pi he papers mentio	resent myself at the length ned below.	B.A.(CBCS) PAR	RT 3 SEI	M 6 (Geog	raphy)	exam to be held in
PRN: 2020013539	9 College : G	opal Krishna Ghokhale	College,Kolhapui	r. , KOLH	APUR		
Personal Information	on :			Mo	bile NO :	9 1	1 2 0 7 3 8 3 0
Full Name: Ki	HOT PREM SAND	EEP					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: N	Maratha	Physica	l Disability	NOTA	PPLICABLE
Correspondence A	ddress:						
A/P KANERIADI k	KOLHAPUR						
City KOLHAPUR		PIN Code: 416234	Email ID:	premkl	not648@gm	ail.com	
Study Center: N	I.A.						
Fees Details:			To	otal Fee ₹	: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75746 G	EOGRAPH	IY-X DSE-E2	231 Cr. 4	Į.
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 (Ple in the box shown below	•		Principal's Si	_	& Seal (Please sign ow)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Geography) exam to be held in March-2024 for the papers mentioned below. PRN: 2020013216	То,				Form No. :	4 3 0 4 5 2 2
March-2024 for the papers mentioned below. PRN: 2020013216 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 0 2 2 9 8 3 8 6 8 Full Name: KHOT RUSHIKESH BAJIRAO Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE Correspondence Address: 69 badewadi taluka panhala vekhandwadi City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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)	The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	ION,SHIVAJI UNIVE	ERSITY,KOLHAF	PUR
Personal Information : Full Name: KHOT RUSHIKESH BAJIRAO Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE Correspondence Address: 69 badewadi taluka panhala vekhandwadi City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen				A.(CBCS) PART 3	SEM 6 (Geog	raphy) exam to be held in
Full Name: KHOT RUSHIKESH BAJIRAO Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE Correspondence Address: 69 badewadi taluka panhala vekhandwadi City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen	PRN: 2020013216	6 College: G	opal Krishna Ghokhale C	ollege,Kolhapur., K	OLHAPUR	
Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE Correspondence Address: 69 badewadi taluka panhala vekhandwadi City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen	Personal Information	on :			Mobile NO :	9022983868
Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE Correspondence Address: 69 badewadi taluka panhala vekhandwadi City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen	Full Name: Ki	HOT RUSHIKESH	BAJIRAO			
Correspondence Address: 69 badewadi taluka panhala vekhandwadi City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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)	Write Name in De	vanagari (Marathi):			
City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen	Gender: Male	Religion: HIN	NDU Cast: Mai	atha Phy	sical Disability	NOT APPLICABLE
City kolhapur PIN Code: 416213 Email ID: rushikeshkhot@gmail.com Study Center: N.A. Fees Details: N.A. Fees Details: Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen Principal's Signature & Seal (Please sign in the box shown below)	Correspondence A	ddress:				
Study Center: N.A. Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen	69 badewadi taluk	a panhala vekhan	dwadi			
Fees Details: Total Fee ₹: 0 (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen Total Fee ₹: 0 (Uni.Fee. 0) (Uni.Fee. 0) (Uni.Fee. 0) (Principal's Signature & Seal (Please sign in the box shown below)	City kolhapur		PIN Code: 416213	Email ID: ru:	shikeshkhot@gn	nail.com
Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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) Specimen Principal's Signature & Seal (Please sign in the box shown below)	Study Center: N	I.A.				
Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 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)	Fees Details:			Total F	ee ₹: 0	(Uni.Fee. 0)
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)	SEM VI)					
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)	-	(0) 1500				
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)	3/6 /5/02 English	(Compulsory) AECC	6 Cr. 4			
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)	Optional Subjects:					
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)						
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)						
Place: in the box shown below) in the box shown below) Specimen	knowledge and be	elief. I understand				
Specimen	Place:	Date:		e sign strictly		- · · · · · · · · · · · · · · · · · · ·
	•		,			·



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,						Form No. :	4 3 0 9 0 8 2
The DIRECTOR, E	OARD OF EXAMI	NATIONS AND	EVALUATI	ON,SHIVA	II UNIVER	SITY,KOLHAPUR	
Sir,I request the March-2024 for th			at the B	A.(CBCS)	PART 3	SEM 6 (English	n) exam to be held in
PRN: 2021047590	College: G	opal Krishna G	hokhale Co	llege,Kolha	pur. , KOl	_HAPUR	
Personal Informatio	n :					Mobile NO: 7	6 6 6 3 9 7 7 3 6
Full Name: KC	DLEKAR YASH RA	JKUMAR					
Write Name in Dev	vanagari (Marathi)	:					
Gender: Male	Religion: HIN	DU	Cast: JAIN	I	Physic	cal Disability NO	OT APPLICABLE
Correspondence Ad	dress:						
790B/38 RAIGAD	COLONY PACHGA	AON					
City KOLHAPUR		PIN Code:	416007	Email	ID: YRK	@GMAIL.COM	
Study Center: N	.A.						
Fees Details:					Total Fee	₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details : 3/5 75533 ENGLISH	H-IX DSE-E13 Cr. 4			3/6 75702	English (C	Compulsory) AECC	6 Cr. 4
3/6 75731 ENGLISH	H-XII DSE-E136 Cr.	4		3/6 75732	ENGLISH	-XIII DSE-E137 Cr.	. 4
3/6 75733 ENGLISH	H-XIV DSE-E138 Cr	. 4		3/6 75734	ENGLISH	-XV DSE-E139 Cr.	4
3/6 75735 ENGLISH	H-XVI DSE-E140 Cr	. 4					
Optional Subjects:							
	ief. I understand	that in the e	vent of an	/ information	on being	found false or ir	correct to the best of my candidature is
Place:	Date:	Student's Sign		sign strictly	y	Principal's Signat in the box shown	ture & Seal (Please sign below)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Hindi)

To,					Form No.	.: 4	30944	6
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVAL	_UATION,SHIVA	II UNIVEI	RSITY,KOLHA	APUR		
	permission to he papers mentio	present myself at ned below.	the B.A.(CBCS)	PART	3 SEM 6 (Hindi) e	xam to be	held in
PRN: 202104358 ²	1 College: G	opal Krishna Ghokha	le College,Kolha	pur. , KC	DLHAPUR			
	on : OLI SHRINIVAS SH vanagari (Marathi				Mobile NO :	9 5 2	9 3 2 2 6	8 4
Gender: Male	Religion: HIN	IDU Cast	: Maratha	Phys	sical Disability	NOT AP	PLICABLE	
Correspondence A	ddress:							
UCHGAON								
City KOLHAPUR		PIN Code: 41600	5 Email	ID: SH	RENEWASKO)LI@GMAIL	L.COM	
Study Center: N	I.A.							
Fees Details:				Total Fe	e ₹: 0		(Uni.Fee	e. 0)
SEM IV), SEM VI)								
Subject Details : 2/4 73423 Logic-T-	II Cr. 4		2/4 73487	Environr	mental Studies	Cr. 0		
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75751	HINDI-X	II DSE-E131 C	r. 4		
3/6 75752 HINDI-X	III DSE-E132 Cr. 4		3/6 75753	HINDI-X	IV DSE-E133 (Or. 4		
3/6 75754 HINDI-X	V DSE-E134 Cr. 4		3/6 75755	HINDI-X	VI DSE-E135 (Or. 4		
Optional Subjects:								
	elief. I understand	Ill statements made that in the event	of any information	on being	found false	or incorre	ct, my candi	dature is
Place:	Date:	Student's Signature (/	Principal's S in the box sl		Seal (Please si	gn
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



То,				Form No. :	4 3 0 4 4 9 1
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUATI	ON,SHIVAJI UNIVE	RSITY,KOLHAF	PUR
	permission to p he papers mentio	resent myself at the B.A ned below.	.(CBCS) PART 3	SEM 6 (Econo	omics) exam to be held in
PRN: 2020013217	7 College : G	opal Krishna Ghokhale Co	llege,Kolhapur.,K	OLHAPUR	
Personal Information	on :			Mobile NO :	7 7 9 8 6 7 2 0 2 1
Full Name: Ko	ORANE VEDANT	GUNDOPANT			
Write Name in De	vanagari (Marathi):			
Gender: Male	Religion: HIN	NDU Cast: Mara	itha Phy	sical Disability	NOT APPLICABLE
Correspondence A	ddress:				
898 C WARD RAV	/IVAR PETH KOLH	IAPUR			
City KOLHAPUR		PIN Code: 416012	Email ID: ve	dantkorane00@g	gmail.com
Study Center: N	I.A.				
Fees Details:			Total F	ee ₹: 0	(Uni.Fee. 0)
SEM VI)					
Subject Details :					
3/6 75702 English	(Compulsory) AECC	6 Cr. 4			
Optional Subjects:					
	elief. I understand				and correct to the best of my ir incorrect, my candidature is
Place:	Date:	Student's Signature (Please in the box shown below)	sign strictly	Principal's Sig	gnature & Seal (Please sign own below)
Specimen Sigature:					
- V				· ·	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,			Form No. :	4 3 0 9 2 3 8
The DIRECTOR, BOARD OF EXAM	INATIONS AND EVALUAT	ΓΙΟΝ,SHIVAJI UNIVER:	SITY,KOLHAPUR	
Sir,I request the permission to p March-2024 for the papers mention		.A.(CBCS) PART 3 S	SEM 6 (Sociology)	exam to be held in
PRN: 2021020506 College: C	Gopal Krishna Ghokhale C	college,Kolhapur. , KOL	HAPUR	
Personal Information : Full Name: KUBADE SUMIT D	II IP	1	Mobile NO: 7 6	2 0 6 5 7 0 7 2
Write Name in Devanagari (Marath				
Gender: Male Religion: HI	NDU Cast : Ma	ratha Physi o	cal Disability NOT	APPLICABLE
Correspondence Address:				
808/2, katyayani complex, jayhind c	olony, kalamba kolhapur			
City kolhapur	PIN Code : 416007	Email ID: sumi	tkubade70@gmail.c	om
Study Center: N.A.				
Fees Details:		Total Fee	₹: 0	(Uni.Fee. 0)
SEM III), SEM IV), SEM V), SEM VI)				
Subject Details: 2/3 73323 English Compulsory- AECC	3 Cr. 4	2/3 73330 Social Eco	ology-1 Cr. 4	
2/4 73459 Sociolgy-V DSC-D31 Cr. 4		3/5 75502 English (C	ompulsory) AECC 5(Cr. 4
3/5 75611 SOCIOLOGY-VII DSE-E66	Cr. 4	3/5 75612 SOCIOLO	GY-VIII DSE-E67 Cr.	4
3/5 75614 SOCIOLOGY-X DSE-E69 (Cr. 4	3/5 75615 SOCIOLO	GY-XI DSE-E70 Cr. 4	ļ
3/6 75702 English (Compulsory) AECC	C 6 Cr. 4	3/6 75711 SOCIOLO	GY-XII DSE-E191 Cr.	4
3/6 75712 SOCIOLOGY-XIII DSE-E19	2 Cr. 4	3/6 75713 SOCIOLO	GY-XIV DSE-E193 C	Cr. 4
3/6 75714 SOCIOLOGY-XV DSE-E194	1 Cr. 4	3/6 75715 SOCIOLO	GY-XVI DSE-E195 C	r. 4
Optional Subjects:				
Declaration: I hereby declare that knowledge and belief. I understand liable to be cancelled or reject.	d that in the event of a	ny information being		
Place: Date:	Student's Signature (Pleasin the box shown below)	se sign strictly	Principal's Signature in the box shown be	e & Seal (Please sign low)
Specimen Sigature:				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (History)**



To, Form No. : 4 3	3 1 4 1 5 1
The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR	
Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (History) examples March-2024 for the papers mentioned below.	am to be held in
PRN: 2021044164 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR	
Personal Information : Mobile NO : 7 0 5 8	3 5 0 6 1 3
Full Name: KULKARNI KEDAR MAHESH	
Write Name in Devanagari (Marathi):	
Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPL	ICABLE
Correspondence Address:	
GADMUDSHINGI	
City KOLHAPUR PIN Code: 416119 Email ID: KEDARKULKARNI0613@GM	AIL.COM
Study Center: N.A.	
Fees Details: Total Fee ₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)	
Subject Details :	
3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75556 HISTORY-VII DSE-E61 Cr. 4	
3/5 75557 HISTORY-VIII DSE-E62 Cr. 4 3/5 75558 HISTORY-IX DSE-E63 Cr. 4	
3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75756 HISTORY-XII DSE-E186 Cr. 4	
3/6 75757 HISTORY-XIII DSE-E187 Cr. 4 3/6 75758 HISTORY-XIV DSE-E188 Cr. 4	
3/6 75759 HISTORY-XV DSE-E189 Cr. 4 3/6 75760 HISTORY-XVI DSE-E190 Cr. 4	
Optional Subjects:	
Declaration: I hereby declare that all statements made in this application are true complete and correct knowledge and belief. I understand that in the event of any information being found false or incorrect liable to be cancelled or reject.	
Place: Student's Signature (Please sign strictly in the box shown below) Principal's Signature & Se in the box shown below)	eal (Please sign
Specimen Sigature:	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,				Form No. :	4 3 0 3 1 4 2
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUATION	N,SHIVAJI UNIVER	SITY,KOLHAPUR	
	permission to phe papers mention	present myself at the B.A. ned below.	(CBCS) PART 3	SEM 6 (Marathi)	exam to be held in
PRN: 2019000517	7 College: G	opal Krishna Ghokhale Colle	ge,Kolhapur. , KOl	LHAPUR	
Personal Information	on :			Mobile NO: 9 1	7 2 0 6 7 9 5 0
Full Name: KI	URANE ADARSH	ANANDA			
Write Name in De	vanagari (Marathi):			
Gender: Male	Religion: HIN	NDU Cast: MAHA	R Phys i	cal Disability NOT	APPLICABLE
Correspondence A	ddress:				
GADMUDSHINGI	KOLHAPUR				
City KOLHAPUR		PIN Code: 416119	Email ID: R10	@GMAIL.COM	
Study Center: N	I.A.				
Fees Details:			Total Fee	e₹: 0	(Uni.Fee. 0)
SEM VI)					
Subject Details :					
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	_		
Optional Subjects:					
	elief. I understand	all statements made in this that in the event of any			
Place:	Date:	Student's Signature (Please sin the box shown below)	gn strictly	Principal's Signature in the box shown be	
Specimen Sigature:		,			·
g					



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No. :	4 3 0 8 7 5 5	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJ	II UNIVERS	SITY,KOLHAPUR		
	permission to p he papers mentio	present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (English	n) exam to be held i	in
PRN: 2021020438	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOL	HAPUR		
Personal Information	on:	SACHIN		N	Mobile NO : 9	0 2 8 1 6 6 3 2 6	
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: N	/laratha	Physic	al Disability NC	T APPLICABLE	
Correspondence A	ddress:						
UCHGAON							
City Kolhapur		PIN Code : 416004	Email	ID: lakhe	sarthak777@gma	ail.com	
Study Center: N	I.A.						
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)	
SEM III), SEM IV),	SEM V), SEM VI)						
Subject Details :							
2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4 73410	English Co	mpulsory (AECC-4	1) Cr. 4	
3/5 75531 ENGLIS	H-VII DSE-E11 Cr. 4	4	3/5 75532	ENGLISH-	VIII DSE-E12 Cr. 4	1	
3/5 75533 ENGLIS	H-IX DSE-E13 Cr. 4		3/5 75534	ENGLISH-	X DSE-E14 Cr. 4		
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75731	ENGLISH-	XII DSE-E136 Cr.	4	
3/6 75732 ENGLIS	H-XIII DSE-E137 CI	·. 4	3/6 75733	ENGLISH-	XIV DSE-E138 Cr.	. 4	
3/6 75734 ENGLIS	H-XV DSE-E139 Cr	. 4	3/6 75735	ENGLISH-	XVI DSE-E140 Cr.	. 4	
Optional Subjects:							
	lief. I understand					correct to the best of incorrect, my candidature	
Place:	Date:	Student's Signature (Ple		у	Principal's Signat in the box shown	ure & Seal (Please sign below)	
Specimen Sigature:			,				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



To,						Form No.	:	4 3 0 9 0 8 4
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND E	VALUATION,	SHIVAJI	UNIVERS	ITY,KOLHAF	PUR	
	permission to p he papers mentio		the B.A.(CE	BCS) PA	ART 3 SE	M 6 (Geog	raphy)	exam to be held in
PRN: 202104415	1 College: G	opal Krishna Gho	khale College	e,Kolhap	our. , KOLH	HAPUR		
Personal Information	on : DHAR OMKAR ISH	IWARA			М	obile NO :	9 1	7 5 6 3 7 3 9 5
Write Name in De	evanagari (Marathi):						
Gender: Male	Religion: HII	NDU C	ast: LOHAR		Physica	al Disability	NOT A	APPLICABLE
Correspondence A	ddress:							
shivaji nagar,jhan	da,hupri,redal							
City kolhapur		PIN Code: 41	6203	Email I	D: loharo	mkar37@gn	nail.com	n
Study Center: N	I.A.							
Fees Details:					Total Fee ₹	f: 0		(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)							
Subject Details : 2/4 73410 English	Compulsory (AECC	-4) Cr. 4	3/5	75502	English (Co	mpulsory) AE	CC 5 C	er. 4
3/5 75548 GEOGR	APHY-IX DSE-E108	Cr. 4	3/6	75702	English (Co	mpulsory) AE	CC 6 C	cr. 4
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/6	75747	GEOGRAP	HY-XI DSE-E	232 Cr.	4
3/6 75748 GEOGR	RAPHY-XII DSE-E23	3 Cr. 4	3/6	75749	GEOGRAP	HY-XIII DSE-I	E234 (Pi	ractical) Cr. 4
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	35 (Practical) Cr. 4						
Optional Subjects:								
	elief. I understand							orrect to the best of my rrect, my candidature is
Place:	Date:	Student's Signatu		n strictly		Principal's Si in the box sh	_	& Seal (Please sign ow)
Specimen Sigature:								

(Uni.Fee. 0)



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (English)**Examination, March-2024



To, Form No. : 4 3 0 8 4 7 8

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

Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (English) exam to be held in March-2024 for the papers mentioned below.

PRN: 2021020116 **College:** Gopal Krishna Ghokhale College,Kolhapur. , KOLHAPUR

Personal Information:

Mobile NO: 9 0 6 7 8 0 5 3 4 4

Full Name: MAHAPURE VIRAJ PANKAJ

Write Name in Devanagari (Marathi):

Gender: Male Religion: Christian Cast: Maratha Physical Disability NOT APPLICABLE

Correspondence Address:

1186. WARD RAJARAMPURI 4 LANE .OPP GANDHI VACHANALAY, KOLHAPUR

City KOLHAPUR PIN Code: 416008 Email ID: virajmahapure655@gmail.com

Study Center: N.A.

Study Center: N.A.

SEM IV), SEM V), SEM VI)

Subject Details:

Fees Details:

 2/4
 73410
 English Compulsory (AECC-4) Cr. 4
 3/5
 75502
 English (Compulsory) AECC 5 Cr. 4

 3/5
 75531
 ENGLISH-VII DSE-E11 Cr. 4
 3/6
 75702
 English (Compulsory) AECC 6 Cr. 4

 3/6
 75731
 ENGLISH-XII DSE-E136 Cr. 4
 3/6
 75732
 ENGLISH-XIII DSE-E137 Cr. 4

 3/6
 75733
 ENGLISH-XIV DSE-E138 Cr. 4
 3/6
 75734
 ENGLISH-XV DSE-E139 Cr. 4

Total Fee ₹:

3/6 75735 ENGLISH-XVI DSE-E140 Cr. 4

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 Sigature:					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,				Form No. :	4 3 0 4 4 7 3
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUAT	TON,SHIVAJI UNIVER	SITY,KOLHAPUR	
	permission to phe papers mention	present myself at the E ned below.	3.A.(CBCS) PART 3	SEM 6 (Marathi)	exam to be held in
PRN: 2020013192	2 College: G	opal Krishna Ghokhale C	ollege,Kolhapur. , KO	LHAPUR	
Personal Information	on :			Mobile NO: 9 5	11957938
Full Name: Ma	ANE ABHISHEK A	RUN			
Write Name in De	vanagari (Marathi):			
Gender: Male	Religion: HIN	NDU Cast : Ma	ratha Phys i	cal Disability NOT	APPLICABLE
Correspondence A	ddress:				
NEAR MANE WA	DA ,JALANDAR RO	OAD HUPARI , KOLHAPU	R		
City HUPARI		PIN Code: 416003	Email ID: abhi	amane2000@gmail.o	com
Study Center: N	I.A.				
Fees Details:			Total Fee	e₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)					
Subject Details :			0 0 75700 Finallist (6	Damanda am) AFOO O (2 4
3/5 75571 MARATI	HI-VII DSE-E1 Cr. 4		3/6 75702 English (0	Compulsory) AECC 6 (Jr. 4
Optional Subjects:					
					orrect to the best of my brrect, my candidature is
liable to be cancelle	ed or reject.				
Place:	Date:	Student's Signature (Pleasin the box shown below)	e sign strictly	Principal's Signature in the box shown be	e & Seal (Please sign elow)
Specimen Sigature:					
gu.v.					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



То,					Form No. :	4311506	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJ	II UNIVERS	ITY,KOLHAPUI	₹	
	permission to p he papers mentio	resent myself at the Energy ned below.	B.A.(CBCS)	PART 3 SE	EM 6 (Sociolo	gy) exam to be held	in in
PRN: 2021027449	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLŀ	HAPUR		
Personal Information	on :			М	obile NO :	8 4 2 1 1 8 6 8 1 5	
Full Name: MA	ANE KUNAL NILK	ANTH					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: M	ANG	Physica	al Disability N	OT APPLICABLE	
Correspondence A	ddress:						
KOLHAPUR							
City Kolhapur		PIN Code: 416002	Email	ID: kunalr	nane2322@gm	ail.com	
Study Center: N	I.A.						
Fees Details:				Total Fee ₹	f: 0	(Uni.Fee. 0)	
SEM V), SEM VI)							
Subject Details :	/O	5.0.4	L o/5 75044	000101.00) /) /// DOE 500	2.4	
	(Compulsory) AECC		3/5 75611		Y-VII DSE-E66		
	OGY-VIII DSE-E67				Y-XI DSE-E70(
-	(Compulsory) AECC		3/6 75711		Y-XII DSE-E191		
	OGY-XIII DSE-E192		-		Y-XIV DSE-E193		
	.OGY-XV DSE-E194	Cr. 4	3/6 75715	SOCIOLOG	Y-XVI DSE-E19	5 Cr. 4	
Optional Subjects:							
	elief. I understand					d correct to the best of ncorrect, my candidatur	
Place:	Date:	Student's Signature (Plea in the box shown below)	-		Principal's Signa	iture & Seal (Please sign n below)	
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,				Form No. :	4 3 1 1 4 9 1
The DIRECTOR, BOARD OF EXAM	MINATIONS AND EVALUA	TION,SHIVAJI U	NIVERSI	TY,KOLHAPUR	
Sir,I request the permission to March-2024 for the papers menti		3.A.(CBCS) PAR	RT 3 SE	M 6 (Sociology)) exam to be held in
PRN: 2021027415 College: 0	Gopal Krishna Ghokhale(College,Kolhapur	. , KOLH	APUR	
Personal Information :			Мо	bile NO: 8 8	8 5 6 0 1 9 1 6 1
Full Name: MANE VISHAL SUF	RESH				
Write Name in Devanagari (Marath	ni):				
Gender: Male Religion: H	NDU Cast: NF	HAVI	Physical	Disability NOT	APPLICABLE
Correspondence Address:					
KOLHAPUR					
City Kolhapur	PIN Code: 416002	Email ID:	AMANE	E1901@GMAIL.C	ОМ
Study Center: N.A.					
Fees Details:		То	tal Fee ₹:	0	(Uni.Fee. 0)
SEM V), SEM VI)					
Subject Details: 3/5 75502 English (Compulsory) AEC	C 5 Cr. 4	3/5 75611 SC	OCIOLOGY	/-VII DSE-E66 Cr.	4
3/6 75702 English (Compulsory) AEC	C 6 Cr. 4	3/6 75711 SC	OCIOLOGY	/-XII DSE-E191 Cı	r. 4
3/6 75712 SOCIOLOGY-XIII DSE-E19	2 Cr. 4	3/6 75713 SC	OCIOLOGY	Y-XIV DSE-E193	Cr. 4
3/6 75714 SOCIOLOGY-XV DSE-E19	4 Cr. 4	3/6 75715 SC	OCIOLOGY	Y-XVI DSE-E195 (Cr. 4
Optional Subjects:					
Declaration: I hereby declare that knowledge and belief. I understan liable to be cancelled or reject.	d that in the event of a	iny information			
Place: Date:	Student's Signature (Plea in the box shown below)	se sign strictly		rincipal's Signatui n the box shown b	re & Seal (Please sign elow)
Specimen Sigature:					



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,						Form No.	:	4 3 0 6	8 2 0	
The DIRECTOR, I	BOARD OF EXAM	INATIONS ANI	D EVALUATIO	N,SHIVAJ	I UNIVER	SITY,KOLHA	.PUR			
	permission to phe papers mention		f at the B.A	۱.(CBCS)	PART 3	SEM 6 (E	nglish)	exam to	be he	ld in
PRN : 202104758	1 College : G	opal Krishna G	Shokhale Coll	ege,Kolha	pur. , KOI	_HAPUR				
Personal Information	on :					Mobile NO :	9 5	5 2 8 9	6 2 0 8	3
Full Name: Mi	ETEKAR RUSHIKI	ESH VITTHAL								
Write Name in De	vanagari (Marathi):								_
Gender: Male	Religion: HIN	NDU	Cast: DHAN	NGAR	Physic	cal Disability	NOTA	PPLICAB	LE	
Correspondence A	ddress:									
MURGUD										
City KOLHAPUR		PIN Code:	416219	Email I	ID: RUS	HIKESHMET	AKAR62	.08@GMA	JL.COM	
Study Center: N	I.A.									
Fees Details:					Total Fee	₹: 0		(U	Jni.Fee. C))
SEM VI)										
Subject Details: 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 75731	ENGLISH	-XII DSE-E136	3 Cr. 4			
3/6 75732 ENGLIS	H-XIII DSE-E137 C	r. 4	3	3/6 75733	ENGLISH	-XIV DSE-E13	88 Cr. 4			
3/6 75734 ENGLIS	H-XV DSE-E139 Cr	. 4	[3	3/6 75735	ENGLISH	-XVI DSE-E14	0 Cr. 4			
Optional Subjects:										
Declaration: I here knowledge and be liable to be cancelled	elief. I understand									
Place:	Date:	Student's Sign in the box sho	nature (Please own below)	sign strictly	′	Principal's S	-		ase sign	
Specimen Sigature:			·					-		



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,				Form No. :	4 3 1 4 1 5 0
The DIRECTOR, I	BOARD OF EXAMI	NATIONS AND EVALU	ATION,SHIVAJI UN	IIVERSITY,KOLHAPUR	
	permission to p he papers mention		B.A.(CBCS) PAF	RT 3 SEM 6 (Marathi)	exam to be held in
PRN: 2021044188	Gollege: Go	opal Krishna Ghokhale	College,Kolhapur.	, KOLHAPUR	
Personal Information	on : IRSHIKARI AJIM S	LARRID		Mobile NO: 9 1	1 2 9 8 2 0 0 1
	evanagari (Marathi)				
- Write Name in De		•			
Gender: Male	Religion: MU	SLIM Cast: N	MUSLIM I	Physical Disability NOT	APPLICABLE
Correspondence A	ddress:				
SHAHUNAGAR					
City KOLHAPUR		PIN Code: 416008	Email ID:	AJIMMIRSHIKARI@GMA	AIL.COM
Study Center: N	I.A.				
Fees Details:			Tota	al Fee ₹: 0	(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)				
	,				
Subject Details: 2/4 73410 English	Compulsory (AECC-	4) Cr. 4	3/5 75502 Eng	glish (Compulsory) AECC 5(Cr. 4
3/5 75571 MARATI	HI-VII DSE-E1 Cr. 4		3/5 75572 MA	RATHI-VIII DSE-E2 Cr. 4	
3/5 75574 MARATI	HI-X DSE-E4 Cr. 4		3/6 75702 Eng	glish (Compulsory) AECC 6 (Cr. 4
3/6 75771 MARATI	HI-XII DSE-E126 Cr.	4		RATHI-XIII DSE-E127 Cr. 4	
	HI-XIV DSE-E128 Cr	. 4	3/6 75774 MA	RATHI-XV DSE-E129 Cr. 4	
	HI-XVI DSE-E130 Cr		9,0		
Optional Subjects:		· ·			
Optional Subjects.					
	elief. I understand			are true complete and co	
Place:	Date:	Student's Signature (Ple in the box shown below		Principal's Signature in the box shown be	e & Seal (Please sign elow)
Specimen Sigature:					

4 3 1 4 1 4 8

Form No. :



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,					Form	No.:	4 3 1	4 1 4	8
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJI U	JNIVERS	SITY,KO	LHAPUR			
Sir,I request the March-2024 for t		present myself at the ned below.	B.A.(CBCS) PA	ART 3	SEM 6	(Marathi)	exam	to be	held in
PRN: 2021043824	1 College: G	opal Krishna Ghokhale	College,Kolhapui	r. , KOL	HAPUR				
Personal Information				N	lobile NC	D: 8	5 3 0 9	6 0 9	9 5
	ULLA SOHEL ILAI								
Write Name in De	vanagari (Marathi): 							
Gender: Male	Religion: MU	ISLIM Cast: N	MUSLIM	Physic	al Disab	oility NO	F APPLIC	ABLE	
Correspondence Ad	ddress:								
City		PIN Code:	Email ID:	: SOHI	ELMULL	A0995@G	MAIL.CC	OM	
Study Center: N	I.A.								
Fees Details:			To	otal Fee	₹: 0			(Uni.Fe	ee. 0)
SEM IV), SEM V),	SEM VI)								
Subject Details: 2/4 73410 English	Compulsory (AECC	-4) Cr. 4	2/4 73423 Lo	ogic-T-II	Cr. 4				
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75571 M	1ARATHI-	VII DSE-	E1 Cr. 4			
3/5 75572 MARATI	HI-VIII DSE-E2 Cr. 4	ļ	3/5 75574 M	IARATHI-	X DSE-E	4 Cr. 4			
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75771 M	1ARATHI-	XII DSE-	E126 Cr. 4			
3/6 75772 MARATI	HI-XIII DSE-E127 C	r. 4	3/6 75773 M	1ARATHI-	XIV DSE	-E128 Cr. 4	4		
3/6 75774 MARATI	HI-XV DSE-E129 Cr	: 4	3/6 75775 M	IARATHI-	XVI DSE	-E130 Cr. 4	4		
Optional Subjects:			•						
	lief. I understand	all statements made in that in the event of							
Place:	Date:	Student's Signature (Ple in the box shown below			-	ıl's Signatu ox shown b		(Please s	sign
Specimen Sigature:			·				·		



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					Form No.	:	4 3 0 4 0 1 8
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI UN	NIVERSI	TY,KOLHAF	PUR	
	permission to pi he papers mentio	resent myself at the E ned below.	.A.(CBCS) PART	Γ3 SEI	M 6 (Geog	raphy)	exam to be held in
PRN: 202000465	1 College : G	opal Krishna Ghokhale	College,Kolhapur.	, KOLH	IAPUR		
Personal Information	on :			Мс	obile NO :	9 0	1 1 8 8 5 0 2 7
Full Name: M	UNGALE SIDDHA	RTH CHANDRAKANT					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast: M	AHAR	Physica	l Disability	NOT A	PPLICABLE
Correspondence A	ddress:						
javahar colony jav	vaharnagar kolhapu	ır					
City KOLHAPUR		PIN Code: 416012	Email ID:	campu	sent7177@	gmail.co	om
Study Center: N	I.A.						
Fees Details:			Tot	al Fee ₹	: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details :							
3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:							
	elief. I understand						rrect to the best of my rect, my candidature is
Place:	Date:	Student's Signature (Plein the box shown below)	se sign strictly		Principal's Si n the box sh		& Seal (Please sign ow)
Specimen Sigature:							



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,					Form No. :	4 3 0 8 6 6 5
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI	UNIVERSI	TY,KOLHAPUR	
	permission to p he papers mentic	resent myself at the B ned below.	.A.(CBCS) PA	RT 3 SEI	И 6 (Geography	r) exam to be held in
PRN: 2021047399	9 College: G	Gopal Krishna Ghokhale(College,Kolhapı	ur. , KOLH	APUR	
Personal Information	on: AIKWADE SHOHE	EB MEHARBAN		Mo	obile NO : 9 (0 2 2 1 7 3 0 5 2
Write Name in De	evanagari (Marathi	·):				
Gender: Male	Religion: MU	JSLIM Cast: M	USLIM	Physica	I Disability NOT	APPLICABLE
Correspondence A	ddress:					
City		PIN Code:	Email ID): naikwa	deshoheb48@gn	nail.com
Study Center: N	I.A.					
Fees Details:			7	Total Fee ₹	: 0	(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)					
Subject Details: 2/4 73410 English	Compulsory (AECC	-4) Cr. 4	2/4 73423 I	Logic-T-II C	r. 4	
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75546 (GEOGRAPH	Y-VII DSE-E106 (Cr. 4
3/5 75548 GEOGR	RAPHY-IX DSE-E108	3 Cr. 4	3/6 75702 1	English (Cor	npulsory) AECC 6	Cr. 4
3/6 75746 GEOGR	RAPHY-X DSE-E231	Cr. 4	3/6 75747 (GEOGRAPH	IY-XI DSE-E232 C	r. 4
3/6 75748 GEOGR	RAPHY-XII DSE-E23	3 Cr. 4	3/6 75749	GEOGRAPH	IY-XIII DSE-E234 (Practical) Cr. 4
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	35 (Practical) Cr. 4				
Optional Subjects:	:					
	elief. I understand					correct to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	ase sign strictly		Principal's Signatur n the box shown be	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,						Form No. :	•	4 3 0 7 4 2 5
The DIRECTOR,	BOARD OF EXAM	INATIONS AND	EVALUATION,	SHIVAJI	UNIVERSI	TY,KOLHAP	UR	
	permission to p he papers mentio		t the B.A.(Cl	BCS) PA	ART 3 SE	M 6 (Econo	mics)	exam to be held in
PRN: 2021047417	7 College: G	Sopal Krishna Gh	okhale Colleg	e,Kolhap	ur. , KOLF	IAPUR		
Personal Information	on :				M	obile NO :	9 5 1	18542149
Full Name: NA	ALAVADE GAURA	V DEEPAK						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HI	NDU	Cast: Maratha	l	Physica	l Disability	NOT AF	PLICABLE
Correspondence A	ddress:							
2322 B WARD MA	ANGALWAR PETH							
City KOLHAPUR		PIN Code: 4	16012	Email II	: GAUR	AVNALAVAD	E7@GI	MAIL.COM
Study Center: N	I.A.							
Fees Details:					Total Fee ₹	: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details : 3/5 75634 ECONO	MICS-X DSE-E74(Cr. 4	3/5	75635	ECONOMIC	S-XI DSE-E75	5 Cr. 4	
3/6 75831 ECONO	MICS-XII DSE-E196	6 Cr. 4	3/6	75832	ECONOMIC	S-XIII DSE-E1	197 Cr. 4	4
3/6 75833 ECONO	MICS-XIV DSE-E19	8 Cr. 4	3/6	75834	ECONOMIC	S- XV DSE-E	199 Cr.	4
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4	3/6	75702	English (Co	mpulsory) AEC	C 6 Cr.	4
Optional Subjects:								
	elief. I understand							rect to the best of my ect, my candidature is
Place:	Date:	Student's Signation the box show		n strictly		Principal's Sig		k Seal (Please sign w)
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No. :		4 3 0 4 0 1 5
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	JATION,SHIVAJI U	NIVERSI	TY,KOLHAF	PUR	
	permission to pi he papers mentio	resent myself at the ned below.	B.A.(CBCS) PAR	T 3 SE	M 6 (Geog	raphy)	exam to be held in
PRN: 2020013543	G College: G	opal Krishna Ghokhale	College,Kolhapur	. , KOLH	IAPUR		
Personal Information	on :			M	obile NO :	7 8 8	37785556
Full Name: NA	ALAWADE ABHISI	IEK SUDHAKAR					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	IDU Cast:	Maratha	Physica	l Disability	NOT A	PPLICABLE
Correspondence A	ddress:						
NEAR PANYACHI	TAKI SASRA CHO	OUK TAMGAON					
City KOLHAPUR		PIN Code: 416234	Email ID:	abhish	eknalawade	@gmail.	com
Study Center: N	I.A.						
Fees Details:			То	tal Fee ₹	: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details :			1				
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75746 GE	EOGRAPI	HY-X DSE-E2	31 Cr. 4	
Optional Subjects:							
	elief. I understand						rect to the best of my ect, my candidature is
Place:	Date:	Student's Signature (Pl			Principal's Sign the box sho	-	& Seal (Please sign w)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No. :	4 3 1 2 9 4 6
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	ΓΙΟΝ,SHIVAJ	I UNIVERS	ITY,KOLHAPUF	₹
	permission to p he papers mention	resent myself at the B.	.A.(CBCS) P.	ART 3 SE	M 6 (Geograp	ohy) exam to be held in
PRN: 2021036980	College: C	Gopal Krishna Ghokhale C	College,Kolha	pur. , KOLH	HAPUR	
Personal Information	on :			М	obile NO :	9763999593
Full Name: NA	ALAWADE SHRIN	IVAS SADANAND				
Write Name in De	vanagari (Marath	i):				
Gender: Male	Religion: HII	NDU Cast : Ma	ıratha	Physica	al Disability N	OT APPLICABLE
Correspondence A	ddress:					
KOLHAPUR						
City kolhapur		PIN Code : 416012	Email I	ID: shriniv	asnalavade200	2@gmail.com
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (Co	mpulsory) AECC	6 Cr. 4
3/6 75746 GEOGR	RAPHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRAP	HY-XI DSE-E232	Cr. 4
3/6 75748 GEOGR	APHY-XII DSE-E23	3 Cr. 4	3/6 75749	GEOGRAP	HY-XIII DSE-E23	4 (Practical) Cr. 4
3/6 75750 GEOGR	APHY-XIV DSE-E2	35 (Practical) Cr. 4				
Optional Subjects:	1					
	elief. I understand					d correct to the best of my ncorrect, my candidature is
Place:	Date:	Student's Signature (Pleasin the box shown below)	se sign strictly		Principal's Signa in the box showr	nture & Seal (Please sign n below)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,						Form No. :	4 3	0 9 1 8 7
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND	EVALUATION,	SHIVAJI	UNIVERS	ITY,KOLHAPU	JR	
Sir,I request the March-2024 for t	permission to he papers mentio		at the B.A.(CBCS)	PART 3	SEM 6 (Histo	ory) exan	n to be held in
PRN: 202102044	1 College: G	Sopal Krishna Gh	okhale Colleg	e,Kolhar	our. , KOLI	HAPUR		
Personal Information	on :				M	lobile NO :	9 5 0 3	8 5 6 6 4 0
	AME PRAVIN RAJ							
Write Name in De	vanagari (Marath	i):						
Gender: Male	Religion: HII	NDU	Cast: MAHAR		Physic	al Disability	NOT APPLI	CABLE
Correspondence A	ddress:							
WALIWADE ROA	D WALIWADE							
City KOLHAPUR		PIN Code: 4	16119	Email I	D: pishw	ar1994@gmail	.com	
Study Center: N	I.A.							
Fees Details:					Total Fee	₹ : 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details : 3/5 75556 HISTOR	RY-VII DSE-E61 Cr.	4	1 3/5	75557	HISTORY-	/III DSE-E62 C	r 4	
	RY-IX DSE-E63 Cr. 4		3/6			ompulsory) AEC		
	RY-XII DSE-E186 Cr		3/6			KIII DSE-E187(
3/6 75758 HISTOR	Y-XIV DSE-E188 C	r. 4	3/6	75759	HISTORY-	KV DSE-E189 C	Cr. 4	
3/6 75760 HISTOR	Y-XVI DSE-E190 C	r. 4	•					
Optional Subjects:								
Declaration: I here knowledge and be liable to be cancelled	elief. I understand							
Place:	Date:	Student's Signa in the box show		n strictly		Principal's Sigr in the box show		(Please sign
Specimen Sigature:								

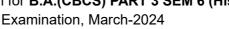
4309456

Form No.:



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (History) exam to be held in March-2024 for the papers mentioned below. PRN: 2021047521 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 3 8 5 0 1 8 9 7 0 NARAWADE NILESH YOGESH **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: MAHAR Correspondence Address: 2950 C WARD SHANIWAR PETH **City KOLHAPUR** PIN Code: 416002 **Email ID:** NILESHNARWADE02@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75556 HISTORY-VII DSE-E61 Cr. 4 3/5 75557 HISTORY-VIII DSE-E62 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75756 HISTORY-XII DSE-E186 Cr. 4 3/6 75757 HISTORY-XIII DSE-E187 Cr. 4 3/6 75758 HISTORY-XIV DSE-E188 Cr. 4 3/6 75759 HISTORY-XV DSE-E189 Cr. 4 3/6 75760 HISTORY-XVI DSE-E190 Cr. 4 **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. Principal's Signature & Seal (Please sign Student's Signature (Please sign strictly Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,						Form No. :	4	3 0 4 0	1 4
The DIRECTOR,	BOARD OF EXAM	INATIONS AN	D EVALUAT	TON,SHIVAJI (JNIVERS	SITY,KOLHAPI	JR		
	permission to p he papers mentio		at the B.	A.(CBCS) PAF	RT 3 SI	EM 6 (Geogra	aphy)	exam to	be held in
PRN: 202001378	1 College: G	iopal Krishna (Shokhale C	ollege,Kolhapu	ır. , KOL	HAPUR			
Personal Information	on :				N	Mobile NO :	9 3 7	0 6 8 3	6 1 4
Full Name: NA	AVALE SHUBHAM	SANDEEP							
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	NDU	Cast: Ma	ratha	Physic	cal Disability	NOT AP	PLICABLE	
Correspondence A	ddress:								
GIRGAON KOLH	APUR								
City KOLHAPUR		PIN Code:	416013	Email ID	: camp	ousent7177@g	mail.cor	n	
Study Center: N	I.A.								
Fees Details:				Т	otal Fee	₹: 0		(Uni.	.Fee. 0)
SEM VI)									
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6 75746 0	SEOGRAF	PHY-X DSE-E23	31 Cr. 4		
Optional Subjects:				•					
Declaration: I here knowledge and be liable to be cancelled	elief. I understand								
Place:	Date:	Student's Sig	•	e sign strictly		Principal's Signin the box show		•	e sign
Specimen Sigature:									
- J									



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



To,					Form No. :	4 3 0 9 2 4 8
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND EVA	LUATION,SHIVA	II UNIVER	SITY,KOLHAPI	UR
Sir,I request the March-2024 for the		resent myself at th ned below.	e B.A.(CBCS) F	ART 3 S	EM 6 (Geogra	aphy) exam to be held in
PRN: 2021020513	College: G	opal Krishna Ghokha	ale College,Kolha	pur. , KOL	HAPUR	
Personal Informatio	n :			ı	Mobile NO :	8 7 6 7 5 2 0 1 7 4
Full Name: PA	NHALKAR KEDA	R VINAYAK				
Write Name in Dev	vanagari (Marathi):				
Gender: Male	Religion: HIN	IDU Cas	t: Maratha	Physic	cal Disability	NOT APPLICABLE
Correspondence Ad	ldress:					
City		PIN Code:	Email	ID : panh	alkarkedar@gr	mail.com
Study Center: N	.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details: 3/5 75502 English (Compulsory) AECC	5 Cr. 4	3/5 75546	GEOGRA	PHY-VII DSE-E1	106 Cr. 4
3/6 75702 English (Compulsory) AECC	6 Cr. 4	3/6 75746	GEOGRA	PHY-X DSE-E23	31 Cr. 4
3/6 75747 GEOGRA	APHY-XI DSE-E232	Cr. 4	3/6 75748	GEOGRA	PHY-XII DSE-E2	233 Cr. 4
3/6 75749 GEOGRA	APHY-XIII DSE-E23	4 (Practical) Cr. 4	3/6 75750	GEOGRA	PHY-XIV DSE-E	235 (Practical) Cr. 4
Optional Subjects:						
	lief. I understand					nd correct to the best of my incorrect, my candidature is
Place:	Date:	Student's Signature in the box shown bel		/	Principal's Sig	nature & Seal (Please sign wn below)
Specimen Sigature:						



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



To,						F	Form No. :		4 3 1	1 1 1 8
The DIRECTOR,	BOARD OF EXAM	IINATIONS ANI	D EVALUA	TION,SHIVA	JI UNIVE	ERSITY	/,KOLHAP	PUR		
	permission to p he papers mention		at the B	.A.(CBCS)	PART 3	SEM	6 (Econo	omics)	exam	to be held in
PRN: 202102384	8 College: G	Gopal Krishna G	Shokhale (College,Kolha	apur. , K	OLHA	PUR			
Personal Information	on :					Mobi	ile NO :	9 3	707	7 7 6 3 5
Full Name: PA	ARISHWAD ATHA	RV SHRIDHAR								
Write Name in De	evanagari (Marath	i):								
Gender: Male	Religion: HII	NDU	Cast: M	aratha	Phy	/sical [Disability	NOT A	PPLICA	BLE
Correspondence A	ddress:									
SAMBHAJI NAGA	AR KOLHAPUR									
City KOLHAPUR		PIN Code:	416012	Email	ID: ath	harvpa	rishwad28	@gmail	.com	
Study Center: N	I.A.									
Fees Details:					Total F	ee ₹:	0		(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)									
Subject Details: 2/4 73467 Psychol	ogy-V DSC-D39 Cr.	. 4		3/5 75635	ECONO	OMICS-	XI DSE-E7	5 Cr. 4		
3/6 75831 ECONO	MICS-XII DSE-E196	6 Cr. 4		3/6 75832	2 ECONC	OMICS-	XIII DSE-E	197 Cr.	4	
3/6 75833 ECONO	MICS-XIV DSE-E19	98 Cr. 4		3/6 75834	ECONO	OMICS-	XV DSE-E	E199 Cr	. 4	
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4		3/6 75702	2 English	n (Comp	oulsory) AE0	CC 6 Cr	. 4	
Optional Subjects:	:									
Declaration: I here knowledge and be liable to be cancelled	elief. I understand									
Place:	Date:	Student's Sigr in the box sho	•	-	ly		ncipal's Sig	-		Please sign
Specimen Sigature:										_



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,						Form No. :	4311322
The DIRECTOR,	BOARD OF EXAM	INATIONS AN	D EVALUATI	ON,SHIVA	II UNIVEF	RSITY,KOLHAPUR	
	permission to p he papers mentic		at the B.A	ı.(CBCS) F	PART 3 S	SEM 6 (Economic	cs) exam to be held in
PRN: 2021023785	5 College: G	Gopal Krishna C	Shokhale Co	llege,Kolha	pur. , KO	LHAPUR	
Personal Information	on :					Mobile NO: 9	1 1 2 0 7 9 0 8 8
Full Name: PA	ARIT BHALCHAN	DRA BABASO					
Write Name in De	evanagari (Marathi	·):					
Gender: Male	Religion: HI	NDU	Cast: PAR	:IT	Physi	ical Disability NO	T APPLICABLE
Correspondence A	ddress:						
PATTNAKODOLI							
City KOLHAPUR		PIN Code:	416202	Email	ID: BHA	ALCHDRAPARIT6	3492@GMIL.COM
Study Center: N	I.A.						
Fees Details:					Total Fee	e ₹: 0	(Uni.Fee. 0)
SEM VI)							
Subject Details : 3/6 75831 ECONO	MICS-XII DSE-E196	6 Cr. 4		3/6 75832	ECONON	/IICS-XIII DSE-E197	Cr. 4
3/6 75833 ECONO	MICS-XIV DSE-E19	8 Cr. 4		3/6 75834	ECONON	/IICS-XV DSE-E199	9 Cr. 4
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4		3/6 75702	English (Compulsory) AECC 6	3 Cr. 4
Optional Subjects:	:						
	elief. I understand						correct to the best of my
Place:	Date:	Student's Sigi		sign strictly	у	Principal's Signate in the box shown	ure & Seal (Please sign below)
Specimen Sigature:							·



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,								orm No). :	4 3 1	4 3 4	9	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUA	ATION,	SHIVAJ	I UNIVE	RSITY	,KOLHA	APUR				
	e permission to ր he papers mentio		at the	B.A.(0	CBCS)	PART :	3 SEM	M 6 (F	History)	exam	to be	held	in
PRN: 2021047659	College: G	opal Krishna Gl	nokhale	College	∍,Kolha _l	pur. , K0	OLHAF	PUR					
Personal Information							Mobi	le NO :	7 4	1 0 1	8 4 5	2 6	
Full Name: PA	ARIT SHUBHAM S	ANJAY											
Write Name in De	vanagari (Marathi):											
Gender: Male	Religion: HIN	NDU	Cast: P	ARIT		Phys	sical D	isabilit	y NOT	APPLIC.	ABLE		
Correspondence A	ddress:												
City		PIN Code:			Email I	ID: SP	ARIT4	90@GN	//AIL.CO	М			
Study Center: N	I.A.												
Fees Details:						Total Fe	ee ₹:	0			(Uni.Fe	ee. 0)	
SEM V), SEM VI)													
Subject Details :	N VIII DOE ECA . C.	4		1 0/5	75557	LUCTOR	N/ N/III I	DOE E00	2.04				
3/5 75556 HISTOR	RY-IX DSE-E63 Cr. 4			3/5	75557	HISTOR							
	XY-XII DSE-E186 Cr			3/6	75702 75757	HISTOR			ECC 6 C	<u>/1. 4</u>			
	RY-XIV DSE-E188 C			3/6		HISTOR							
3/6 75760 HISTOR				3/0	10100	1110101	X1-7(V L	JOL-L 10	00.4				
Optional Subjects:													
Optional oubjects.													
Declaration: I here knowledge and be liable to be cancelled	elief. I understand	that in the e	vent of	any int	formatio	on being	found	d false	or inco	rrect, m	ny cand	lidatur	
Place:	Date:	Student's Signatin the box show	•	_	ı strictly	,			Signature hown be		Please	sign	
Specimen Sigature:													



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No. :	4 3 0 8 6 6 3	
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVA	II UNIVERS	ITY,KOLHAPUR		
	permission to p he papers mentio	resent myself at the B ned below.	.A.(CBCS) F	ART 3 SE	M 6 (Geograph	ny) exam to be held	in
PRN: 2021020348	8 College: G	opal Krishna Ghokhale(College,Kolha	pur. , KOLH	HAPUR		
Personal Information	on: ATIL AAKASH AF	JUN		М	obile NO : 9	3 7 3 5 3 1 1 4 3	
Write Name in De	evanagari (Marathi):					
Gender: Male	Religion: HI	NDU Cast: Ma	aratha	Physica	al Disability NC	OT APPLICABLE	
Correspondence A	ddress:						
RAJARAMPURI K	COLHPUR						
City Kolhapur		PIN Code: 416008	Email	I D : akash _l	patil26112001@	gmail.com	
Study Center: N	I.A.						
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)	
SEM IV), SEM V),	SEM VI)						
Subject Details :	Compulsory (AECC	4) Cr 4	1 0/4 72422	Logio T.II. C	>= 1		
	Compulsory (AECC			Logic-T-II (
	(Compulsory) AECC APHY-X DSE-E231		3/6 75702		mpulsory) AECC (HY-XI DSE-E232		
	RAPHY-XII DSE-E23		1			4 (Practical) Cr. 4	
	RAPHY-XIV DSE-E23		3/0 /3/43	<u>OLOGIVAI</u>	TT-XIII DOL-L20-	(i ractical) Cr. 4	
Optional Subjects:		75 (1 Tubiloui) 01. 4					
Optional Subjects.	•						
	elief. I understand					correct to the best of ncorrect, my candidature	
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signat in the box shown	ture & Seal (Please sign below)	
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



То,						Form No	. :	4 3 0 9 2 6 8	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUAT	ΓΙΟΝ,SHIVAJ	I UNIVER	SITY,KOLHA	APUR		
Sir,I request the March-2024 for t			at the B.	A.(CBCS) P	ART 3 S	SEM 6 (Eco	nomics)	exam to be he	eld in
PRN: 2021020546	College: G	opal Krishna C	Shokhale C	ollege,Kolha	pur. , KO	LHAPUR			
Personal Information	on: ATIL ABHISHEK S	SUDHAKAR				Mobile NO :	9 2 8	3 4 9 9 1 0 6	7
Write Name in De	vanagari (Marathi):							_
Gender: Male	Religion: HI	NDU	Cast: Ma	ratha	Physi	cal Disability	NOTA	PPLICABLE	
Correspondence A	ddress:								
BAICHA PUTALA	RAJARAMPURI K	OLHAPUR							
City KOLHAPUR		PIN Code:	416008	Email	ID: PISI	HWAR1994@	GMAIL.C	OM	
Study Center: N	I.A.								
Fees Details:					Total Fee	e₹: 0		(Uni.Fee. (0)
SEM III), SEM IV),	SEM V), SEM VI)								
Subject Details: 2/3 73323 English	Compulsory- AECC	3 Cr 4		2/4 73410	English C	ompulsory (A	FCC-4) Ci	- 4	
	VI DSC-C26 Cr. 4	<u> </u>				Compulsory) A			
·	MICS-VII DSE-E71	Cr 4		3/5 75632		IICS-VIII DSE		·	
	MICS-IX DSE-E73			3/5 75635		IICS-XI DSE-E			
	MICS-XII DSE-E196			3/6 75832		IICS-XIII DSE-		4	
	MICS-XIV DSE-E19			3/6 75834		IICS- XV DSE			
	MICS-XVI DSE-E20			1		Compulsory) A			
Optional Subjects:		-			<u> </u>	· 1			
Declaration: I here knowledge and be liable to be cancelled	lief. I understand								
Place:	Date:	Student's Signing the box sho		se sign strictly	/	Principal's S in the box s		k Seal (Please sign w)	
Specimen Sigature:									



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,					Form No. :	4 3 (9227
The DIRECTOR, B	OARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVA	I UNIVER	SITY,KOLHAPUI	R	
Sir,I request the March-2024 for th		present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (Marat	hi) exam	n to be held in
PRN: 2021020492	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOL	HAPUR		
Personal Information	n :			ĺ	Mobile NO :	8 7 8 8 9	9 1 9 5 7
Full Name: PA	TIL ABHIJEET SU	IRESH					
Write Name in Dev	anagari (Marathi):					
Gender: Male	Religion: HIN	NDU Cast : M	1aratha	Physic	cal Disability N	OT APPLIC	ABLE
Correspondence Ad	dress:						
shiroli. pulachi gha	tage galli.						
City kolhapur		PIN Code: 416122	Email	I D: abhir	oatil74944@gma	il.com	
Study Center: N.	A.						
Fees Details:				Total Fee	₹: 0		(Uni.Fee. 0)
SEM IV), SEM V), S	SEM VI)						
Subject Details :							
	Compulsory (AECC	-4) Cr. 4	3/5 75502		ompulsory) AECC	5 Cr. 4	
	I-VII DSE-E1 Cr. 4		3/5 75574	MARATHI	-X DSE-E4 Cr. 4		
3/6 75702 English (0	Compulsory) AECC	6 Cr. 4	3/6 75771	MARATHI	-XII DSE-E126 Cr	. 4	
3/6 75772 MARATH	I-XIII DSE-E127 C	r. 4	3/6 75773	MARATHI	-XIV DSE-E128 C	r. 4	
3/6 75774 MARATH	I-XV DSE-E129 Cr	. 4	3/6 75775	MARATHI	-XVI DSE-E130 C	r. 4	
Optional Subjects:							
	ief. I understand	all statements made in that in the event of					
Place:	Date:	Student's Signature (Ple in the box shown below)	-	′	Principal's Signa		(Please sign
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





To,						Form No. :	4 3	1 4 1 5 2
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND	EVALUATION,	SHIVAJ	I UNIVERS	ITY,KOLHAPUF	₹	
Sir,I request the March-2024 for t			at the B.A.(CBCS)	PART 3	SEM 6 (Histor	ry) exam	n to be held in
PRN: 2021044564	4 College: G	Gopal Krishna Gr	nokhale Colleg	e,Kolha _l	our. , KOLI	HAPUR		
Personal Information Full Name: PA Write Name in De	ATIL AJINKYA DIL				M	lobile NO :	7 7 0 9 1	6 5 6 8 0
Gender: Male	Religion: HII	NDU	Cast: Maratha		Physic	al Disability N	OT APPLIC	
Correspondence A	ddress:							
GADMUDSHINGI								
City KOLHAPUR		PIN Code: 4	16119	Email I	D: LAP2	335964@GMAII	L.COM	
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details : 3/5 75556 HISTOR	RY-VII DSE-E61 Cr.	4	3/5	75557	HISTORY-\	VIII DSE-E62 Cr.	4	
3/5 75558 HISTOR	RY-IX DSE-E63 Cr.	4	3/6	75702	English (Co	ompulsory) AECC	6 Cr. 4	
3/6 75756 HISTOR	RY-XII DSE-E186 CI	·. 4	3/6	75757	HISTORY-	XIII DSE-E187 C	r. 4	
3/6 75758 HISTOR	RY-XIV DSE-E188 C	cr. 4	3/6	75759	HISTORY-	XV DSE-E189 Cr	. 4	
3/6 75760 HISTOR	RY-XVI DSE-E190 C	cr. 4						
Optional Subjects:								
Declaration: I here	eby declare that	all statements r	nade in this a	ıpplicatio	on are true	e complete and	d correct t	o the best of my
knowledge and be liable to be cancelled	elief. I understand							
Place:	Date:	Student's Signa in the box show	ture (Please sig n below)	n strictly		Principal's Signa in the box showr		(Please sign
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)

To,						Form No.	:	4 3 0 3	107	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUATION,	SHIVAJI UI	NIVERSIT	Y,KOLHAF	PUR			
	permission to p he papers mentio		at the B.A.(Cl	BCS) PAR	T 3 SEM	6 (Econ	omics)	exam to	o be held	d in
PRN: 2018092668	8 College: G	opal Krishna (Ghokhale Colleg	e,Kolhapur.	, KOLHA	PUR				
Personal Information	on :				Mob	ile NO :	9 4 2	2 2 6 2	9 3 8 3	
Full Name: PA	ATIL AMRUT YALL	APPA								
Write Name in De	vanagari (Marathi	i):								
Gender: Male	Religion: HIN	NDU	Cast: Maratha		Physical I	Disability	NOTA	PPLICAB	LE	
Correspondence A	ddress:									
PKOT NO 52 SHI	VNERI NAGAR									
City KOLHAPUR		PIN Code:	416013	Email ID:	amrutya	lappapatil	@gmail.	com		
Study Center: N	I.A.									
Fees Details:				Tot	tal Fee ₹:	0		(U	Ini.Fee. 0)	,
SEM VI)										
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4								
Optional Subjects:										
Declaration: I here knowledge and be liable to be cancelled	elief. I understand									
Place:	Date:	Student's Sig	nature (Please sig own below)	n strictly		ncipal's Si the box sh	-	•	ase sign	
Specimen Sigature:			-							



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No. :	4	3 0 4 0 2 4	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVA	II UNIVERS	SITY,KOLHAP	UR		
	e permission to p the papers mention	present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (Eng	glish) ex	xam to be held in	
PRN: 2020013228	8 College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOL	HAPUR			•
Personal Information	on :			N	Mobile NO :	8 8 6 2	2063439	
Full Name: PA	ATIL ANIKET SHAI	HAJI						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU Cast: N	1aratha	Physic	cal Disability	NOT APP	LICABLE	
Correspondence A	ddress:							
PATIL NAGAR NE	RLI							
City KOLHAPUR		PIN Code: 416234	Email	I D : shaha	ajipatil@gmail	.com		
Study Center: N	I.A.							
Fees Details:				Total Fee	₹: 0		(Uni.Fee. 0)	
SEM VI)								
Subject Details :								-
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75733	ENGLISH-	XIV DSE-E138	Cr. 4		_
Optional Subjects:								
								_
	elief. I understand	all statements made in that in the event of						
Place:	Date:	Student's Signature (Ple in the box shown below		y	Principal's Sig		Seal (Please sign	
Specimen								
Sigature:								-



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Sociology)**



To,					Form No. :	4 3 1	1 4 1 5 3
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALU	IATION,SHIVA	II UNIVEF	RSITY,KOLHAF	PUR	
	permission to p he papers mention	resent myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (Socio	ology) exan	n to be held in
PRN: 2021043612	2 College: G	opal Krishna Ghokhale	College,Kolha	pur. , KC	LHAPUR		
Personal Information	on : ATIL ANIRUDDHA	SUNII			Mobile NO :	8 8 5 7 9	4 6 0 9 2
	vanagari (Marath						
Gender: Male	Religion: HII	NDU Cast: I	Holar	Phys	ical Disability	NOT APPLIC	
Correspondence A	ddress:						
City		PIN Code:	Email	ID: ASF	P@GMAIL.CON	Л	
Study Center: N	I.A.						
Fees Details:				Total Fe	e ₹ : 0		(Uni.Fee. 0)
SEM III), SEM IV)	, SEM V), SEM VI)						
Subject Details : 2/3 73380 Psychol	ogy- III DSC-D11 C	. 4	2/4 73410	English (Compulsory (AEC	CC-4) Cr. 4	
2/4 73423 Logic-T-					Compulsory) AE	•	
	OGY-VII DSE-E66	Cr. 4			OGY-VIII DSE-E		
3/5 75615 SOCIOL	OGY-XI DSE-E70	Cr. 4	3/6 75702	English (Compulsory) AE(CC 6 Cr. 4	
3/6 75711 SOCIOL	.OGY-XII DSE-E191	Cr. 4	3/6 75712	SOCIOL	OGY-XIII DSE-E	192 Cr. 4	
3/6 75713 SOCIOL	OGY-XIV DSE-E19	3 Cr. 4	3/6 75714	SOCIOL	OGY-XV DSE-E1	194 Cr. 4	
3/6 75715 SOCIOL	OGY-XVI DSE-E19	5 Cr. 4					
Optional Subjects:							
		all statements made in that in the event of					
liable to be cancelle			•		•		
Place:	Date:	Student's Signature (Pl		y	Principal's Sig	gnature & Seal own below)	(Please sign
Specimen Sigature:							



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



То,					Form No. :	4 3 1 3 0 1 5
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVAJ	II UNIVERSI	TY,KOLHAPUR	
	permission to p he papers mentio	resent myself at the E ned below.	B.A.(CBCS) P	ART 3 SE	M 6 (Economic	es) exam to be held in
PRN: 2021037232	2 College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLH	IAPUR	
Personal Information	on : ATIL PRATHAMES	Н АВНАҮ		М	obile NO : 8	3 8 0 9 8 4 5 5 1
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HI	NDU Cast : M	aratha	Physica	I I Disability NO	T APPLICABLE
Correspondence A	ddress:					
KALAMBA KOLHA	APUR					
City KOLHAPUR		PIN Code: 416007	Email	I D: patilpra	athamesh@gma	il.com
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM III), SEM IV),	, SEM V), SEM VI)					
Subject Details : 2/3 73377 Political	Science -IV DSC-D8	3 Cr. 4	2/4 73410	English Con	npulsory (AECC-4	l) Cr. 4
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75631	ECONOMIC	S-VII DSE-E71 C	ir. 4
3/5 75635 ECONO	MICS-XI DSE-E75	Cr. 4	3/6 75831	ECONOMIC	S-XII DSE-E196	Cr. 4
3/6 75832 ECONO	MICS-XIII DSE-E19	7 Cr. 4	3/6 75833	ECONOMIC	S-XIV DSE-E198	Cr. 4
3/6 75834 ECONO	MICS- XV DSE-E19	99 Cr. 4	3/6 75835	ECONOMIC	S-XVI DSE-E200	Cr. 4
3/6 75702 English	(Compulsory) AECC	6 Cr. 4				
Optional Subjects:	:					
	elief. I understand				•	correct to the best of mocorrect, my candidature is
Place:	Date:	Student's Signature (Plean in the box shown below)	-		Principal's Signati n the box shown	ure & Seal (Please sign below)
Specimen Sigature:		,				



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,				Form No. :	4 3 1 0 9 1 4
The DIRECTOR, BOAR	D OF EXAMINATIONS AN	D EVALUATION,SHI\	AJI UNIVER	SITY,KOLHAPUR	
	nission to present myself upers mentioned below.	at the B.A.(CBCS)	PART 3 S	EM 6 (Geograph	y) exam to be held in
PRN: 2021023690	College: Gopal Krishna G	Shokhale College,Ko	hapur. , KO	LHAPUR	
Personal Information :				Mobile NO: 7	6 2 0 0 5 6 3 0 6
Full Name: PATIL P	UKSHPRAJ NITIN				
Write Name in Devanag	gari (Marathi):				_
Gender: Male F	Religion: HINDU	Cast: Maratha	Physi	cal Disability NO	T APPLICABLE
Correspondence Address	:				
City	PIN Code:	Ema	ail ID: PUS	HPRAJPATILS963	@GMAI.COM
Study Center: N.A.					
Fees Details:			Total Fee	e₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)					
Subject Details : 3/5 75502 English (Comp	oulsory) AECC 5 Cr. 4	3/6 757	02 English (0	Compulsory) AECC 6	Cr. 4
3/6 75746 GEOGRAPHY	-X DSE-E231 Cr. 4	3/6 757	47 GEOGRA	PHY-XI DSE-E232(Cr. 4
3/6 75748 GEOGRAPHY	-XII DSE-E233 Cr. 4	3/6 757	49 GEOGRA	PHY-XIII DSE-E234	(Practical) Cr. 4
3/6 75750 GEOGRAPHY	-XIV DSE-E235 (Practical) Cr	·. 4			
Optional Subjects:					
	understand that in the				correct to the best of my correct, my candidature is
Place: Date	Student's Sign in the box sho	nature (Please sign stri own below)	ctly	Principal's Signatu	ıre & Seal (Please sign pelow)
Specimen Sigature:		,			,



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Marathi)**Examination, March-2024



4314356 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044387 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 5 5 2 3 6 8 8 3 1 0 **PATIL ROHIT RANGARAO Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: MALI Correspondence Address: **ISPURLI City KOLHAPUR** PIN Code: 416207 **Email ID:** ROHITPATIL4030@GMAI.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75572 MARATHI-VIII DSE-E2 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75771 MARATHI-XII DSE-E126 Cr. 4 3/6 75772 MARATHI-XIII DSE-E127 Cr. 4 3/6 75773 MARATHI-XIV DSE-E128 Cr. 4 3/6 75774 MARATHI-XV DSE-E129 Cr. 4 3/6 75775 MARATHI-XVI DSE-E130 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	4 3 0 9 4 5 1
The DIRECTOR, I	BOARD OF EXAM	NATIONS AND EVALU	JATION,SHIVA、	II UNIVERS	SITY,KOLHAPUF	
	permission to p he papers mentio	present myself at the ned below.	e B.A.(CBCS)	PART 3	SEM 6 (Histor	y) exam to be held in
PRN: 2021043546	College: G	opal Krishna Ghokhale	: College,Kolha	pur. , KOL	HAPUR	
Personal Information	on :			ı	Mobile NO : 9	0 0 9 6 7 3 1 3 1 1
Full Name: PA	ATIL SHRIDHAR AI	NIL				
Write Name in De	vanagari (Marathi	:				
Gender: Male	Religion: HIN	IDU Cast :	Maratha	Physic	cal Disability NO	OT APPLICABLE
Correspondence A	ddress:					
GIRGAON						
City KOLHAPUR		PIN Code: 416013	Email	ID: PSH	RIDHAR428@GN	//AIL.COM
Study Center: N	l.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75556	HISTORY-	-VII DSE-E61 Cr. 4	1
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75756	HISTORY-	-XII DSE-E186 Cr.	4
3/6 75757 HISTOR	Y-XIII DSE-E187 Cr	. 4	3/6 75758	HISTORY-	-XIV DSE-E188 Cr	: 4
3/6 75759 HISTOR	Y-XV DSE-E189 Cr	4	3/6 75760	HISTORY-	-XVI DSE-E190 Cr	: 4
Optional Subjects:						
	lief. I understand					correct to the best of my ncorrect, my candidature is
Place:	Date:	Student's Signature (P		у	Principal's Signatin the box shown	ture & Seal (Please sign
Specimen Sigature:			,			



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Marathi)**Examination, March-2024



To, Form No.: 4 3 1 0 9 9 9

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

Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021023802 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 5 5 9 1 0 1 3 3 0 Full Name: PATIL SHRIHARI MADHUKAR Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: KALAMBA KOLHAPURA **City KOLHAPUR PIN Code:** 416012 Email ID: patilshrihari555@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75574 MARATHI-X DSE-E4 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75771 MARATHI-XII DSE-E126 Cr. 4

Optional Subjects:

3/6 75772 MARATHI-XIII DSE-E127 Cr. 4

3/6 75774 MARATHI-XV DSE-E129 Cr. 4

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.

3/6 75773 MARATHI-XIV DSE-E128 Cr. 4

3/6 75775 MARATHI-XVI DSE-E130 Cr. 4

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			
Sigature:			



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No	.:	4 3 1 4 3 5 0
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALU	JATION,SHIVA	II UNIVER	SITY,KOLHA	\PUR	
	permission to phe papers mention	present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (E	nglish)	exam to be held in
PRN: 202104764	1 College: G	opal Krishna Ghokhale	College,Kolha	pur. , KO	LHAPUR		
Personal Information	on :				Mobile NO :	7 3 8	8 7 6 6 0 6 4 8
Full Name: PA	ATIL SUHAS MAH	ADEV					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HI	NDU Cast: I	Maratha	Physi	cal Disability	NOTA	PPLICABLE
Correspondence A	ddress:						
City		PIN Code:	Email	ID: SP3	562744@GM	1AIL.COM	I
Study Center: N	I.A.						
Fees Details:				Total Fee	₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details : 3/5 75531 ENGLIS	H-VII DSE-E11 Cr.	4	3/5 75532	ENGLISH	-VIII DSE-E12	Cr. 4	
3/5 75533 ENGLIS	H-IX DSE-E13 Cr. 4	ļ	3/5 75534	ENGLISH	-X DSE-E14	Cr. 4	
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75731	ENGLISH	-XII DSE-E13	6 Cr. 4	
	H-XIII DSE-E137 C		3/6 75733	ENGLISH	-XIV DSE-E13	38 Cr. 4	
3/6 75734 ENGLIS	:H-XV DSE-E139 Cr	. 4	3/6 75735	ENGLISH	-XVI DSE-E14	40 Cr. 4	
Optional Subjects:			1				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	elief. I understand						rect to the best of my rect, my candidature is
Place:	Date:	Student's Signature (Pl	_	у	Principal's S	-	& Seal (Please sign w)
Specimen Sigature:							



Place:

Specimen Sigature: Date:

in the box shown below)

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Marathi)**Examination, March-2024



4442316 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044162 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO · 8 5 3 0 8 7 0 4 3 2 **PATIL SURAJ TANAJI Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: **KANERI City KOLHAPUR PIN Code: 416234** SPATIL7346@GMAIL.COM Email ID: Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75571 MARATHI-VII DSE-E1 Cr. 4 3/5 75572 MARATHI-VIII DSE-E2 Cr. 4 3/5 75574 MARATHI-X DSE-E4 Cr. 4 3/5 75575 MARATHI-XI DSE-E5 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75771 MARATHI-XII DSE-E126 Cr. 4 3/6 75772 MARATHI-XIII DSE-E127 Cr. 4 3/6 75773 MARATHI-XIV DSE-E128 Cr. 4 3/6 75774 MARATHI-XV DSE-E129 Cr. 4 3/6 75775 MARATHI-XVI DSE-E130 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign

in the box shown below)



liable to be cancelled or reject.

Date:

Place:

Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4 3 0 7 4 2 8 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021047560 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 1 3 9 3 8 3 7 0 0 PATIL SUYESH RAVINDRA **Full Name:** Write Name in Devanagari (Marathi): Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE Correspondence Address: SHIROLI(PU) MALWADI **City KOLHAPUR PIN Code: 416122** Email ID: PATILSUYASH3335@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73423 Logic-T-II Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75551 HINDI-VII DSE-E6 Cr. 4 3/5 75552 HINDI-VIII DSE-E7 Cr. 4 3/5 75553 HINDI-IX DSE-E8 Cr. 4 3/5 75555 HINDI-XI DSE-E10 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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

Student's Signature (Please sign strictly

in the box shown below)

Principal's Signature & Seal (Please sign

in the box shown below)



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,					Form No. :	4 3 0 9 1 5 2
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI	UNIVERSI	TY,KOLHAPUR	
	permission to p he papers mentio	resent myself at the E ned below.	3.A.(CBCS) PA	ART 3 SE	M 6 (Economics) exam to be held in
PRN: 2021020452	2 College: G	iopal Krishna Ghokhale	College,Kolhap	ur. , KOLF	IAPUR	
Personal Information	on : ATIL UNMESH UTI	ГАМ		Me	obile NO : 9 (5 8 8 4 7 7 1 5 6
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HIN	NDU Cast: M	aratha	Physica	I Disability NOT	APPLICABLE
Correspondence Adlore galli datt, ma						
City kolhapur		PIN Code: 416234	Email II) : pishwa	ar1994@gmail.cor	n
Study Center: N	l.A.					
Fees Details:			•	Total Fee ₹	: 0	(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)					
Subject Details : 2/4 73410 English	Compulsory (AECC	-4) Cr. 4	2/4 73423	Logic-T-II C	Cr. 4	
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75631	ECONOMIC	S-VII DSE-E71 Cr.	. 4
3/5 75632 ECONO	MICS-VIII DSE-E72	Cr. 4	3/5 75635	ECONOMIC	CS-XI DSE-E75 Cr.	4
3/6 75831 ECONO	MICS-XII DSE-E196	6 Cr. 4	3/6 75832	ECONOMIC	S-XIII DSE-E197 (Cr. 4
3/6 75833 ECONO	MICS-XIV DSE-E19	8 Cr. 4	3/6 75834	ECONOMIC	S- XV DSE-E199	Cr. 4
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4	3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
Optional Subjects:						
	lief. I understand		• •		•	correct to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (Plean in the box shown below)			Principal's Signatur in the box shown be	re & Seal (Please sign elow)
Specimen Sigature:		,				



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



Examination, March-2024

4310878 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Economics) exam to be held in March-2024 for the papers mentioned below. PRN: 2021023671 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO · 8 3 2 9 3 9 4 9 6 3 PATIL VINAYAK VISHNU **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: KADALGE BUDRUK KADALGE CHANDGAD KOLHAPUR City Kolhapur PIN Code: 416507 Email ID: pishwar1994@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75631 ECONOMICS-VII DSE-E71 Cr. 4 3/5 75635 ECONOMICS-XI DSE-E75 Cr. 4 3/6 75831 ECONOMICS-XII DSE-E196 Cr. 4 3/6 75832 ECONOMICS-XIII DSE-E197 Cr. 4 3/6 75833 ECONOMICS-XIV DSE-E198 Cr. 4 3/6 75834 ECONOMICS-XV DSE-E199 Cr. 4 3/6 75835 ECONOMICS-XVI DSE-E200 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	4 3 0 9 0 8 0
The DIRECTOR, I	BOARD OF EXAMI	NATIONS AND EVALUA	TION,SHIVAJ	I UNIVER	SITY,KOLHAPUI	₹
	permission to p	present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (Histor	ry) exam to be held in
PRN: 2021047421	College: G	opal Krishna Ghokhale(College,Kolha	pur. , KOl	LHAPUR	
Personal Information	on :				Mobile NO :	9 3 7 3 1 3 3 3 4 8
Full Name: PA	ATIL VISHAL NAMI	DEV				
Write Name in De	vanagari (Marathi)):				
Gender: Male	Religion: HIN	IDU Cast : Ma	aratha	Physi	cal Disability N	OT APPLICABLE
Correspondence Ad	ddress:					
GOKUL SHIRGAC	DN					
City KOLHAPUR		PIN Code : 416234	Email I	I D : VP9	679666@GMAIL.	СОМ
Study Center: N	l.A.					
Fees Details:				Total Fee	: ₹ : 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details: 3/5 75557 HISTOR	Y-VIII DSE-E62 Cr.	4	3/5 75558	HISTORY	'-IX DSE-E63 Cr. 4	l
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75756	HISTORY	-XII DSE-E186 Cr	. 4
3/6 75757 HISTOR	Y-XIII DSE-E187 Cr	. 4	3/6 75758	HISTORY	-XIV DSE-E188 C	r. 4
3/6 75759 HISTOR	Y-XV DSE-E189 Cr.	. 4	3/6 75760	HISTORY	-XVI DSE-E190 C	r. 4
Optional Subjects:						
	lief. I understand	that in the event of a	iny informatio	on being	found false or i	d correct to the best of my ncorrect, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly	′	Principal's Signa in the box shown	iture & Seal (Please sign n below)
Specimen Sigature:						



Specimen Sigature:

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4314154 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021043643 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 6 5 7 0 4 4 8 3 2 **PAWAR ABHISHEK BALASAHEB Full Name:** Write Name in Devanagari (Marathi): Cast: VADAR Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Correspondence Address: City **PIN Code: Email ID:** ABHISHEKPAWAR2483@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75553 HINDI-IX DSE-E8 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below)



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



Examination, March-2024

4308680 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Geography) exam to be held in March-2024 for the papers mentioned below. PRN: 2021020929 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO · 9 7 6 5 6 6 2 5 3 8 PAWAR DINESH PRAKASH **Full Name:** Write Name in Devanagari (Marathi): Cast: BHANGI Gender: Male Religion: HINDU Physical Disability NOT APPLICABLE Correspondence Address: SHIVAJI VIDYAPITH KOLHAPUR City KOLHAOUR **PIN Code: 416004** POWARDINESH89@GMAIL.COM Email ID: Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM III), SEM IV), SEM V), SEM VI) Subject Details: 2/3 73323 English Compulsory- AECC 3 Cr. 4 2/4 73410 English Compulsory (AECC-4) Cr. 4 2/4 73423 Logic-T-II Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75546 GEOGRAPHY-VII DSE-E106 Cr. 4 3/5 75548 GEOGRAPHY-IX DSE-E108 Cr. 4 3/6 75746 GEOGRAPHY-X DSE-E231 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75747 GEOGRAPHY-XI DSE-E232 Cr. 4 3/6 75748 GEOGRAPHY-XII DSE-E233 Cr. 4 3/6 75749 GEOGRAPHY-XIII DSE-E234 (Practical) Cr. 4 3/6 75750 GEOGRAPHY-XIV DSE-E235 (Practical) Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					Form No. :	4 3 0 4 0 0 3
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	ΓΙΟΝ,SHIVAJ	I UNIVERS	ITY,KOLHAPUR	
	permission to p he papers mentic	resent myself at the B.	A.(CBCS) P	ART 3 SE	M 6 (Geograph	ny) exam to be held in
PRN: 2020013517	7 College: G	iopal Krishna Ghokhale C	college,Kolha	pur. , KOLH	HAPUR	
Personal Information	on :			М	obile NO: 7	6 2 0 8 3 9 2 2 4
Full Name: PI	MPALE KRUSHNA	AT SANJAY				
Write Name in De	evanagari (Marathi):				
Gender: Male	Religion: HI	NDU Cast : Ma	ratha	Physica	al Disability NC	OT APPLICABLE
Correspondence A	ddress:					
Datta Colony Tala	v Road Kaneri Kol	hapur				
City KOLHAPUR		PIN Code : 416234	Email	I D: campu	ısnet7177@gma	il.com
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details: 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (Co	mpulsory) AECC 6	6 Cr. 4
	RAPHY-X DSE-E231		3/6 75747		HY-XI DSE-E232	
3/6 75748 GEOGR	RAPHY-XII DSE-E23	3 Cr. 4	3/6 75749	GEOGRAP	HY-XIII DSE-E234	(Practical) Cr. 4
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	35 (Practical) Cr. 4				
Optional Subjects:	:					
	elief. I understand					correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Pleasin the box shown below)	se sign strictly		Principal's Signat in the box shown	ure & Seal (Please sign below)
Specimen Sigature:						

4314145

Form No.:



To,

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



Examination, March-2024

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

Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044178 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 3 8 7 6 4 6 5 9 7 **POWAR PRATHMESH PRAKASH Full Name:** Write Name in Devanagari (Marathi): Cast: CHAMBHAR Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Correspondence Address: JAWHAR NAGAR **City KOLHAPUR PIN Code:** 416012 Email ID: PRATHMESHPOWAR0900@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 2/4 73433 Marathi-V DSC-C25 Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75571 MARATHI-VII DSE-E1 Cr. 4 3/5 75572 MARATHI-VIII DSE-E2 Cr. 4 3/5 75574 MARATHI-X DSE-E4 Cr. 4 3/5 75575 MARATHI-XI DSE-E5 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4

3/6 75775 MARATHI-XVI DSE-E130 Cr. 4

Optional Subjects:

3/6 75771 MARATHI-XII DSE-E126 Cr. 4

3/6 75773 MARATHI-XIV DSE-E128 Cr. 4

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.

3/6 75772 MARATHI-XIII DSE-E127 Cr. 4

3/6 75774 MARATHI-XV DSE-E129 Cr. 4

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 Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,						Form	No.:	4 3 (8967
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND	EVALUATION,S	HIVAJI	UNIVERS	SITY,KO	LHAPUR		
	permission to p he papers mentio		at the B.A.(C	BCS)	PART 3	SEM 6	(History) exam	to be held in
PRN: 2021020740	College: G	opal Krishna Gh	okhale College	Kolhap	our. , KOL	.HAPUR			
Personal Information	on :				N	Mobile NC): 8	3 7 8 0	0 8 9 2 0
Full Name: PF	RADHAN DHAIRYS	SHIL MADHUKA	R						
Write Name in De	vanagari (Marathi):							
Gender: Male	Religion: HIN	NDU	Cast: MAHAR		Physic	al Disab	oility NO	T APPLIC	ABLE
Correspondence Ad	ddress:								
City		PIN Code:	I	Email II	D: mhdh	naitya434	l6@gmail	.com	
Study Center: N	l.A.								
Fees Details:					Total Fee	₹: 0			(Uni.Fee. 0)
SEM V), SEM VI)									
Subject Details : 3/5 75556 HISTOR	Y-VII DSE-E61 Cr.	4	3/5	75558	HISTORY-	IX DSE-E	63 Cr. 4		
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6	75756	HISTORY-	XII DSE-I	E186 Cr. 4	1	
3/6 75757 HISTOR	Y-XIII DSE-E187 CI	r. 4	3/6	75758	HISTORY-	XIV DSE	-E188 Cr.	4	
3/6 75759 HISTOR	Y-XV DSE-E189 Cr	. 4	3/6	75760	HISTORY-	XVI DSE	-E190 Cr.	4	
Optional Subjects:									
Declaration: I here knowledge and be liable to be cancelle	lief. I understand								
Place:	Date:	Student's Signa in the box show	ture (Please sign n below)	strictly		-	l's Signatu ox shown l		(Please sign
Specimen Sigature:									



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,					Form No. :	4 3 1 4 0 0 9
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJ	II UNIVERS	ITY,KOLHAPUR	
Sir,I request the March-2024 for t		present myself at the ned below.	B.A.(CBCS)	PART 3 S	SEM 6 (Marathi)	exam to be held in
PRN: 2021039996	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLŀ	HAPUR	
Personal Information	on : ABADE YESHRAJ	YUVRAJ		М	obile NO : 9 3	3 2 2 9 9 2 6 6 7
Write Name in De						
Gender: Male	Religion: HIN	NDU Cast: N	/laratha	Physica	al Disability NOT	
Correspondence Ad	ddress:					
SHIVAJI PETH KO	DLHAPUR					
City KOLHAPUR		PIN Code: 416012	Email	ID: yashra	ajrabade68@gami	I.com
Study Center: N	I.A.			•		
Fees Details:				Total Fee ₹	₹: 0	(Uni.Fee. 0)
SEM III), SEM IV),	SEM V), SEM VI)					
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4 73410	English Cor	mpulsory (AECC-4)	Cr. 4
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75574	MARATHI->	K DSE-E4 Cr. 4	
3/5 75575 MARATI	HI-XI DSE-E5 Cr. 4		3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75771 MARATI	HI-XII DSE-E126 Cr	. 4	3/6 75772	MARATHI->	KIII DSE-E127 Cr. 4	ł .
3/6 75773 MARATE	HI-XIV DSE-E128 C	r. 4	3/6 75774	MARATHI->	KV DSE-E129 Cr. 4	
3/6 75775 MARATE	HI-XVI DSE-E130 C	r. 4				
Optional Subjects:						
	lief. I understand				•	correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Ple in the box shown below			Principal's Signatur	re & Seal (Please sign elow)
Specimen Sigature:			-			



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,				FOII	II NO	4314346
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	ΓΙΟΝ,SHIVAJI UNI	VERSITY,KO	DLHAPUR	
•	permission to phe papers mention	present myself at the E ned below.	B.A.(CBCS) PART	Г 3 SEM 6	6 (Marathi)	exam to be held in
PRN: 2021043645	College: G	Gopal Krishna Ghokhale C	college,Kolhapur. ,	KOLHAPUF	₹	
Personal Information	on :			Mobile N	O: 9 4	2 1 2 0 2 3 7 9
Full Name: RE	EDEKAR AKASH \	VILAS				
Write Name in De	vanagari (Marathi	i):				
Gender: Male	Religion: HIN	NDU Cast : Ma	ratha P I	hysical Disa	bility NOTA	PPLICABLE
Correspondence Ad	ddress:					
City		PIN Code:	Email ID:	AKASHRED	EKAR200@G	MAIL.COM
Study Center: N	I.A.					
Fees Details:			Total	Fee ₹: 0		(Uni.Fee. 0)
SEM III), SEM IV),	SEM V), SEM VI)					
Subject Details :						
2/3 73347 Marathi	-IV DSC-C2 Cr. 4		2/4 73410 Engli	sh Compulsoi	y (AECC-4) C	r. 4
2/4 73434 Marathi-	VI DSC-C26 Cr. 4		3/5 75502 Engli	sh (Compulso	ory) AECC 5 Cr	. 4
3/5 75571 MARATE	HI-VII DSE-E1 Cr. 4		3/5 75572 MAR	ATHI-VIII DSE	E-E2 Cr. 4	
3/5 75574 MARATI	HI-X DSE-E4 Cr. 4		3/5 75575 MAR	ATHI-XI DSE-	E5 Cr. 4	
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75771 MAR	ATHI-XII DSE	-E126 Cr. 4	
3/6 75772 MARATI	HI-XIII DSE-E127 C	r. 4	3/6 75773 MAR	ATHI-XIV DSI	E-E128 Cr. 4	
3/6 75774 MARATI	HI-XV DSE-E129 Cr	r. 4	3/6 75775 MAR	ATHI-XVI DSI	E-E130 Cr. 4	
Optional Subjects:						
	elief. I understand	all statements made in t that in the event of a				
Place:	Date:	Student's Signature (Pleasin the box shown below)	se sign strictly		al's Signature	& Seal (Please sign
Specimen Sigature:						,
<u> </u>		•				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,					Form No. :	4 3 1 2 9 8 9
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJ	I UNIVERS	ITY,KOLHAPUR	
Sir,I request the March-2024 for t		resent myself at the length ned below.	B.A.(CBCS) P	ART 3 SE	M 6 (Geograph	y) exam to be held in
PRN: 2021037011	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLŀ	HAPUR	
Personal Information	on :			М	obile NO : 9	1 3 0 6 8 2 3 9 5
Full Name: RE	EDEKAR PRATHA	MESH SHAHAJI				
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HIN	NDU Cast: N	Maratha	Physica	al Disability NO	TAPPLICABLE
Correspondence Ad	ddress:					
A/P UCHAGAON						
City KOLHAPUR		PIN Code: 416005	Email	I D: pratha	meshredekar@g	mail.com
Study Center: N	l.A.					
Fees Details:				Total Fee ₹	f: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details: 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75546	GEOGRAP	HY-VII DSE-E106	Cr. 4
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75746	GEOGRAP	HY-X DSE-E231 C	Cr. 4
3/6 75747 GEOGR	APHY-XI DSE-E232	Cr. 4	3/6 75748	GEOGRAP	HY-XII DSE-E233	Cr. 4
3/6 75749 GEOGR	APHY-XIII DSE-E23	4 (Practical) Cr. 4	3/6 75750	GEOGRAP	HY-XIV DSE-E235	(Practical) Cr. 4
Optional Subjects:						
	lief. I understand					correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Ple in the box shown below			Principal's Signatu in the box shown l	ıre & Seal (Please sign pelow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,						Form	No. :	4 3 1 2 9 9 0
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVA	LUATION	,SHIVAJ	II UNIVER	SITY,KOL	HAPUR	
	permission to pi he papers mentio	resent myself at the	e B.A.(C	BCS) P	ART 3 S	SEM 6 (G	Geography)	exam to be held in
PRN: 2021037013	3 College: G	opal Krishna Ghokha	le Colleg	je,Kolha	pur. , KOl	LHAPUR		
Personal Information	on :					Mobile NO	: 84	1 1 9 2 4 4 4 9
Full Name: Ri	EDEKAR SURAJ S	SURESH						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU Cas	:: Maratha	a	Physi	cal Disab	ility NOT	APPLICABLE
Correspondence A	ddress:							
A/P UCHAGAON								
City KOLHAPUR		PIN Code: 41600	15	Email I	ID: rede	karsuraj@)gmail.com	l
Study Center: N	I.A.							
Fees Details:					Total Fee	:₹: 0		(Uni.Fee. 0)
SEM VI)								
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4	l 3/6	75746	GEOGRA	.PHY-X DS	E-E231 Cr.	4
	RAPHY-XI DSE-E232		3/6	75748	GEOGRA	PHY-XII D	SE-E233 C	r. 4
3/6 75749 GEOGR			3/6	75750	GEOGRA	.PHY-XIV [DSE-E235 (F	Practical) Cr. 4
Optional Subjects:								
	elief. I understand							orrect to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (in the box shown bel	_	ın strictly	/	-	's Signature x shown be	e & Seal (Please sign slow)
Specimen Sigature:								
					·			



To,

SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



Form No. : 4 3 0 9 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.(CBCS) PART 3 SEM 6 (Hindi) exam to be he

Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021047621 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 3 7 3 0 9 4 0 0 5 Full Name: **RENDALKAR OMKAR BALASAHEB** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: **UJLAIWADI City KOLHAPUR PIN Code: 416004 Email ID:** OMKARRENDALKAR960@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75552 HINDI-VIII DSE-E7 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4

Optional Subjects:

3/6 75752 HINDI-XIII DSE-E132 Cr. 4

3/6 75754 HINDI-XV DSE-E134 Cr. 4

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.

3/6 75753 HINDI-XIV DSE-E133 Cr. 4

3/6 75755 HINDI-XVI DSE-E135 Cr. 4

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			
Sigature:			



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,						Form No.	:	4 3 0 4 0 1 6
The DIRECTOR,	BOARD OF EXAM	INATIONS AN	D EVALUATIO	N,SHIVAJI U	NIVERSI	TY,KOLHAF	PUR	
	permission to p he papers mentio		at the B.A.	(CBCS) PAF	RT 3 SE	EM 6 (Soci	ology)	exam to be held in
PRN: 2020004653	3 College: G	opal Krishna 0	Shokhale Colle	ege,Kolhapur	. , KOLH	IAPUR		
Personal Information	on :				M	obile NO :	9 3	70175075
Full Name: RI	EVADE RAM SHAI	NKAR						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU	Cast: DHAN	GAR	Physica	l Disability	NOT A	APPLICABLE
Correspondence A	ddress:							
DHANKAR GALLI	I KHAT KARKHAN	A ROAD GADI	MUDSHINGI K	OLHAPUR				
City GADMUDSH	INGI	PIN Code:	416119	Email ID:	bhikaji	revade1213	@gmail	.com
Study Center: N	I.A.							
Fees Details:				To	tal Fee ₹	: 0		(Uni.Fee. 0)
SEM VI)								
Subject Details :								
3/6 75702 English	(Compulsory) AECC	6 Cr. 4		_				
Optional Subjects:								
	elief. I understand							rrect to the best of marrect, my candidature i
Place:	Date:	Student's Signin the box sho	nature (Please s own below)	ign strictly		Principal's Si n the box sh		& Seal (Please sign ow)
Specimen Sigature:								
Jigature.	l	1						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,					Form No. :	4 3 0 9 0 7 8
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVAL	UATION,SHIVA	JI UNIVERS	ITY,KOLHAPUR	
	e permission to p the papers mention	oresent myself at th ned below.	e B.A.(CBCS)	PART 3 S	SEM 6 (Marathi) exam to be held in
PRN: 2021043555	5 College: G	opal Krishna Ghokhal	e College,Kolha	pur. , KOLH	HAPUR	
Personal Information		MED ABDULRAHAMA	۸N	М	obile NO: 7	0 2 0 8 9 4 3 2 9
Write Name in De	evanagari (Marathi):				
Gender: Male	Religion: ISL	.AM Cast:	MUSLIM	Physica	al Disability NO	T APPLICABLE
Correspondence A	ddress:					
2456 D WARD SH	HUKRAWARPETH					
City KOLHAPUR		PIN Code: 416002	2 Email	ID: EAR@	GMAIL.COM	
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	t: 0	(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)					
Subject Details : 2/4 73468 Psychol	ogy-VI DSC-D40 Cr	. 4	3/5 75502	English (Co	mpulsory) AECC 5	Cr. 4
3/5 75571 MARAT	HI-VII DSE-E1 Cr. 4		3/5 75572	MARATHI-\	/III DSE-E2 Cr. 4	
3/5 75574 MARATI	HI-X DSE-E4 Cr. 4		3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75771 MARAT	HI-XII DSE-E126 Cr	. 4	3/6 75772	MARATHI->	(III DSE-E127 Cr.	4
3/6 75773 MARAT	HI-XIV DSE-E128 C	r. 4	3/6 75774	MARATHI->	(V DSE-E129 Cr. 4	1
3/6 75775 MARAT	HI-XVI DSE-E130 C	r. 4				
Optional Subjects:	:					
	elief. I understand	that in the event of	f any informati	on being fo	ound false or inc	correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Fin the box shown below	_		Principal's Signatu in the box shown b	ure & Seal (Please sign pelow)
Specimen Sigature:						



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,			Form No. :	4 3 1 1 0 9 8
The DIRECTOR, BOARD OF EXA	MINATIONS AND EVALUA	TION,SHIVAJI UN	IIVERSITY,KOLHAPUR	
Sir,I request the permission to March-2024 for the papers men		.A.(CBCS) PART	3 SEM 6 (Geograph	y) exam to be held in
PRN: 2021023822 College:	Gopal Krishna Ghokhale(College,Kolhapur.	, KOLHAPUR	
Personal Information :			Mobile NO: 9	0 2 2 8 6 6 6 3 1
Full Name: SALUNKHE HARS	SH ANBADAS			
Write Name in Devanagari (Marat	hi):			
Gender: Male Religion: H	IINDU Cast: Ma	aratha I	Physical Disability NO	TAPPLICABLE
Correspondence Address:				
KOLHAPUR				
City KOLHAPUR	PIN Code: 410084	Email ID:	ravindsalukhe@gmail.c	om
Study Center: N.A.				
Fees Details:		Tota	al Fee ₹: 0	(Uni.Fee. 0)
SEM IV), SEM V), SEM VI)				
Subject Details: 2/4 73410 English Compulsory (AEC	CC-4) Cr. 4	3/5 75502 Eng	lish (Compulsory) AECC 5	Cr. 4
3/6 75702 English (Compulsory) AEC	CC 6 Cr. 4	3/6 75746 GE	OGRAPHY-X DSE-E231 C	cr. 4
3/6 75747 GEOGRAPHY-XI DSE-E2	32 Cr. 4	3/6 75748 GE	OGRAPHY-XII DSE-E233	Cr. 4
3/6 75749 GEOGRAPHY-XIII DSE-E	234 (Practical) Cr. 4	3/6 75750 GE	OGRAPHY-XIV DSE-E235	(Practical) Cr. 4
Optional Subjects:				
Declaration: I hereby declare that knowledge and belief. I understar liable to be cancelled or reject.	nd that in the event of a	iny information b		
Place: Date:	Student's Signature (Plea in the box shown below)	se sign strictly	Principal's Signatu	re & Seal (Please sign pelow)
Specimen Sigature:				·



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,					Form No. :		4 3 1 3 4 4 4
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUAT	TON,SHIVAJI	UNIVERS	ITY,KOLHAF	'UR	
	permission to p he papers mentio	resent myself at the B. ned below.	A.(CBCS) PA	ART 3 SE	M 6 (Geog	raphy)	exam to be held in
PRN: 2021038599	9 College: G	opal Krishna Ghokhale C	ollege,Kolhar	our. , KOLI	HAPUR		
Personal Information	on :			M	obile NO :	9 9	2 3 0 5 9 8 4 0
Full Name: SA	ANKPAL SAVKAR	RAVINDRA					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HI	NDU Cast : Ma	ratha	Physica	al Disability	NOTA	PPLICABLE
Correspondence A	ddress:						
City KANDALGAC	ON	PIN Code:	Email I	D : sankp	alsavkar@gr	nail.con	1
Study Center: N	I.A.						
Fees Details:				Total Fee	: 0		(Uni.Fee. 0)
SEM III), SEM IV)	, SEM V), SEM VI)						
Subject Details :							
2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4 73410	English Cor	npulsory (AE0	CC-4) C	r. 4
2/4 73423 Logic-T-	II Cr. 4		3/5 75502	English (Co	mpulsory) AE	CC 5 Cr	. 4
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75746	GEOGRAP	HY-X DSE-E2	31 Cr. 4	<u> </u>
3/6 75747 GEOGR	APHY-XI DSE-E232	Cr. 4	3/6 75748	GEOGRAP	HY-XII DSE-E	233 Cr.	4
3/6 75749 GEOGR	APHY-XIII DSE-E23	4 (Practical) Cr. 4	3/6 75750	GEOGRAP	HY-XIV DSE-E	≣235 (Pr	actical) Cr. 4
Optional Subjects:							
	elief. I understand	all statements made in t that in the event of ar					
Place:	Date:	Student's Signature (Pleas in the box shown below)	e sign strictly		Principal's Sig	-	& Seal (Please sign ow)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	4 3 0 3 1 4 0
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVA	II UNIVERS	ITY,KOLHAPUR	
	permission to phe papers mention	present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (History)	exam to be held in
PRN: 201900052	7 College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLł	HAPUR	
Personal Information	on :			M	obile NO: 7	7 5 6 0 6 1 3 0 8
Full Name: SA	ANKPAL VINAYAK	BAJIRAO				
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HI	NDU Cast: C	CHAMBHAR	Physica	al Disability NOT	「APPLICABLE
Correspondence A	ddress:					
JAGRUTI NAGAR	R					
City KOLHAPUR		PIN Code: 416008	Email	ID: AKSH	AYAAPP@GMAIL	COM
Study Center: N	I.A.					
Fees Details:				Total Fee	t: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details :	(Compulary) AECC	5 Cr 4	3/5 75556	LICTORY I	/II DSE-E61 Cr. 4	
	(Compulsory) AECC		3/5 75558		X DSE-E63 Cr. 4	
	(Compulsory) AECC		3/6 75756		(II DSE-E186 Cr. 4	
	RY-XIII DSE-E187 C		3/6 75758		(IV DSE-E188 Cr. 4	
3/6 75759 HISTOR					(VI DSE-E190 Cr. 4	
Optional Subjects:			0/0 /0/00	THO TOTAL 7	(VI DOL 1100 GI.	·
optional oubjects.						
	elief. I understand					correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Ple in the box shown below			Principal's Signatu in the box shown b	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



To,							F	orm No.	:	4 3 1	1 4 8 7
The DIRECTOR,	BOARD OF EXAM	INATIONS AN	D EVALUAT	TION,S	HIVAJI	UNIVER	SITY,	,KOLHAI	PUR		
•	permission to p he papers mentio	-	at the B.	A.(CBC	CS) PA	ART 3 S	EM (6 (Geog	graphy)	exam	n to be held in
PRN: 2021023706	6 College: G	Gopal Krishna (Shokhale C	ollege,	Kolhap	our. , KOl	LHAP	UR			
Personal Information	on :						Mobil	e NO :	9 0	2 2 6	0 9 3 3 8
Full Name: SA	ARANG ANMOL B	HARAT									
Write Name in De	vanagari (Marathi	·):									
Gender: Male	Religion: HIN	NDU	Cast: MA	HAR		Physic	cal Di	isability	NOT A	APPLIC	ABLE
Correspondence A	ddress:										
SIDDNAERLI KAG	GAL										
City Kolhapur		PIN Code:	416232	E	Email I	D : anmo	olsara	ango@gi	mail.cor	n	
Study Center: N	I.A.										
Fees Details:						Total Fee	₹:	0			(Uni.Fee. 0)
SEM VI)											
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6	75746	GEOGRA	PHY-	X DSE-E2	231 Cr. 4	4	
	RAPHY-XI DSE-E232					GEOGRA					
3/6 75749 GEOGR	APHY-XIII DSE-E23	34 (Practical) Cr	. 4	3/6	75750	GEOGRA	PHY-	XIV DSE-	E235 (P	ractical)	Cr. 4
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelled	elief. I understand										
Place:	Date:	Student's Signing the box sho	•	se sign	strictly			cipal's Si ie box sh	-		(Please sign
Specimen Sigature:			,							,	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



То,					Form No. :	4 3 0 8 6 9 1
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND EVALUA	TION,SHIVAJ	I UNIVERS	ITY,KOLHAPUF	₹
	permission to p he papers mention	resent myself at the Boned below.	.A.(CBCS) P.	ART 3 SE	M 6 (Geograp	hy) exam to be held in
PRN: 2021036992	2 College: G	Gopal Krishna Ghokhale(College,Kolha	pur. , KOLŀ	HAPUR	
Personal Information	on :			М	obile NO :	9 1 3 0 9 9 0 3 1 8
Full Name: SA	ARNAIK SHUBHA	M SHASHIKANT				
Write Name in De	vanagari (Marath	i):				
Gender: Male	Religion: HII	NDU Cast : Ma	aratha	Physica	al Disability No	OT APPLICABLE
Correspondence A	ddress:					
A/P NAGAON						
City KOLHAPUR		PIN Code: 416207	Email I	I D: shubh	amsarnaik3873	@gmail.com
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	:: 0	(Uni.Fee. 0)
SEM III), SEM V),	SEM VI)					
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	3/5 75502	English (Co	mpulsory) AECC	5 Cr. 4
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75746	GEOGRAP	HY-X DSE-E231	Cr. 4
3/6 75747 GEOGR	RAPHY-XI DSE-E232	2 Cr. 4	3/6 75748	GEOGRAP	HY-XII DSE-E233	3 Cr. 4
3/6 75749 GEOGR	RAPHY-XIII DSE-E23	34 (Practical) Cr. 4	3/6 75750	GEOGRAP	HY-XIV DSE-E23	5 (Practical) Cr. 4
Optional Subjects:	:					
	elief. I understand					I correct to the best of my ncorrect, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signa in the box shown	ture & Seal (Please sign n below)
Specimen Sigature:		·				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



To,						F	orm No.	•	4 3 0	9 2 6	5 5
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND E	VALUATION,	SHIVAJ	I UNIVE	RSITY	,KOLHAF	PUR			
Sir,I request the March-2024 for the	•	•	the B.A.(CI	BCS) P	ART 3	SEM	6 (Econ	omics)	exam	to be	e held in
PRN: 2021020560	College: G	opal Krishna Ghol	chale Colleg	e,Kolha _l	pur.,K(OLHAF	PUR				
Personal Informatio	n : IAIKH AFTAB AK	BAR				Mobil	e NO :	9 3 9	5 6 8	2 9 0	8 3
Write Name in De	vanagari (Marathi):									
Gender: Male	Religion: HIN	IDU C	ast: Maratha	l	Phys	sical D	isability	NOT A	PPLIC	ABLE	
Correspondence Ad	ldress:										
RAJE SAMBHAJI	COLNY KARVEE	₹									
City KOLHAPUR		PIN Code: 416	6012	Email I	ID: PIS	SHWAF	R1994@0	SMAIL.C	ЮМ		
Study Center: N	.A.										
Fees Details:					Total Fe	ee ₹:	0			(Uni.F	ee. 0)
SEM III), SEM IV),	SEM V), SEM VI)										
Subject Details : 2/3 73377 Political s	Science -IV DSC-D8	Cr. 4	2/4	73410	English	Compu	lsory (AE	CC-4) C	r. 4		
3/5 75502 English (Compulsory) AECC	5 Cr. 4	3/5	75631	ECONO	MICS-\	/II DSE-E	71 Cr. 4			
3/5 75632 ECONOI	MICS-VIII DSE-E72	Cr. 4	3/5	75633	ECONO	MICS-I	X DSE-E7	'3 Cr. 4			
3/5 75634 ECONOI	MICS-X DSE-E74 C	r. 4	3/5	75635	ECONO	MICS->	KI DSE-E7	'5 Cr. 4			
3/6 75831 ECONOI	MICS-XII DSE-E196	Cr. 4	3/6	75832	ECONO	MICS->	KIII DSE-E	197 Cr.	4		
3/6 75833 ECONOI	MICS-XIV DSE-E19	3 Cr. 4	3/6	75834	ECONO	MICS-	XV DSE-	E199 Cr.	. 4		
3/6 75835 ECONOI	MICS-XVI DSE-E20	O Cr. 4	3/6	75702	English	(Comp	ulsory) AE	CC 6 Cr.	. 4		
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelle	lief. I understand										
Place:	Date:	Student's Signatu in the box shown		n strictly	′		cipal's Si ne box sh			Please	sign
Specimen Sigature:											



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



То,					Form No. :	4 3 0 3 9 0 2
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND EVAL	UATION,SHIVA	JI UNIVERSIT	Y,KOLHAPUR	
	permission to he papers mention	present myself at th oned below.	e B.A.(CBCS)	PART 3 SE	EM 6 (Marathi)	exam to be held in
PRN: 2020005348	S College: G	Gopal Krishna Ghokhal	e College,Kolha	pur. , KOLH	APUR	
Personal Information	on : HAIKH SIDDIK MA	HAMAD		Мо	bile NO : 8 3	3 0 8 7 0 1 9 1 9
Write Name in De	evanagari (Marath	i):				
Gender: Male	Religion: MI	JSLIM Cast	MUSLIM	Physical	Disability NOT	APPLICABLE
Correspondence A	ddress:					
293 E WARD PRA	AGATI KIRANA KII	RANA STORE SAMOF	R YADAV NAGAI	R KOLHAPUF	3	
City KOLHAPUR		PIN Code: 416008	B Email	ID: smssms	s8509@gmail.coi	m
Study Center: N	I.A.					
Fees Details:				Total Fee ₹:	0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75571	MARATHI-VI	I DSE-E1 Cr. 4	
3/5 75572 MARAT	HI-VIII DSE-E2 Cr.	4	3/5 75574	MARATHI-X	DSE-E4 Cr. 4	
3/5 75575 MARAT	HI-XI DSE-E5 Cr. 4		3/6 75702	English (Com	npulsory) AECC 6	Cr. 4
3/6 75771 MARAT	HI-XII DSE-E126 C	·. 4	3/6 75772	MARATHI-XI	II DSE-E127 Cr. 4	
3/6 75773 MARATI	HI-XIV DSE-E128 C	Cr. 4	3/6 75774	MARATHI-X\	/ DSE-E129 Cr. 4	
3/6 75775 MARATI	HI-XVI DSE-E130 C	Cr. 4				
Optional Subjects:						
	elief. I understand	I that in the event o	f any informati	on being fou	ind false or inco	correct to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (Find the box shown below	_		rincipal's Signatur the box shown be	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No. :		4 3 0 4 0 1 7
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALU	JATION,SHIVA	II UNIVER	SITY,KOLHAP	'UR	
	permission to phe papers mention	present myself at the ned below.	e B.A.(CBCS)	PART 3	SEM 6 (Eng	glish)	exam to be held in
PRN: 2020004652	2 College: G	opal Krishna Ghokhale	: College,Kolha	pur. , KO	LHAPUR		
Personal Information	on :				Mobile NO :	9 0 (67560355
Full Name: SI	HENDE PRAFULL	KIRAN					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	IDU Cast:	MAHAR	Physi	cal Disability	NOT A	PPLICABLE
Correspondence A	ddress:						
162, HUDYVARIL	VASAHAT GADMI	JDSHINGI KOLHAPUI	₹				
City GADMUDSH	INGI	PIN Code: 416119	Email	ID: prafı	ullshende93@g	gmail.co	m
Study Center: N	I.A.						
Fees Details:				Total Fee	:₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details: 3/5 75531 ENGLIS	SH-VII DSE-E11 Cr. 4	1	3/6 75702	English (C	Compulsory) AEC	CC 6 Cr	. 4
3/6 75731 ENGLIS	SH-XII DSE-E136 Cr	.4			-XIV DSE-E138		
Optional Subjects:			1 0/0				
Optional Gabjecto.	•						
	elief. I understand						rect to the best of my rect, my candidature is
Place:	Date:	Student's Signature (P in the box shown below		у	Principal's Sig	-	& Seal (Please sign w)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





4310915 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (History) exam to be held in March-2024 for the papers mentioned below. PRN: 2021023888 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 7 6 3 5 2 9 5 1 9 SHINDE ANIRUDHA GORAKHA **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: Maratha Correspondence Address: HARGUDEWADI SHAHUVADI KOLHAPUR City Kolhapur **PIN Code:** 416214 Email ID: anirudhashinde7676@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM III), SEM V), SEM VI) Subject Details: 2/3 73323 English Compulsory- AECC 3 Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75556 HISTORY-VII DSE-E61 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75756 HISTORY-XII DSE-E186 Cr. 4 3/6 75757 HISTORY-XIII DSE-E187 Cr. 4 3/6 75758 HISTORY-XIV DSE-E188 Cr. 4 3/6 75759 HISTORY-XV DSE-E189 Cr. 4 3/6 75760 HISTORY-XVI DSE-E190 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To, Form No.: 4 3 1 3 0 2 2	
The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR	
Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Marathi) exam to be held i March-2024 for the papers mentioned below.	n
PRN: 2021037249 College: Gopal Krishna Ghokhale College, Kolhapur., KOLHAPUR	
Personal Information : Mobile NO : 8 8 8 8 9 7 8 2 7 3	
Full Name: SHINDE PRATIK UTTAM	
Write Name in Devanagari (Marathi):	
Gender: Male Religion: HINDU Cast: Maratha Physical Disability NOT APPLICABLE	
Correspondence Address:	
A/P PACHAGAON KOLHAPUR	
City KOLHAPUR PIN Code: 416013 Email ID: pratikshinde@gmail.com	
Study Center: N.A.	
Fees Details: Total Fee ₹: 0 (Uni.Fee. 0)	
SEM V), SEM VI)	
Subject Details :	
3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75571 MARATHI-VII DSE-E1 Cr. 4	
3/5 75572 MARATHI-VIII DSE-E2 Cr. 4 3/5 75574 MARATHI-X DSE-E4 Cr. 4	
3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75771 MARATHI-XII DSE-E126 Cr. 4	
3/6 75772 MARATHI-XIII DSE-E127 Cr. 4 3/6 75773 MARATHI-XIV DSE-E128 Cr. 4	
3/6 75774 MARATHI-XV DSE-E129 Cr. 4 3/6 75775 MARATHI-XVI DSE-E130 Cr. 4	
Optional Subjects:	
Declaration: I hereby declare that all statements made in this application are true complete and correct to the best of r knowledge and belief. I understand that in the event of any information being found false or incorrect, my candidature liable to be cancelled or reject.	
Place: Student's Signature (Please sign strictly in the box shown below) Principal's Signature & Seal (Please sign in the box shown below)	
Specimen Sigature:	



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					Form No. :	4 3 0 4 1 1 4
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJ	I UNIVERSI	TY,KOLHAPUR	
	permission to pi he papers mentio	resent myself at the B ned below.	.A.(CBCS) P	ART 3 SE	M 6 (Geography	v) exam to be held in
PRN: 2020006069	College: G	opal Krishna Ghokhale(College,Kolha	pur. , KOLF	IAPUR	
Personal Information	on : HINGADE TEJAS \	/ILAS		М	obile NO: 7	7 2 0 9 5 9 9 3 0
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HIN	NDU Cast: VA	DAR	Physica	I Disability NOT	APPLICABLE
Correspondence Ad SAMBHAJORAO	ddress: MANE NAGAR HL	IPARI				
City HUPARI		PIN Code: 416203	Email	I D: tejassh	ningade59@gmail	.com
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM III), SEM IV),	SEM V), SEM VI)					
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	2/4 73410	English Con	npulsory (AECC-4)	Cr. 4
2/4 73467 Psycholo	ogy-V DSC-D39 Cr.	4	2/4 73468	Psychology-	VI DSC-D40 Cr. 4	
3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRAPI	HY-XI DSE-E232 C	r. 4
3/6 75748 GEOGR	APHY-XII DSE-E233	3 Cr. 4	3/6 75749	GEOGRAPI	HY-XIII DSE-E234 (Practical) Cr. 4
3/6 75750 GEOGR	APHY-XIV DSE-E23	5 (Practical) Cr. 4				
Optional Subjects:						
	elief. I understand		• •		•	correct to the best of my orrect, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signatu n the box shown b	re & Seal (Please sign elow)
Specimen Sigature:		·				



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,					Form No. :	4 3 0 4 1 6 7
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVAJ	I UNIVERS	SITY,KOLHAPUR	
Sir,I request the March-2024 for t		resent myself at the E ned below.	3.A.(CBCS) P	ART 3 SE	EM 6 (Economics	s) exam to be held in
PRN: 2020004440	College: G	iopal Krishna Ghokhale	College,Kolha	pur. , KOL	HAPUR	
Personal Information	on : HIRKE SIDDHESH	RAHUL		M	lobile NO : 9	9 7 5 5 3 3 4 3 4
Write Name in De	vanagari (Marathi):				
Gender: Male	Religion: HI	NDU Cast: K	UMBHAR	Physic	al Disability NOT	ΓAPPLICABLE
Correspondence Ad RS NO 1042/F2/1 City KOLHAPUR		NO A BALAWADOOT N	IAGART FULE		IG ROAD	ail.com
Study Center: N	I.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75631	ECONOMI	CS-VII DSE-E71 Cr	: 4
3/5 75632 ECONO	MICS-VIII DSE-E72	Cr. 4	3/5 75633	ECONOMI	CS-IX DSE-E73 Cr.	. 4
3/5 75634 ECONO	MICS-X DSE-E74 (Cr. 4	3/5 75635	ECONOMI	CS-XI DSE-E75 Cr.	. 4
3/6 75831 ECONO	MICS-XII DSE-E196	Cr. 4	3/6 75832	ECONOMI	CS-XIII DSE-E197	Cr. 4
3/6 75833 ECONO	MICS-XIV DSE-E19	8 Cr. 4	3/6 75834	ECONOMI	CS- XV DSE-E199	Cr. 4
3/6 75835 ECONO	MICS-XVI DSE-E20	0 Cr. 4	3/6 75702	English (Co	ompulsory) AECC 6	Cr. 4
Optional Subjects:						
	elief. I understand	that in the event of a	any informatio	on being fo	ound false or inc	correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)			Principal's Signatu in the box shown b	re & Seal (Please sign elow)
Specimen Sigature:		,				



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,				Form No.:	4 3 0 9 0 0 0			
The DIRECTOR, BOARD O	OF EXAMINATIONS AND E	VALUATION,SHIVA	JI UNIVERSI	TY,KOLHAPUR				
Sir,I request the permiss March-2024 for the paper		the B.A.(CBCS)	PART 3 SE	M 6 (Sociology) exam to be held in			
PRN: 2021020958 C	ollege: Gopal Krishna Gho	khale College,Kolha	pur. , KOLH	IAPUR				
Personal Information :			Мс	obile NO: 8	5 3 0 4 9 2 3 4 9			
Full Name: SURVE PR	ATHAMESH BHIKAJI							
Write Name in Devanagari	(Marathi):							
Gender: Male Relig	gion: HINDU C	ast: Maratha	Physica	I Disability NOT	APPLICABLE			
Correspondence Address:								
ghar no.83, bhairavanath g	alli, panchgaon							
City kolhapur	PIN Code: 41	6013 Email	ID: prathm	eshsurve9444@g	gmail.com			
Study Center: N.A.								
Fees Details:			Total Fee ₹	: 0	(Uni.Fee. 0)			
SEM V), SEM VI)								
Subject Details: 3/5 75502 English (Compulso	ory) AECC 5 Cr. 4	3/5 75611	SOCIOLOG	Y-VII DSE-E66 Cr.	4			
3/6 75702 English (Compulso	ory) AECC 6 Cr. 4	3/6 75711	SOCIOLOG	Y-XII DSE-E191 C	r. 4			
3/6 75712 SOCIOLOGY-XIII	DSE-E192 Cr. 4	3/6 75713	SOCIOLOG	Y-XIV DSE-E193	Cr. 4			
3/6 75714 SOCIOLOGY-XV	DSE-E194 Cr. 4	3/6 75715	SOCIOLOG	Y-XVI DSE-E195(Cr. 4			
Optional Subjects:								
Declaration: I hereby decla knowledge and belief. I ur liable to be cancelled or reject	nderstand that in the eve ct.	nt of any informati	on being fo					
Place: Date:	Student's Signatu in the box shown	ire (Please sign strictl below)	-	Principal's Signature & Seal (Please sign in the box shown below)				
Specimen Sigature:								



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



To,						F	orm No.	•	4 3 1	0 9 8	3 8
The DIRECTOR, E	BOARD OF EXAM	INATIONS AND EV	/ALUATION,	SHIVAJ	I UNIVEF	RSITY	,KOLHAF	PUR			
Sir,I request the March-2024 for the	•	resent myself at ned below.	the B.A.(CE	BCS) P.	ART 3	SEM	6 (Econ	omics)	exam	to be	e held in
PRN: 2021023911	College: G	opal Krishna Ghok	hale College	e,Kolha _l	pur. , KC	DLHAF	PUR				
Personal Information	on : JTAR YASH SHRIF	(ANT				Mobil	e NO :	9 0	4 9 2	8 2 9	7 8
Write Name in De	vanagari (Marathi):									
Gender: Male	Religion: HIN	NDU Ca	ast: PANCHA	AL	Phys	sical D	isability	NOTA	PPLIC	ABLE	
Correspondence Ac	ddress:										
UJALAIWADI											
City Kolhapur		PIN Code: 416	004	Email I	ID: suta	aryash	1405@m	nail.cam			
Study Center: N	I.A.										
Fees Details:					Total Fe	e ₹:	0			(Uni.F	ee. 0)
SEM III), SEM IV),	SEM V), SEM VI)										
Subject Details :	Communication AFCC	2 0- 4	Lou	72440	Carliah (O	I / ^ _	00.4\0	. 4		
	Compulsory- AECC		1				Isory (AE				
-	ogy-VI DSC-D40 Cr MICS-VII DSE-E71		3/5	75502 75632			ulsory) AE				
3/5 75635 ECONO		3/5 75632 ECONOMICS-VIII DSE-E72 Cr. 4 3/6 75831 ECONOMICS-XII DSE-E196 Cr. 4									
	MICS-XIII DSE-E19			3/6 75833 ECONOMICS-XIV DSE-E198 Cr. 4							
	MICS-XIII DSE-E19		3/6				(VI DSE-E				
	(Compulsory) AECC		3/0	70000	2001101	7	(VI DOL L	2200 01.	-		
Optional Subjects:		0									
Optional Subjects.											
Declaration: I here knowledge and be liable to be cancelle	lief. I understand										
Place:	Date:	Student's Signatur in the box shown b		n strictly	/		icipal's Si ne box sh			Please	sign
Specimen Sigature:											
						•					



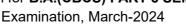
Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,					Form No.	.:	4 3 0 3 9 9 5
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVAL	.UATION,SHIVA	JI UNIVER	SITY,KOLHA	\PUR	
	permission to p he papers mentio	oresent myself at the	ne B.A.(CBCS)	PART 3	SEM 6 (E	nglish)	exam to be held in
PRN: 2020013240	College: G	opal Krishna Ghokha	e College,Kolha	ıpur. , KOl	LHAPUR		
Personal Information	on : ALEKAR RUSHIKE	SH KRUSHNAT			Mobile NO :	9 3	5 9 2 4 0 3 4 7
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: HIN	IDU Cast	: Maratha	Physi	cal Disability	, NOTA	APPLICABLE
Correspondence A	ddress:						
PATIL GALLI UNC	CHGOAN						
City KOLHAPUR		PIN Code: 41600	5 Email	ID: cam	pusnet7177@	စ္ဆgmail.cc	om
Study Center: N	I.A.						
Fees Details:				Total Fee	:₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)							
Subject Details: 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75531	ENGLISH	-VII DSE-E11	Cr. 4	
3/5 75532 ENGLIS	H-VIII DSE-E12 Cr.	4	3/5 75533	ENGLISH	-IX DSE-E13	Cr. 4	
3/5 75534 ENGLIS	H-X DSE-E14 Cr. 4		3/5 75535	ENGLISH	-XI DSE-E15	Cr. 4	
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75731	ENGLISH	-XII DSE-E136	6 Cr. 4	
3/6 75732 ENGLIS	H-XIII DSE-E137 Cı	·. 4	3/6 75733	ENGLISH	-XIV DSE-E13	38 Cr. 4	
3/6 75734 ENGLIS	H-XV DSE-E139 Cr	. 4	3/6 75735	ENGLISH	-XVI DSE-E14	10 Cr. 4	
Optional Subjects:							
	elief. I understand	that in the event of	of any informati	on being	found false	or incor	rrect to the best of my rect, my candidature is
Place:	Date:	Student's Signature (in the box shown belo	_	у	Principal's S in the box sl	-	& Seal (Please sign ow)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





4 3 0 4 4 2 5 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (History) exam to be held in March-2024 for the papers mentioned below. PRN: 2020010807 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 1 6 8 3 6 5 6 9 2 **Full Name:** TATKARE ANKUSH RAMCHANDRA Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Male Religion: HINDU Cast: GAVALI Correspondence Address: RAJE SAMBHAJI COLONY RAJOPADHYAYE NAGAR KOLHAPUR City MALAN **PIN Code:** 415724 Email ID: ankushtatkare1@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM VI) Subject Details: 3/6 75702 English (Compulsory) AECC 6 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)

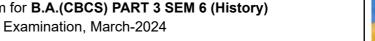




To,					Form	No. :	4 3 0 4 4 9 5
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUATION,	SHIVAJI UNIV	ERSITY,KOI	_HAPUR	
	permission to phe papers mention		at the B.A.(0	CBCS) PART	3 SEM 6	(History)	exam to be held in
PRN: 2020010815	5 College: G	opal Krishna G	hokhale College	e,Kolhapur.,k	KOLHAPUR		
Personal Information	on :				Mobile NC): 88	06184280
Full Name: TA	YADE JAYA KANI	FNATH					
Write Name in De	vanagari (Marathi):					
Gender: Male	Religion: Bu	ddhist	Cast: Other	Phy	ysical Disab	ility NOT	APPLICABLE
Correspondence A	ddress:						
KARWARDART							
City KOLHAPUR		PIN Code:	444503	Email ID: ja	yatayade@g	gmail.com	
Study Center: N	I.A.						
Fees Details:				Total F	ee ₹: 0		(Uni.Fee. 0)
SEM VI)							
Subject Details :							
3/6 75702 English	(Compulsory) AECC	6 Cr. 4					
Optional Subjects:							
	elief. I understand						orrect to the best of my orrect, my candidature is
Place:	Date:	Student's Sign in the box show	ature (Please sig wn below)	n strictly	e & Seal (Please sign slow)		
Specimen							
Sigature:	l						



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





To,								Form No.	:	4 3 0	5 1 7 2	!
The DIRECTOR, I	BOARD OF EXAMI	NATIONS AN	D EVALUA	TION,	SHIVAJ	I UNIVE	ERSIT	Y,KOLHA	PUR			
	e permission to p he papers mentior		lf at the	B.A.(0	CBCS)	PART	3 SE	EM 6 (H	istory)	exam	to be h	neld in
PRN: 2020033083	3 College: Go	ppal Krishna (Ghokhale (College	e,Kolha	pur. , K	OLHA	PUR				
Personal Information	on :						Mob	ile NO :	9 1	1 2 2 9	3 6 6	2
Full Name: TE	EWARE PRATIK MA	NOJ										
Write Name in De	evanagari (Marathi)	:										
Gender: Male	Religion: HIN	DU	Cast: Bl	JRUD		Phy	sical	Disability	NOT	APPLICA	BLE	
Correspondence A	ddress:											
1239 'E' WARD ,	BAGAL CHOWK K	OLHAPUR										
City KOLHAPUR		PIN Code:	416008		Email	ID: Te	warep	ratik2003	@gmail	.com		
Study Center: N	I.A.											
Fees Details:						Total F	ee ₹:	0		(Uni.Fee.	. 0)
SEM VI)												
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4		3/6	75757	HISTO	RY-XIII	DSE-E18	7 Cr. 4			
3/6 75759 HISTOR	RY-XV DSE-E189 Cr.	4		3/6	75760	HISTO	RY-XV	I DSE-E19	0 Cr. 4			
Optional Subjects:	1											
Declaration: I here knowledge and be liable to be cancelled	elief. I understand											
Place:	Date:	Student's Sig		ase sign	strictly	1		incipal's S the box sl	-		lease sig	n
Specimen Sigature:			<u>, </u>							<u> </u>		
-							•					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,					Form No.	: 43	1 5 0 5 3
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND EVALUAT	ION,SHIVAJ	I UNIVER	SITY,KOLHA	PUR	
	permission to p he papers mentic	resent myself at the B	A.(CBCS) P	ART 3 S	SEM 6 (Ecor	omics) ex	am to be held in
PRN: 2021063619	College: G	Gopal Krishna Ghokhale C	ollege,Kolha	pur. , KOI	LHAPUR		
Personal Information	on: HOMBARE ROHIT	DEEPAK			Mobile NO :	9 2 8 4	6 4 0 8 9 0
Write Name in De	vanagari (Marathi	i):					
Gender: Male	Religion: HI	NDU Cast : BH	OI	Physi	cal Disability	NOT APPL	ICABLE
Correspondence A	ddress:						
City KAGAL		PIN Code:	Email	I D: rohit	thombare549	0@gmail.co	n
Study Center: N	I.A.						
Fees Details:				Total Fee	e₹: 0		(Uni.Fee. 0)
SEM III), SEM IV)	, SEM V), SEM VI)						
Subject Details :	Compulsory AECC	3 Cr 4	2/3 73336	Logic (T)	(Traditional) C	· 1	
2/3 73323 English 2/4 73410 English	Compulsory (AECC		2/4 73423		(Traditional) C	. 4	
	(Compulsory) AECC		3/5 75631		IICS-VII DSE-E	71 Cr 4	
	MICS-VIII DSE-E72				IICS-VII DSE-E		
	MICS-XI DSE-E75		3/6 75831		IICS-IX DSE-E		
	MICS-XIII DSE-E19				IICS-XIV DSE-		
	MICS- XV DSE-E19		3/6 75835		IICS-XVI DSE-		
3/6 75702 English			0,0 .000				
Optional Subjects:							
optional casjoote.							
	elief. I understand	all statements made in t I that in the event of ar					
Place:	Date:	Student's Signature (Pleas in the box shown below)	e sign strictly	′	Principal's S in the box sh	-	al (Please sign
Specimen Sigature:		,					
				<u> </u>	-		



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					FOITH NO.	. 43	000341	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVAJ	UNIVERSI	TY,KOLHA	PUR		
•	permission to p he papers mentio	resent myself at the B ned below.	I.A.(CBCS) P	ART 3 SE	M 6 (Geog	յraphy) ex	am to be h	neld in
PRN: 2021047522	2 College: G	opal Krishna Ghokhale(College,Kolha	pur. , KOLH	IAPUR			
Personal Information	on :			M	obile NO :	9 3 0 7	0 7 2 1 8	8
Full Name: VA	ADD VISHAL SHIV	AJI						
Write Name in De	vanagari (Marathi):						
Gender: Male	Religion: HIN	NDU Cast : VA	ADAR	Physica	l Disability	NOT APPL	.ICABLE	
Correspondence A	ddress:							
Om Ganesh Lane	Gadmudshingi							
City kolhapur		PIN Code: 416119	Email	I D: vaishil	vadd8@gma	ail.com		
Study Center: N	I.A.							
Fees Details:				Total Fee ₹	: 0		(Uni.Fee.	. 0)
SEM V), SEM VI)								
Subject Details: 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (Co	mpulsory) AE			
	APHY-X DSE-E231			GEOGRAPI				
	APHY-XII DSE-E23					E234 (Practic	al) Cr. 4	
3/6 75750 GEOGR	APHY-XIV DSE-E23	35 (Practical) Cr. 4					,	
Optional Subjects:		,						
	elief. I understand	all statements made in that in the event of a						
Place:	Date:	Student's Signature (Plea in the box shown below)			Principal's Sin the box sh	-	al (Please sig	n
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



To,						Fo	rm No. :		4 3 0	3900	
The DIRECTOR,	BOARD OF EXAM	NATIONS AND EV	/ALUATION,S	HIVAJI U	JNIVERS	SITY,k	OLHAP	UR			
	permission to phe papers mention		the B.A.(CI	BCS) P	ART 3	SEM	6 (Eng	lish)	exam	to be h	ield in
PRN: 2020013525	5 College: G	opal Krishna Ghok	hale College,	Kolhapu	ır. , KOL	.HAPL	JR				
Personal Information	on :				N	Mobile	NO :	7 2	1923	3 1 7 3	4
Full Name: YA	ADAV ANIKET VISI	HWAS									
Write Name in De	vanagari (Marathi):									
Gender: Male	Religion: HIN	IDU C a	ast: Maratha		Physic	al Dis	ability	NOT A	PPLICA	BLE	
Correspondence A	ddress:										
CHH, SHIVAJI MA	AHARAJ CHOWK	MAGDUM GALLI (GADMUDSHI	NGI KOL	HAPUR						
City KOLHAPUR		PIN Code: 416	119 E	Email ID	: Anike	etyada	v3107@	gmail.d	com		
Study Center: N	I.A.										
Fees Details:				Т	otal Fee	₹: (0		(Uni.Fee.	0)
SEM V), SEM VI)											
Subject Details : 3/5 75531 ENGLIS	SH-VII DSE-E11 Cr. 4	ļ	3/6	75702 E	English (C	ompuls	sory) AEC	CC 6 Cr	r. 4		
3/6 75731 ENGLIS	H-XII DSE-E136 Cr.	4	3/6	75733 E	NGLISH-	XIV D	SE-E138	Cr. 4			
Optional Subjects:											
Declaration: I here knowledge and be liable to be cancelled	elief. I understand										
Place:	Date:	Student's Signatur in the box shown b		strictly			ipal's Sig		•	lease sigi	n
Specimen Sigature:											
<u> </u>											



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,					Form No. :	4310869
The DIRECTOR, I	BOARD OF EXAM	IINATIONS AND EVALUA	TION,SHIVAJ	II UNIVERSI	TY,KOLHAPUR	
Sir,I request the March-2024 for t		resent myself at the B oned below.	.A.(CBCS) F	PART 3 SE	M 6 (Economic	s) exam to be held in
PRN: 2021023680	College: G	Gopal Krishna Ghokhale(College,Kolha	pur. , KOLH	IAPUR	
Personal Information	on : ADAV OMKAR RA	VINDRA		Me	obile NO: 9	8 2 2 0 6 2 9 2 0
Write Name in De						
Gender: Male	Religion: HII	NDU Cast: Ma	aratha	Physica	I Disability NO	T APPLICABLE
Correspondence A	ddress:					
shivaji naga rkolha	apur					
City KOLHAPUR		PIN Code: 416012	Email	I D : omka7	8@gmail.comke	dar42d
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75831	ECONOMIC	S-XII DSE-E196	 Cr. 4
	MICS-XIII DSE-E19		3/6 75833	ECONOMIC	S-XIV DSE-E198	Cr. 4
3/6 75834 ECONO	MICS- XV DSE-E1	99 Cr. 4	3/6 75835	ECONOMIC	S-XVI DSE-E200	Cr. 4
3/6 75702 English	(Compulsory) AECC	6 Cr. 4				
Optional Subjects:						
	elief. I understand	I that in the event of a	any information	on being fo	und false or ind	correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signatu n the box shown b	ure & Seal (Please sign pelow)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,					Form No. :	4 3 0 9 2 4 7
The DIRECTOR, BO	DARD OF EXAM	INATIONS AND EVALU	ATION,SHIVA	II UNIVER	SITY,KOLHAPUF	₹
Sir,I request the p		resent myself at the ned below.	B.A.(CBCS) F	ART 3 S	EM 6 (Geograp	ohy) exam to be held in
PRN: 2021020592	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOl	HAPUR	
Personal Information	:				Mobile NO :	7 2 4 9 4 2 5 4 6 6
Full Name: YED	EKAR ABHISHI	EK POPAT				
Write Name in Deva	anagari (Marathi):				
Gender: Male	Religion: HIN	NDU Cast: N	/laratha	Physic	cal Disability N	OT APPLICABLE
Correspondence Add	ress:					
GADMUDSHINGI						
City KOLHAPUR		PIN Code : 416119	Email	ID: PISH	WAR1994@GM	AIL.COM
Study Center: N.A	١.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM III), SEM IV), S	SEM V), SEM VI)					
Subject Details :						
2/3 73377 Political S	cience -IV DSC-D8	Cr. 4	2/4 73410	English Co	ompulsory (AECC	-4) Cr. 4
3/5 75502 English (C	compulsory) AECC	5 Cr. 4	3/5 75548	GEOGRA	PHY-IX DSE-E108	3 Cr. 4
3/6 75702 English (C	compulsory) AECC	6 Cr. 4	3/6 75746	GEOGRA	PHY-X DSE-E231	Cr. 4
3/6 75747 GEOGRA	PHY-XI DSE-E232	Cr. 4	3/6 75748	GEOGRA	PHY-XII DSE-E233	3 Cr. 4
3/6 75749 GEOGRA	PHY-XIII DSE-E23	4 (Practical) Cr. 4	3/6 75750	GEOGRA	PHY-XIV DSE-E23	85 (Practical) Cr. 4
Optional Subjects:						
	ef. I understand					d correct to the best of my incorrect, my candidature is
	Date:	Student's Signature (Ple in the box shown below	_	'	Principal's Signa in the box showr	ature & Seal (Please sign n below)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



To,			Form No. :	4 3 0 9 4 3 5
The DIRECTOR, BOARD OF EXAM	IINATIONS AND EVALUA	TION,SHIVAJI UNIVER	SITY,KOLHAPUR	
Sir,I request the permission to p March-2024 for the papers mention		3.A.(CBCS) PART 3	SEM 6 (Sociology)	exam to be held in
PRN: 2021044236 College: 0	Gopal Krishna Ghokhale(College,Kolhapur. , KO	LHAPUR	
Personal Information :			Mobile NO: 8 8	47759536
Full Name: ! CHAVAN DURGA	DATTATRAY			
Write Name in Devanagari (Marath	i):			
Gender: Female Religion: HI	NDU Cast: Ma	aratha Phys i	cal Disability NOT	APPLICABLE
Correspondence Address:				
GIRGAON				
City KOLHAPUR	PIN Code : 416013	Email ID: DUF	RGACHAVAN1920@0	GMAIL.COM
Study Center: N.A.				
Fees Details:		Total Fee	e₹: 0	(Uni.Fee. 0)
SEM VI)				
Subject Details : 3/6 75702 English (Compulsory) AECO	6 Cr. 4	3/6 75711 SOCIOLO	OGY-XII DSE-E191 Cr.	4
3/6 75712 SOCIOLOGY-XIII DSE-E19	2 Cr. 4	3/6 75713 SOCIOLO	OGY-XIV DSE-E193 C	r. 4
3/6 75714 SOCIOLOGY-XV DSE-E194	1 Cr. 4		OGY-XVI DSE-E195 Cr	
Optional Subjects:		-		
Optional Gasjooto.				
Declaration: I hereby declare that knowledge and belief. I understand liable to be cancelled or reject.			-	-
Place: Date:	Student's Signature (Plea in the box shown below)	se sign strictly	Principal's Signature in the box shown be	
Specimen Sigature:				

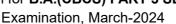
4 3 1 3 0 2 0

Form No.:



SHIVAJI UNIVERSITY, KOLHAPUR

Application Form for B.A.(CBCS) PART 3 SEM 6 (History)





To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (History) exam to be held in March-2024 for the papers mentioned below. PRN: 2021037245 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 8 5 7 8 4 2 2 8 5 ! CHOUGALE VAISHNAVI SAGAR Full Name: Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Cast: Maratha Correspondence Address: MANGALVAR PETH KOLHAPUR **City KOLHAPUR PIN Code: 416012 Email ID:** chougalevaishnavi001@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75556 HISTORY-VII DSE-E61 Cr. 4 3/5 75557 HISTORY-VIII DSE-E62 Cr. 4 3/5 75558 HISTORY-IX DSE-E63 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75756 HISTORY-XII DSE-E186 Cr. 4 3/6 75757 HISTORY-XIII DSE-E187 Cr. 4 3/6 75758 HISTORY-XIV DSE-E188 Cr. 4 3/6 75759 HISTORY-XV DSE-E189 Cr. 4 3/6 75760 HISTORY-XVI DSE-E190 Cr. 4 **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. Principal's Signature & Seal (Please sign Student's Signature (Please sign strictly Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	•	4 3 0 3 1	1 1
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUAT	TON,SHIVAJI UN	IIVERSI	ΓΥ,ΚOLHAF	PUR		
	permission to phe papers mention	present myself at the I ned below.	B.A.(CBCS) PAR	RT 3 S	EM 6 (His	story)	exam to b	e held in
PRN: 2019000600	College: G	opal Krishna Ghokhale C	ollege,Kolhapur.	, KOLH	APUR			
Personal Information	on :			Mo	bile NO :	8 0 5	5 1 9 5	0 0 5
Full Name: ! D	INDE SUPRIYA SA	ARJERAO						
Write Name in De	vanagari (Marathi):						
Gender: Female	Religion: HIN	NDU Cast : Ma	ratha F	Physica	Disability	NOT AF	PPLICABLE	
Correspondence A	ddress:							
POWAR COLONY	Y VRUTVRUKSH (COLONY						
City KOLHAPUR		PIN Code: 416013	Email ID:	supriya	dinde8080@	gmail.c	om	
Study Center: N	I.A.							
Fees Details:			Tota	al Fee ₹:	0		(Uni.	Fee. 0)
SEM VI)								
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4						
Optional Subjects:								
	elief. I understand	all statements made in t that in the event of a						
Place:	Date:	Student's Signature (Pleas in the box shown below)	e sign strictly		rincipal's Sign the box sho	-	Seal (Please w)	sign
Specimen Sigature:								
<u> </u>				•				



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)





4309185 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Geography) exam to be held in March-2024 for the papers mentioned below. PRN: 2021020552 College: Gopal Krishna Ghokhale College, Kolhapur., KOLHAPUR Personal Information: Mobile NO: 7 2 4 9 5 8 8 7 4 1 ! GHOTANE SAYALI RAHUL Full Name: Write Name in Devanagari (Marathi): Cast: KHATIK Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Correspondence Address: **KOLHAPUR City KOLHAPUR PIN Code: 416012** Email ID: SAYALIGHATAN36@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM III), SEM IV), SEM VI) Subject Details: 2/3 73323 English Compulsory- AECC 3 Cr. 4 2/4 73410 English Compulsory (AECC-4) Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75746 GEOGRAPHY-X DSE-E231 Cr. 4 3/6 75747 GEOGRAPHY-XI DSE-E232 Cr. 4 3/6 75748 GEOGRAPHY-XII DSE-E233 Cr. 4 3/6 75749 GEOGRAPHY-XIII DSE-E234 (Practical) Cr. 4 3/6 75750 GEOGRAPHY-XIV DSE-E235 (Practical) Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



Examination, March-2024

4303152 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Geography) exam to be held in March-2024 for the papers mentioned below. PRN: 2019002118 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 7 4 4 7 5 2 3 3 7 6 ! JAGDALE SHABDASHRI SUDHAKAR **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Cast: Maratha Correspondence Address: 906 C WORD, RAVIVARPETH, KOLHAPUR **City KOLHAPUR PIN Code: 416002 Email ID:** shabdashrijagdale3376@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75546 GEOGRAPHY-VII DSE-E106 Cr. 4 3/5 75547 GEOGRAPHY-VIII DSE-E107 Cr. 4 3/5 75548 GEOGRAPHY-IX DSE-E108 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75746 GEOGRAPHY-X DSE-E231 Cr. 4 3/6 75747 GEOGRAPHY-XI DSE-E232 Cr. 4 3/6 75748 GEOGRAPHY-XII DSE-E233 Cr. 4 3/6 75749 GEOGRAPHY-XIII DSE-E234 (Practical) Cr. 4 3/6 75750 GEOGRAPHY-XIV DSE-E235 (Practical) Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) **Specimen** Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



To,						Form No.	:	4 3 0 9 1 7 9
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUAT	ION,SHIVAJ	II UNIVERS	SITY,KOLHAI	PUR	
•	permission to p he papers mentio	•	at the B.	A.(CBCS) F	ART 3 SE	EM 6 (Econ	omics)	exam to be held in
PRN: 2021020462	2 College: G	Sopal Krishna (Ghokhale C	ollege,Kolha	pur. , KOL	HAPUR		
Personal Information	on :				N	lobile NO :	9 1	7 5 7 5 9 5 5 5
Full Name: ! J.	AMADAR MISBAH	I RAFIK						
Write Name in De	vanagari (Marathi	i):						
Gender: Female	Religion: MU	JSLIM	Cast: MU	SLIM	Physic	al Disability	NOT A	APPLICABLE
Correspondence A	ddress:							
2924 B WARD BI	JALI CHOUK JAW	AHAR KOLHA	APUR KARV	EER				
City KOLHAPUR		PIN Code:	416012	Email	ID: pishw	ar1994@gm	ail.com	
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM VI)								
Subject Details : 3/6 75831 ECONO	MICS-XII DSE-E196	S Cr 4		3/6 75832	ECONOMI	CS-XIII DSE-E	=107 Cr	4
3/6 75833 ECONO						CS- XV DSE-		
3/6 75835 ECONO						ompulsory) AE		
		0 01. 4		3/0 /0/02	Liigiion (O	ompaisory) AL	.000	
Optional Subjects:								
	elief. I understand							rrect to the best of my rect, my candidature is
Place:	Date:	Student's Sig	•	e sign strictly	′	Principal's Si in the box sh	•	& Seal (Please sign ow)
Specimen Sigature:			· · · · · · · · · · · · · · · · · · ·					



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	4 3 1 0 8 8 4
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI	UNIVERSI	TY,KOLHAPUR	
	e permission to the papers mention	present myself at the ned below.	B.A.(CBCS)	PART 3 S	SEM 6 (History)	exam to be held in
PRN: 2021027910	O College: G	Gopal Krishna Ghokhale(College,Kolhar	our. , KOLF	IAPUR	
	on : (AMBLE SWATI A. evanagari (Marath			M	obile NO : 9	8 9 0 5 1 6 5 8 9
		•				
Gender: Female	Religion: HII	NDU Cast: MA	AHAR	Physica	I I Disability NOT	*APPLICABLE
Correspondence A AP - TAMGAON T	ddress: FEL - KARVEER D	IST - KOLHAPUR				
City Kolhapur		PIN Code: 416234	Email I	D: pishwa	ar1994@gmail.coi	m
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75556	HISTORY-V	'II DSE-E61 Cr. 4	
3/5 75558 HISTOR	RY-IX DSE-E63 Cr. 4	1	3/6 75702	English (Co	mpulsory) AECC 6	Cr. 4
3/6 75756 HISTOR	RY-XII DSE-E186 Cr	. 4	3/6 75757	HISTORY-X	(III DSE-E187 Cr. 4	ļ
3/6 75758 HISTOR	RY-XIV DSE-E188 C	r. 4	3/6 75759	HISTORY-X	V DSE-E189 Cr. 4	
3/6 75760 HISTOR	RY-XVI DSE-E190 C	r. 4				
Optional Subjects:	:					
	elief. I understand					correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		Principal's Signatu n the box shown b	re & Seal (Please sign elow)
Specimen Sigature:		,				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (English)**Examination, March-2024



4312993 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (English) exam to be held in March-2024 for the papers mentioned below. PRN: 2021037387 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 7 8 8 6 4 2 3 7 3 ! KAWALE GOURI UMESH Full Name: Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Cast: MAHAR Correspondence Address: RAJARAMPURI KOLHAPUR **City KOLHAPUR PIN Code: 416012** Email ID: gouravkavale@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75533 ENGLISH-IX DSE-E13 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75732 ENGLISH-XIII DSE-E137 Cr. 4 3/6 75731 ENGLISH-XII DSE-E136 Cr. 4 3/6 75733 ENGLISH-XIV DSE-E138 Cr. 4 3/6 75734 ENGLISH-XV DSE-E139 Cr. 4 3/6 75735 ENGLISH-XVI DSE-E140 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (English)



То,				Form No. :	4 3 0 9 2 5 4
The DIRECTOR, BOARD OF EXAMINA	TIONS AND EVALUA	ΓΙΟΝ,SHIVAJ	UNIVERS	TY,KOLHAPUR	
Sir,I request the permission to pres March-2024 for the papers mentioned		B.A.(CBCS)	PART 3 S	SEM 6 (English)	exam to be held in
PRN : 2021020486 College : Gopa	l Krishna Ghokhale C	college,Kolhar	our. , KOLH	IAPUR	
Personal Information :			M	obile NO: 9 7	64226435
Full Name: ! KAZI FARIN SHABBIR					
Write Name in Devanagari (Marathi):					
Gender: Female Religion: MUSLI	M Cast: MU	JSLIM	Physica	I Disability NOT	APPLICABLE
Correspondence Address:					
KATYAYANI PARK KALAMBE					
City KOLHAPUR F	PIN Code: 416007	Email I	D: frinkaz	i27@gmail.com	
Study Center: N.A.					
Fees Details:			Total Fee ₹	: 0	(Uni.Fee. 0)
SEM VI)					
Subject Details : 3/6 75702 English (Compulsory) AECC 6 C	Cr. 4	3/6 75731	ENGLISH-X	II DSE-E136 Cr. 4	
3/6 75732 ENGLISH-XIII DSE-E137 Cr. 4		3/6 75733	ENGLISH-X	(IV DSE-E138 Cr. 4	
3/6 75734 ENGLISH-XV DSE-E139 Cr. 4		3/6 75735	ENGLISH-X	VI DSE-E140 Cr. 4	
Optional Subjects:					
optional dubjects.					
Declaration: I hereby declare that all s knowledge and belief. I understand that liable to be cancelled or reject.				•	-
	udent's Signature (Plea the box shown below)	se sign strictly		Principal's Signaturent of the box shown be	e & Seal (Please sign elow)
Specimen Sigature:					



Application Form for B.A.(CBCS) PART 3 SEM 6 (Sociology)



Examination, March-2024

4312951 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Sociology) exam to be held in March-2024 for the papers mentioned below. PRN: 2021036976 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO : 8767996800 ! KHABALE RUTUJA SANJAY Full Name: Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Cast: Maratha Correspondence Address: **NERLI City KOLHAPUR PIN Code: 416234** Email ID: rutujakhabale@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM III), SEM IV), SEM V), SEM VI) Subject Details: 2/3 73323 English Compulsory- AECC 3 Cr. 4 2/3 73380 Psychology- III DSC-D11 Cr. 4 2/4 73410 English Compulsory (AECC-4) Cr. 4 2/4 73423 Logic-T-II Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75611 SOCIOLOGY-VII DSE-E66 Cr. 4 3/5 75612 SOCIOLOGY-VIII DSE-E67 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75712 SOCIOLOGY-XIII DSE-E192 Cr. 4 3/6 75711 SOCIOLOGY-XII DSE-E191 Cr. 4 3/6 75714 SOCIOLOGY-XV DSE-E194 Cr. 4 3/6 75713 SOCIOLOGY-XIV DSE-E193 Cr. 4 3/6 75715 SOCIOLOGY-XVI DSE-E195 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,						Form No. :	4 3	0 9 4 4 3
The DIRECTOR,	BOARD OF EXAM	IINATIONS AND	EVALUATI	ON,SHIVA	JI UNIVERS	SITY,KOLHAP	PUR	
	e permission to the papers mention		at the B	.A.(CBCS)	PART 3	SEM 6 (His	story) exar	m to be held in
PRN: 2021044560	College: C	Gopal Krishna G	hokhale Co	llege,Kolha	pur. , KOL	HAPUR		
	on : (HARAT GOURI K evanagari (Marath				ľ	Mobile NO :	9146	3 1 9 3 3 6
Gender: Female	Religion: HI	NDU	Cast: CHA	MBHAR	Physic	al Disability	NOT APPLI	CABLE
Correspondence A	ddress:							
SUBHASH NAGA	.R							
City KOLHAPUR		PIN Code:	416012	Email	ום : GOU	RIKHARAT@	GMAIL.COM	
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM V), SEM VI)								
Subject Details :								
	(Compulsory) AECC					VII DSE-E61 C		
	RY-VIII DSE-E62 Cr			3/6 75702		ompulsory) AE(
	RY-XII DSE-E186 C			3/6 75757		XIII DSE-E187		
	RY-XIV DSE-E188 C			3/6 75759	HISTORY-	XV DSE-E189	Cr. 4	
	RY-XVI DSE-E190 C	Cr. 4						
Optional Subjects:	i.							
Declaration: I here knowledge and be liable to be cancelled	elief. I understand	d that in the e	vent of any	/ informati	on being f	ound false o	r incorrect,	my candidature is
Place:	Date:	Student's Sign		sign strictl	у	Principal's Sign the box sho		l (Please sign
Specimen Sigature:								



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	4 3 1 0 9 6 1
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVAJ	I UNIVER	SITY,KOLHAPUI	R
Sir,I request the March-2024 for t		present myself at the ned below.	B.A.(CBCS)	PART 3	SEM 6 (Histor	ry) exam to be held in
PRN: 2021023731	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOL	HAPUR	
Personal Information	on : HOT RUTUJA RUI	DESH		ı	Mobile NO :	9 7 6 4 7 5 5 9 5 8
Write Name in De						
Write Nume in Be	variagari (imaratiri	<i>y</i> .				
Gender: Female	Religion: HIN	NDU Cast: M	laratha	Physic	cal Disability N	OT APPLICABLE
Correspondence A	ldress:					
KOLHAPURa						
City KOLHAPUR		PIN Code: 416008	Email	ID: pishv	var1994@gmail.	com
Study Center: N	.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)					
Subject Details :	2 / 4500	0.0.4	L 044 70450	0 : 1)	/ DOO DO	
2/4 73410 English					/ DSC-D31 Cr. 4	
	(Compulsory) AECC		3/5 75556		-VII DSE-E61 Cr.	
	Y-VIII DSE-E62 Cr.		3/5 75558		-IX DSE-E63 Cr. 4	
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75756	HISTORY.	-XII DSE-E186 Cr	. 4
3/6 75757 HISTOR	Y-XIII DSE-E187 Cı	r. 4	3/6 75758	HISTORY.	-XIV DSE-E188 C	r. 4
3/6 75759 HISTOR	Y-XV DSE-E189 Cr	. 4	3/6 75760	HISTORY.	-XVI DSE-E190 C	r. 4
Optional Subjects:						
	lief. I understand	that in the event of	any information	on being t	found false or i	d correct to the best of my incorrect, my candidature is
Place:	Date:	Student's Signature (Ple in the box shown below)		<i>'</i>	Principal's Signa in the box show	ature & Seal (Please sign n below)
Specimen Sigature:		,				



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



To,						Form No. :		4 3 0 7 4 2 3
The DIRECTOR, I	BOARD OF EXAM	IINATIONS AN	D EVALUATI	ON,SHIVAJ	II UNIVERS	ITY,KOLHAP	UR	
•	permission to p he papers mentio	-	at the B.A	(CBCS) P	ART 3 SE	M 6 (Geogr	aphy)	exam to be held in
PRN: 2021043603	B College: G	Gopal Krishna (Shokhale Co	llege,Kolha	pur. , KOLI	HAPUR		
Personal Information	on :				N	lobile NO :	9 0	9 6 7 8 4 5 4 5
Full Name: ! N	ALAWADE PALL	AVI BABASO						
Write Name in De	vanagari (Marathi	i):						
Gender: Female	Religion: HI	NDU	Cast: Mara	atha	Physic	al Disability	NOT A	PPLICABLE
Correspondence A	ddress:							
TAMGAON								
City KOLHAPUR		PIN Code:	416234	Email	ID: PALL	AVINALAWAD	E12@	GMAIL.COM
Study Center: N	I.A.							
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)
SEM VI)								
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr. 4	1	3/6 75746	GEOGRAP	HY-X DSE-E23	31 Cr. 4	ļ
3/6 75747 GEOGR	APHY-XI DSE-E232	2 Cr. 4	1	3/6 75748	GEOGRAP	HY-XII DSE-E2	233 Cr.	4
3/6 75749 GEOGR	APHY-XIII DSE-E23	34 (Practical) Cr	. 4	3/6 75750	GEOGRAP	HY-XIV DSE-E	235 (Pr	actical) Cr. 4
Optional Subjects:								
	elief. I understand							rect to the best of my rect, my candidature is
Place:	Date:	Student's Sig in the box sho	•	sign strictly	/	Principal's Sig		& Seal (Please sign ow)
Specimen Sigature:								



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,					Form No. :		4 3 1 3 0 4 5
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ATION,SHIVA	II UNIVERS	ITY,KOLHAP	UR	
	permission to pi he papers mentio	resent myself at the E ned below.	3.A.(CBCS) F	ART 3 SE	M 6 (Geogr	aphy)	exam to be held in
PRN: 2021036926	6 College : G	opal Krishna Ghokhale	College,Kolha	pur. , KOLH	IAPUR		
	on : ATIL ADITI SANJA evanagari (Marathi			М	obile NO :	8 0	10841212
Gender: Female	Religion: HIN		aratha	Physica	al Disability	NOT A	PPLICABLE
Correspondence A	ddress:						
SAMBHAJI NAGA	AR KOLHAPURa						
City KOLHAPUR		PIN Code: 416012	Email	ID: aditipa	ıtil@gmail.cor	m	
Study Center: N	I.A.						
Fees Details:				Total Fee ₹	: 0		(Uni.Fee. 0)
SEM III), SEM V),	SEM VI)						
Subject Details : 2/3 73323 English	Compulsory- AECC	3 Cr. 4	3/5 75502	English (Co	mpulsory) AEC	 CC 5 Cr	. 4
3/5 75548 GEOGR	APHY-IX DSE-E108	Cr. 4	3/6 75702	English (Co	mpulsory) AEC	CC 6 Cr	. 4
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRAP	HY-XI DSE-E2	.32 Cr. 4	1
3/6 75748 GEOGR	RAPHY-XII DSE-E233	3 Cr. 4	3/6 75749	GEOGRAP	HY-XIII DSE-E	234 (Pra	actical) Cr. 4
3/6 75750 GEOGR	RAPHY-XIV DSE-E23	5 (Practical) Cr. 4					
Optional Subjects:							
	elief. I understand				•		rect to the best of my ect, my candidature is
Place:	Date:	Student's Signature (Plein the box shown below)			Principal's Sig		& Seal (Please sign w)
Specimen Sigature:							



Application Form for B.A.(CBCS) PART 3 SEM 6 (Geography)



To,						Form No. :		4 3 0 4 0 3 3
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND	EVALUATION,S	HIVAJI UNIVE	RSIT	,KOLHAF	PUR	
	permission to pl he papers mentio		at the B.A.(CB0	CS) PART 3	SEM	6 (Geog	raphy)	exam to be held in
PRN: 2020013530	College: G	opal Krishna Gl	nokhale College,	Kolhapur. , K0	OLHA	PUR		
Personal Information	on :				Mob	ile NO :	7 0	5 8 9 0 5 9 8 5
Full Name: ! P.	ATIL SNEHAL PAI	NDURANG						
Write Name in De	vanagari (Marathi):						
Gender: Female	Religion: HIN	NDU	Cast: Maratha	Phys	sical [Disability	NOTA	PPLICABLE
Correspondence A	ddress:							
PLOT NO 30 MAF	RATHA COLNY PA	NCHGAON KOI	LHOPUR					
City KOLHAPUR		PIN Code: 4	116013 i	E mail ID : pat	tilamb	ika39@gm	nail.com	1
Study Center: N	I.A.							
Fees Details:				Total Fe	ee ₹:	0		(Uni.Fee. 0)
SEM VI)								
Subject Details :								
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4						
Optional Subjects:								
	elief. I understand							rrect to the best of my rect, my candidature is
Place:	Date:	Student's Signatin the box show	ature (Please sign vn below)	strictly		ncipal's Sig	-	& Seal (Please sign ow)
Specimen Sigature:								
y					•			



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Economics)**



То,					Form No. :	4 3 1 1 1 0 8
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALU	ATION,SHIVAJ	II UNIVERS	ITY,KOLHAPUR	
Sir,I request the March-2024 for t		resent myself at the ned below.	B.A.(CBCS) P	ART 3 SE	EM 6 (Economics	e) exam to be held in
PRN: 2021027408	College: G	opal Krishna Ghokhale	College,Kolha	pur. , KOLI	HAPUR	
Personal Information	on : OWAR PRANALI	SAJJAN		M	lobile NO : 8 (6 6 9 5 7 0 1 6 0
Write Name in De	vanagari (Marathi):				
Gender: Female	Religion: Hil	NDU Cast: N	Maratha	Physic	al Disability NOT	APPLICABLE
Correspondence A	ddress:					
KOLHAPUR						
City KOLHAPUR		PIN Code: 416007	Email	I D : prana	lipowar86@gmail.	com
Study Center: N	l.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM III), SEM IV),	SEM V), SEM VI)					
Subject Details :	Camanulaam / AECC	2.04	1 0/4 70440	Fralish Car	(AECC 4)	C- 4
	Compulsory- AECC				mpulsory (AECC-4)	
	ogy-VI DSC-D40 Cr		-		ompulsory) AECC 5	
	MICS IX DSE E73		3/5 75632		CS-VIII DSE-E72 Cr	
	MICS-IX DSE-E73 MICS-XI DSE-E75		3/5 75634		CS-X DSE-E74 Cr. 4 CS-XII DSE-E196 C	
	MICS-XIII DSE-E19		3/6 75831		CS-XIV DSE-E198 (
	MICS-XIII DSL-L19		3/6 75835		CS-XVI DSE-E200 (
3/6 75702 English			3/0 / 3033	LCONOIVII	DS-XVI DSL-L200 V	51. 4
	` ' ' ' ' '	0 01.4				
Optional Subjects:						
	lief. I understand					correct to the best of my correct, my candidature is
Place:	Date:	Student's Signature (Plo in the box shown below	-		Principal's Signatur	re & Seal (Please sign elow)
Specimen Sigature:						



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



To, Form No.: 4 3 1 2 8 0 5

The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021024785 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 9 8 8 1 6 7 8 4 8 0 ! POWAR RUTUJA SUBHASH **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Cast: Maratha Correspondence Address: **City KOLHAPUR PIN Code: Email ID:** kiranmulik094@gmail.com Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM IV), SEM V), SEM VI) Subject Details: 2/4 73410 English Compulsory (AECC-4) Cr. 4 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature:



Application Form for B.A.(CBCS) PART 3 SEM 6 (Marathi)



To,						Form No.	:	4 3 0 8 4 5 4	
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUATION	ON,SHIVAJ	I UNIVERS	SITY,KOLHA	PUR		
Sir,I request the March-2024 for t	permission to l	-	lf at the B.	A.(CBCS)	PART 3	SEM 6 (M	arathi)	exam to be held	in
PRN: 2021019396	College: G	Gopal Krishna (Ghokhale Co	llege,Kolha	pur. , KOL	HAPUR			
Personal Information	on :				ı	Mobile NO :	9 7	3 0 9 8 4 3 1 7	
Full Name: ! S	HINDE AKNANKS	HA ANANDA							
Write Name in De	vanagari (Marathi	<u> </u>						·	
Gender: Female	Religion: HI	NDU	Cast: Mara	itha	Physic	al Disability	NOTA	PPLICABLE	
Correspondence A	ddress:								
PLOT NO 7, S.T.	KAMGAR HOUSIN	G SOCIETY, I	RAJARMAPU	RI 13 LINE					
City KOLHAPUR		PIN Code:	416008	Email	I D: anan	dashinde197	7@gma	il.com	
Study Center: N	I.A.								
Fees Details:					Total Fee	₹: 0		(Uni.Fee. 0)	
SEM VI)									
Subject Details : 3/6 75702 English	(Compulsory) AECC	6 Cr 4	ı	3/6 75771	MARATHI	XII DSE-E126	S Cr 4		
3/6 75772 MARATI	, , ,					XIV DSE-E12			
3/6 75774 MARATI									
		. 4		3/6 /5//5	WARAITI	XVI DSE-E13	U Cr. 4		
Optional Subjects:									
	elief. I understand							rrect to the best of rect, my candidature	
Place:	Date:	Student's Sig	nature (Please own below)	sign strictly	′	Principal's S in the box sh	•	& Seal (Please sign ow)	
Specimen Sigature:			, , , , , , , , , , , , , , , , , , ,						



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	4 3 0 9 4 3 8
The DIRECTOR,	BOARD OF EXAM	INATIONS AND EVA	LUATION,SHIVA	II UNIVERS	ITY,KOLHAPUF	
	permission to phe papers mention	present myself at the	the B.A.(CBCS)	PART 3	SEM 6 (Histor	y) exam to be held in
PRN: 2021044240	College: G	opal Krishna Ghokha	ale College,Kolha	pur. , KOLI	HAPUR	
Personal Information	on :			M	lobile NO: 7	7 3 9 7 8 3 8 3 1 8
Full Name: ! S	WAMI SADHANA	PALLANI				
Write Name in De	vanagari (Marathi):				
Gender: Female	Religion: HI	NDU Cas	t: Maratha	Physic	al Disability No	OT APPLICABLE
Correspondence A	ddress:					
JAWAHAR NAGA	R					
City KOLHAPUR		PIN Code: 4160	12 Email	ID: SADH	IANASWAMI3@	GMAIL.COM
Study Center: N	I.A.					
Fees Details:				Total Fee	₹: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/5 75556	HISTORY-	VII DSE-E61 Cr. 4	1
3/6 75702 English	(Compulsory) AECC	6 Cr. 4	3/6 75756	HISTORY-	XII DSE-E186 Cr.	4
3/6 75757 HISTOR	Y-XIII DSE-E187 C	r. 4	3/6 75758	HISTORY-	XIV DSE-E188 Cr	: 4
3/6 75759 HISTOR	RY-XV DSE-E189 Ci	. 4	3/6 75760	HISTORY-	XVI DSE-E190 Cr	: 4
Optional Subjects:						
Declaration: I here	eby declare that a	all statements made	in this applicati	on are true	e complete and	correct to the best of my
	elief. I understand					ncorrect, my candidature is
Place:	Date:	Student's Signature in the box shown be	•		Principal's Signatin the box shown	ture & Seal (Please sign below)
Specimen Sigature:						



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Geography)**



То,					Form No. :	4 3 0 8 9 7 7
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	ΓΙΟΝ,SHIVAJ	I UNIVERS	TY,KOLHAPUF	2
Sir,I request the March-2024 for t		resent myself at the Banned below.	.A.(CBCS) P	ART 3 SE	M 6 (Geograp	hy) exam to be held in
PRN: 2021044543	College: C	Gopal Krishna Ghokhale C	College,Kolha	pur. , KOLF	IAPUR	
Personal Information	on :			M	obile NO : 9	5 4 5 1 1 3 3 0 8
Full Name: ! V	IJAYANAGARE P	UJARI DIVYA AVINASH				
Write Name in De	vanagari (Marath	i):				
Gender: Female	Religion: HII	NDU Cast : MA	\HAR	Physica	I l Disability NO	OT APPLICABLE
Correspondence A	ddress:					
UDYAM NAGAR						
City KOLHAPUR		PIN Code : 416012	Email I	D: DIVYA	VIJAYNAGRE@	GMAIL.COM
Study Center: N	I.A.					
Fees Details:				Total Fee ₹	: 0	(Uni.Fee. 0)
SEM V), SEM VI)						
Subject Details : 3/5 75502 English	(Compulsory) AECC	5 Cr. 4	3/6 75702	English (Co	mpulsory) AECC	6 Cr. 4
3/6 75746 GEOGR	APHY-X DSE-E231	Cr. 4	3/6 75747	GEOGRAPI	HY-XI DSE-E232	Cr. 4
3/6 75748 GEOGR	APHY-XII DSE-E23	3 Cr. 4	3/6 75749	GEOGRAPI	HY-XIII DSE-E23	4 (Practical) Cr. 4
3/6 75750 GEOGR	APHY-XIV DSE-E2	35 (Practical) Cr. 4				
Optional Subjects:						
	elief. I understand					correct to the best of my ncorrect, my candidature is
Place:	Date:	Student's Signature (Pleasin the box shown below)	se sign strictly		Principal's Signa in the box shown	ture & Seal (Please sign below)
Specimen Sigature:						



Application Form for B.A.(CBCS) PART 3 SEM 6 (Economics)



То,								Form No	.:	4 3 1	3 0 2 7
The DIRECTOR, I	BOARD OF EXAM	INATIONS AN	D EVALUA	TION,	SHIVAJ	UNIVE	ERSIT	Y,KOLHA	APUR		
	permission to pi he papers mentio		at the B	A.(CE	SCS) PA	ART 3	SEM	1 6 (Eco	nomics)	exam	to be held in
PRN: 2021027758	8 College : G	opal Krishna (Shokhale (College	e,Kolhar	our. , K	(OLH	APUR			
Personal Information	on :						Мо	bile NO :	9 6	8 9 9	7 4 2 9 9
Full Name: ! W	VADAR `UJWALA I	RAMU									
Write Name in De	vanagari (Marathi):									
Gender: Female	Religion: HIN	IDU	Cast: VA	ADAR		Phy	ysical	Disability	y NOTA	PPLICA	ABLE
Correspondence A	ddress:										
705 A WARD SAF	RNAIK COLONY SI	HIVAJI PETH									
City KOLHAPUR		PIN Code:	416012		Email I	D: aa	abc@g	gmail.com	1		
Study Center: N	I.A.										
Fees Details:						Total F	ee ₹:	0		(Uni.Fee. 0)
SEM IV), SEM V),	SEM VI)										
Subject Details: 2/4 73410 English	Compulsory (AECC-	-4) Cr. 4		3/5	75502	English	n (Com	npulsory) A	ECC 5 C	·. 4	
3/6 75831 ECONO	MICS-XII DSE-E196	Cr. 4		3/6	75832	ECON	OMICS	S-XIII DSE	-E197 Cr.	4	
3/6 75833 ECONO	MICS-XIV DSE-E198	3 Cr. 4		3/6	75834	ECON	OMICS	S- XV DSE	E-E199 Cı	. 4	
3/6 75835 ECONO	MICS-XVI DSE-E200	O Cr. 4		3/6	75702	English	n (Com	npulsory) A	ECC 6 C	r. 4	
Optional Subjects:	:										
Declaration: I here knowledge and be liable to be cancelled	elief. I understand										
Place:	Date:	Student's Signing the box sho	•	_	strictly	,		rincipal's s	-	•	Please sign
Specimen Sigature:											



Application Form for B.A.(CBCS) PART 3 SEM 6 (History)



To,					Form No. :	431414	46
The DIRECTOR, I	BOARD OF EXAM	INATIONS AND EVALUA	TION,SHIVAJI UN	— IVERSIT	Y,KOLHAPUR		
Sir,I request the March-2024 for t		present myself at the ned below.	B.A.(CBCS) PAF	RT 3 SE	M 6 (History)	exam to be	e held in
PRN: 2021043672	2 College: G	Sopal Krishna Ghokhale(College,Kolhapur.	, KOLHA	PUR		
Personal Information	on :			Mob	ile NO : 7 0	3 8 6 6 9 1	5 1
Full Name: ! W	VAGHMARE GAYA	TRI SHANTILAL					
Write Name in De	vanagari (Marath	<u> </u>					
Gender: Female	Religion: HII	NDU Cast: M	AHAR I	Physical I	Disability NOT	APPLICABLE	
Correspondence A							
RAJENDRA NAGA	AR						
City KOLHAPUR		PIN Code: 416008	Email ID:	GAYATR	IWAGHMARE20	04@GMAIL.C	ОМ
Study Center: N	I.A.						
Fees Details:			Tota	al Fee ₹:	0	(Uni.F	ee. 0)
SEM IV), SEM V),	SEM VI)						
Subject Details : 2/4 73410 English	Compulsory (AECC	-4) Cr. 4	2/4 73423 Log	ic-T-II Cr.	4		
	(Compulsory) AECC				DSE-E61 Cr. 4		
	Y-VIII DSE-E62 Cr.		3/5 75558 HIS	STORY-IX [OSE-E63 Cr. 4		
3/5 75559 HISTOR	Y-X DSE-E64 Cr. 4		3/6 75702 Eng	glish (Comp	oulsory) AECC 6 C	r. 4	
3/6 75756 HISTOR	RY-XII DSE-E186 Cr	. 4	3/6 75757 HIS	TORY-XIII	DSE-E187 Cr. 4		
3/6 75758 HISTOR	Y-XIV DSE-E188 C	r. 4	3/6 75759 HIS	STORY-XV	DSE-E189 Cr. 4		
3/6 75760 HISTOR	Y-XVI DSE-E190 C	r. 4					
Optional Subjects:							
	elief. I understand	all statements made in that in the event of a					
Place:	Date:	Student's Signature (Plea in the box shown below)	se sign strictly		ncipal's Signature the box shown bel		sign
Specimen Sigature:							



Application Form for **B.A.(CBCS) PART 3 SEM 6 (Hindi)**Examination, March-2024



4314345 Form No.: To, The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR Sir,I request the permission to present myself at the B.A.(CBCS) PART 3 SEM 6 (Hindi) exam to be held in March-2024 for the papers mentioned below. PRN: 2021044569 College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR Personal Information: Mobile NO: 8 6 2 4 0 4 6 2 9 7 ! YADAV ANITA SALIKRAM **Full Name:** Write Name in Devanagari (Marathi): Physical Disability NOT APPLICABLE Gender: Female Religion: HINDU Cast: Maratha Correspondence Address: City **PIN Code: Email ID:** YADAV26ANITA@GMAIL.COM Study Center: N.A. Fees Details: Total Fee ₹: (Uni.Fee. 0) SEM V), SEM VI) Subject Details: 3/5 75502 English (Compulsory) AECC 5 Cr. 4 3/5 75553 HINDI-IX DSE-E8 Cr. 4 3/6 75702 English (Compulsory) AECC 6 Cr. 4 3/6 75751 HINDI-XII DSE-E131 Cr. 4 3/6 75752 HINDI-XIII DSE-E132 Cr. 4 3/6 75753 HINDI-XIV DSE-E133 Cr. 4 3/6 75754 HINDI-XV DSE-E134 Cr. 4 3/6 75755 HINDI-XVI DSE-E135 Cr. 4 **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. Student's Signature (Please sign strictly Principal's Signature & Seal (Please sign Place: Date: in the box shown below) in the box shown below) Specimen Sigature: