



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058489 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 8 5 0 7 3 6 1 5**Full Name:** AGALE PRATHAM SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AT POST SIDDHANERLI, KAGAL, KOLHAPUR

City KAGAL**PIN Code:** 416232**Email ID:** prathamagale386@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058498 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 6 5 7 0 5 3 4 6 0****Full Name:** **AMTE VAIBHAV ANNASABHEB****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GOKUL SHIRGAON , KOLHAPUR

City BEED**PIN Code:** 416021**Email ID:** vaibhavamte713@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058502 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 6 0 1 2 8 8 7 7**Full Name:** AWALE AVINASH DINKAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHIVNERI COLONY, RES NO179, PLOT NO C/4/B, PACHGAON ROAD, KOLHAPUR

City KOLHAPUR**PIN Code:** 416013**Email ID:** aviawale7572@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058518 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 9 9 8 3 3 7 9 6**Full Name:** BAGWALE ABID MAHAMADHANIF**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

623/B JAWAHAR NAGAR, KOLHAPUR

City KOLHAPUR**PIN Code:** 416001**Email ID:** abidbagwale85@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

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PRN: 2023059001 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 6 6 7 1 3 0 0**Full Name:** BAGWAN ASKIN DILAWAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Vikram Nagar, Christian vasahat, kolhapur

City Kolhapur**PIN Code:** 416005**Email ID:** askinbagwan21@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

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PRN: 2023059250 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 0 5 7 1 1 9 5 0**Full Name:** BAMANE VAISHANAVI SURESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SUBHASH NAGAR

City SUBHASH NAGAR**PIN Code:** 416008**Email ID:** vaishnavisbamane2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

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1/2 87988 Insurance Paper-II Cr. 4

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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058522 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 3 2 9 9 9 4 2 4 7**Full Name:** BANDAR SHARVIL SHARAD**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PATTAN KODOLI, HUPARE NAGAR, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059251 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 2 5 9 2 9 7 9 3**Full Name:** BANGI AYAN SARDAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416008**Email ID:** ayanbangi148@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

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1/2 87988 Insurance Paper-II Cr. 4

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PRN: 2023058534 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 7 5 5 2 0 1 7 2**Full Name:** BHAMBURE AMIT MANOJ**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416005**Email ID:** amitmbhambure2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

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PRN: 2023059253 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 4 5 0 1 4 7 2 8**Full Name:** BHANDAVALE PRASAD DHANANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VADAONKAR

City VADAONKAR**PIN Code:** 416232**Email ID:** prasadbhandavle7@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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PRN: 2023059255 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 5 6 7 2 0 0 9 4**Full Name:** BHATALE ROHAN RATNAKAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHIVNERI COLONY , PACHGAON , KOLHAPUR

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

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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PRN: 2023058538 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 4 7 7 3 5 7**Full Name:** BHOSALE ADITYA VINOD**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

692/29 B WARD SAMBHAJI NAGAR, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

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PRN: 2023059352 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 4 8 5 8 1 4 6 1 4**Full Name:** BHOSALE GAURAV GANESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TEMBAI WADI

City KOLHAPUR**PIN Code:** 416005**Email ID:** gauravgbhosale2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87965 Principles of Marketing Paper-I Cr. 4	1/1 87973 Insurance Paper-I Cr. 4
1/1 87976 Business Communication Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II Cr. 4

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PRN: 2023059002 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 1 5 2 9 0 9 1 9 2**Full Name:** BHOSALE KEDAR SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2812 B Ward belbag, kolhapur

City Kolhapur**PIN Code:** 416012**Email ID:** kedarbhosale213@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059256 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 2 8 4 8 5 3 6 8 5**Full Name:** BHOSALE ROHIT SHRIKANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BUDHWAR PETH

City BUDHWAR PETH**PIN Code:** 416012**Email ID:** yashb4755@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 7 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059258 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 8 5 4 2 2 1**Full Name:** BHOSALE SANKET SUDHIR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SAMBHAJINAGAR

City SAMBHAJINAGAR**PIN Code:** 416012**Email ID:** 42221sanket@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 8 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058546 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 4 2 1 7 8 9 9 0 9**Full Name:** BIRAJE LAXMAN RAJU**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJENDRA NAGAR , KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 0 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059259 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 3 5 0 8 2 6 5 8 3**Full Name:** BUDAKE RITESH SHRIKANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

UJALAIWADI

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 8 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059260 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 9 2 1 7 3 0 5 7 2**Full Name:** CHAVAN ATHARV AMOL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MOREWADI

City MOREWADI**PIN Code:** 416013**Email ID:** atharvc094@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 3 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059263 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 8 3 0 6 3 4 8 0 3**Full Name:** CHAVAN PARTH DHANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SOLONKE PARK

City SOLONKE PARK**PIN Code:** 416012**Email ID:** parthchavan68@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058556 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 2 0 5 0 9 9 9 6**Full Name:** CHAVAN SANKET PRAVIN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

767/18 PLOT NO.2 NANDANVAN COLONY RAMANAND NAGAR ROAD, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 7 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059265 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 2 1 7 5 7 2 2 5**Full Name:** CHIKODIKAR MOIN MAHAMADGOUS**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAWAHAR NAGAR

City JAWAHAR NAGAR**PIN Code:** 416012**Email ID:** mahamadgous1118@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4	1/1 87964 Management Functions & Applications Paper-I Cr. 4
1/1 87976 Business Communication Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 7 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059266 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 0 1 0 8 1 7 9 5 8**Full Name:** CHITTEWAN MUSTFA IFTAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VIKRAM NAGAR SHIROTE CHALL 1 LANE , KOLHAPUR

City KOLHAPUR**PIN Code:** 416005**Email ID:** toyatz07@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4 | 1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4 | 1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 8 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059267 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 3 0 3 8 0 6 0 5**Full Name:** CHOUGALE ABHIJIT BABURAO**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RADHANAGARI

City RADHANAGARI**PIN Code:** 416211**Email ID:** abhijitchougale2262@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 6 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058565 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 1 8 5 1 7 7 6**Full Name:** CHOUGULE ADITYA SUBHASH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** JAIN**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KOGNOLI, RAVAL GALLI, NIPPANI, BELGAUM

City: BELGAUM**PIN Code:** 591229**Email ID:** adityachougule01@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058569 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 4 4 7 5 5 0 3 9 7**Full Name:** CHOUGULE OM TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

CHOUGULE GALLI, UCHGAON, KOLHAPUR

City UCHGOAN**PIN Code:** 416005**Email ID:** omchougule7474@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 6 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058863 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 7 6 6 6 5 4 1 0**Full Name:** CHOUGULE PRADIP MAHADEV**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

POWAR LANE , NAGAON , KOLHAPUR

City KOLHAPUR**PIN Code:** 416122**Email ID:** pradipchogule5410@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 2 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059264 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 2 0 8 0 6 8 1 8 0**Full Name:** CHOUHAN HITESH MAHENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

401 B WARD NEAR BALGOPAL TALIM MADAL MANGALWAR PETH , KOLHAPUR

City KARVEER**PIN Code:** 416012**Email ID:** hiteshchouhan624@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058597 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 4 4 9 3 7 7 2**Full Name:** DAVANE ARYAN RAVINDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HUNKAR COLONY, MANERMALA, UCHGAON, KOLHAPUR

City UCHGOAN**PIN Code:** 416005**Email ID:** aryandavane0103@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 3 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058604 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 8 3 8 2 9 7 9 2**Full Name:** DAWALE YASH SHASHIKANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** DOMBARI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YADAV NAGAR , KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** yashsdawale2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058616 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 7 6 1 6 3 9 4 5**Full Name:** DESAI OMKAR SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AT POST SHANKARWADI TAL KAGAL DIST KOLHAPUR

City SHNAKARWADI**PIN Code:** 416232**Email ID:** omkard673@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 7 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058620 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 7 6 0 9 0 5 3 4**Full Name:** DEVEKAR ABHISHEK RAJESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416012**Email ID:** abhishekrdevekar2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058625 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 1 4 9 2 0 9 6 6 5**Full Name:** DEVKATE SHRISHANT SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

INGALI ROAD, PATTAN KODOLI, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 7 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059004 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 8 8 0 6 3 4 8 2**Full Name:** DHARURKAR RITESH RAHUL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416012**Email ID:** riteshdharurkar2@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 9 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059328 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 4 2 0 8 4 7 2 7 2**Full Name:** FADATARE OM SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HUPRI

City KOLHAPUR**PIN Code:** 416203**Email ID:** fadatareom@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 4 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059270 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 7 6 3 3 3 6 1 3**Full Name:** GADEKAR PRATIK LAXMAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

ROHIDAS CHOUK

City ROHIDAS CHOUK**PIN Code:** 416216**Email ID:** pratikgadekar8300@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 2 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058707 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 3 7 1 8 2 7 6 6 8**Full Name:** GAJAGESHWER KARAN SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** JOSHI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

C WARD , TEMBLAI WADI , KOLHAPUR

City KOLHAPUR**PIN Code:** 416005**Email ID:** karangageshwer881@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 5 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058712 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 6 7 8 7 1 0 1 0**Full Name:** GAVALI OM TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** GAVALI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGLWAR PETH

City MANGLWAR PETH**PIN Code:** 416012**Email ID:** omgawali1012@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058721 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 8 2 0 8 7 0 9 2 0**Full Name:** GAVALI SAURABH SURESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1888 'D' WARD SHANIWAR PETH, LONAR GALLI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416002**Email ID:** saurabhgavali1024@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058724 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 1 1 1 1 4 1 2 8**Full Name:** GAVALI SHUBHAM RAJENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1924 'D' GAVALI GALLI , SHANIWAR PETH, KOLHAPUR

City KOLHAPUR**PIN Code:** 416002**Email ID:** shubhamgavli1402@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 9 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058725 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 4 1 1 3 6 7 1 0 3**Full Name:** GAYAKWAD UTTAM SURESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HANCHINAL , NIPPANI , BELAGAVI , KARANATAKA

City BELGAVI**PIN Code:** 591215**Email ID:** gaykwaduttam326@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 7 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058726 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 6 2 0 4 7 7 4 2 8**Full Name:** GHODAKE SAI BALKRISHNA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** KHATIK**Physical Disability** NOT APPLICABLE**Correspondence Address:**

791 ' B' WARD MALI GALLI RAVIWAR PETH , KOLHAPUR

City KOLHAPUR**PIN Code:** 416002**Email ID:** ghodakesai78@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 5 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058739 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 6 8 9 8 1 8 8 6**Full Name:** GURAV RUTVIK SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

V M NEW WADADE, KOLHAPUR

City kolhapur**PIN Code:** 416119**Email ID:** rutvikgurav44@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058742 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 1 0 3 7 8 0 0 5**Full Name:** HAKIM ANAS RIYAJ**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YADAV NAGAR, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** anashakim1705@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 9 0 0 0 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059355 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 4 6 1 9 4 6 2 2**Full Name:** HARER SAHIL SHANTARAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TAMGAON

City KOLHAPUR**PIN Code:** 416234**Email ID:** sahilharer790@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 6 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059272 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 7 5 7 6 2 0 5 8**Full Name:** HAYAL SAIRAJ SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SHIMPI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MURUD

City MURUD**PIN Code:** 416219**Email ID:** sairajhayal22@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 7 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058748 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 2 1 4 0 4 0 4 5**Full Name:** HIRDEKAR SUYASH SHAHAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HOCKEY STADIUM, BALAJI PARK, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 7 9 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058751 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 5 5 8 2 8 9 7 1 5**Full Name:** **INGALE PRATHAMESH BHARAT****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGESHWAR GALLI, UCHGAON, KOLHAPUR

City UCHGOAN**PIN Code:** 416005**Email ID:** prathameshingale989@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058754 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 2 3 7 9 3 5 0 2 3**Full Name:** JADHAV ABHISHEK VIJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JADHAV LANE , NEAR GANESH TEMPLE/PATTAN KODOLI, HATKANANGALE, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87964 Management Functions & Applications Paper-I Cr. 4
1/2 87977 Micro Economics Paper-II Cr. 4	1/2 87978 Financial Accounting Paper-II Cr. 4
1/2 87979 Management Functions and Applications Paper-II Cr.	1/2 87980 Principles of Marketing Paper-II Cr. 4
1/2 89309 SEC II - Constitution of Indian and Local Self Governn	1/2 87988 Insurance Paper-II Cr. 4
1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 6 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059273 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 0 5 8 0 8 6 5 9 0**Full Name:** JADHAV ADESH PANDURANG**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416234**Email ID:** adeshjadhav2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 1 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058761 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 9 7 5 9 0 3 8 5 5**Full Name:** JADHAV PARAS PARSHARAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PATTAN KODOLI, HUPARI NAGAR, KOLHAPUR

City PATTAN KODOLI**PIN Code:** 416202**Email ID:** parasjadhav099@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 9 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058961 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 3 2 9 3 2 9 1 9 4**Full Name:** JADHAV PRANAY VIJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2811 B ward belbag, kolhapur

City Kolhapur**PIN Code:** 416012**Email ID:** pranayjadhav0707@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058763 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 3 7 0 7 5 1 7 3 6****Full Name:** **JADHAV RAJ SURESH****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JADHAV MALA

City KAGAL**PIN Code:** 416216**Email ID:** rajjadhav04072005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 1 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058765 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 5 5 2 0 3 8 8 9 6**Full Name:** JADHAV ROHAN RAVINDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** NHAVI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KADAMWADI

City KADAMWADI**PIN Code:** 416003**Email ID:** roahnjadhav1352005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

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Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 1 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058775 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 9 9 9 4 8 7 1 9 9**Full Name:** JADHAV SAMARTH SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SUBHASNAGAR

City SUBHASNAGAR**PIN Code:** 416012**Email ID:** samarthjadhav082004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
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Form No. : **4 3 8 9 4 3 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058730 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 7 4 3 9 3 1 6 3 2**Full Name:** JADHAV SUDESH PAVAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KAGAL

City KAGAL**PIN Code:** 416216**Email ID:** sudeshjadhav443@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 3 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059274 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 4 4 9 4 0 4**Full Name:** JADHAV TANISHK MILIND**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAVIWAR PETH

City RAVIWAR PETH**PIN Code:** 416012**Email ID:** jadhavnishk7@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2022031736 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 3 1 8 9 5 1**Full Name:** JADHAV VIRAJ SHASHIKANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

UNCHGAON, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 7 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058733 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 7 9 9 8 2 8 2 1 4**Full Name:** JADHAV VISHAL KASHINATH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

767/2 B WARD BEHIND ITI NEAR SHINDE ANGAN , KOLHAPUR

City KOLHAPUR**PIN Code:** 416007**Email ID:** vishaljadhav2803@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 9 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059275 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 6 8 2 8 9 2 4 2**Full Name:** JAISWAL ABHINAY GOPAL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KANERI

City KANERI**PIN Code:** 416234**Email ID:** abhinayij923@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 9 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058865 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 9 5 0 3 7 9 0 9 0**Full Name:** KAKADE SHREEVARDHAN ANANDA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Vasant chavan, Doulat Nagar, Rajarampuri

City Kolhapur**PIN Code:** 416008**Email ID:** shrivarshankakade6@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 9 0 1 7 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023061377 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 2 7 6 2 4 9 3 9 9**Full Name:** KALE PRUTHVIRAJ MAHENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** KHATIK**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHANIWAR PETH

City KOLHAPUR**PIN Code:** 416002**Email ID:** kalepruthvirahj842@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 3 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059276 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 6 5 1 5 2 0 2 1**Full Name:** KALE SUSHANT GULAB**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** TELI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GOKUL

City GOKUL**PIN Code:** 416012**Email ID:** sush007@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 1 0 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058745 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 3 2 2 8 2 4 7 1**Full Name:** KALUGADE SHREYAS PRAKASH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

97 B WARD VARSHA NAGAR , KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 3 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058753 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 2 0 8 4 1 3 5 7 5**Full Name:** KAMBLE HARSHAD SATTAPPA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VASANT CHAVAN , DAULAT NAGAR , RAJARAMPURI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** harshadgamer2021@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058760 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 6 5 8 6 7 7 6 8**Full Name:** KAMBLE PRATHAMESH PRASHANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TEMLAI RELWAY FATAK GATENO.02, KOLHAPUR

City KOLHAPUR**PIN Code:** 416005**Email ID:** prathameshkamble7768@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058762 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 9 9 2 2 5 0 5 4**Full Name:** KAMBLE PREM RANJIT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YADAVNAGAR , KOTITIRTH NAVIN VASAHAAT, KOLHAPUR

City KOLHAPUR**PIN Code:** 416003**Email ID:** kamblepremranshit@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058764 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 1 3 2 9 8 3 5 9**Full Name:** KAMBLE PRUTHVIRAJ TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AT POST KOGNOLI, NIPPANI, BELGAUM

City BELGAUM**PIN Code:** 591229**Email ID:** kamblepruthviraj@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058767 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 8 0 1 1 2 9 1 0**Full Name:** KAMBLE ROHIT DHANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P CHUYE, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058770 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 8 0 5 9 0 9 2 9 6**Full Name:** KAMBLE SANKET BABASO**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SAMATA PARISAR, SHIROLI PULACHI, HATAKANGALE

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 6 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058772 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 1 0 2 1 7 2 5 8**Full Name:** KAMBLE SWAPNIL SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P KOTHALI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416001**Email ID:** kambleswapnilsanjay@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 1 9 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058774 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 8 0 5 9 0 7 8 5 5**Full Name:** KAMBLE TEJAS DIPAK**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJARAMPURI 14 GALLI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** tejas1718kamble@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023061378 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 8 1 0 9 5 6 5 5**Full Name:** KANDALKAR GANESH ANANDA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

nigave khalsa

City nigave khalsa**PIN Code:** 416207**Email ID:** ganeshkandalkar5655bcom@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 5 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059279 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 7 2 2 0 2 8 6 7 6**Full Name:** KARANDE NIKHIL NARENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHNIWAR PETH

City SHNIWAR PETH**PIN Code:** 416011**Email ID:** nikhilkarande@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 0 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059281 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 8 3 9 0 6 4 6 7**Full Name:** KARANJE ATHARV VIKARAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KASHTI

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87964 Management Functions & Applications Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 2 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059364 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 6 2 0 3 2 4 9 7 9**Full Name:** KASTURE SANDIP GANGARAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** DHANGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Shahuwadi, kolhapur

City Kolhapur**PIN Code:** 416215**Email ID:** sandipgkasture2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058778 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 1 8 0 9 2 5 0 0 8**Full Name:** KATKAR GANESH DAGADU**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

666 C WARD RAVIVAR PETH, KOLHAPUR

City KOLHAPUR**PIN Code:** 416002**Email ID:** ganeshkatkar2006@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 5 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059282 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 7 0 5 7 3 5 7 2**Full Name:** KAWALE SHIRISH TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VIKRAMNAGAR

City VIKRAMNAGAR**PIN Code:** 416005**Email ID:** kawaleshirish45@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058786 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 0 9 2 5 5 9 0 0**Full Name:** **KHADE SHRIHARI BALKRISHNA****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1330/3 E WARD SHASTRI NAGAR , KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4 | 1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4 | 1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 2 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059283 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 4 6 7 7 7 4 6 9**Full Name:** **KHAIRNAR AKSHAY SHRIKANT****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SHIMPI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHIROLI

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 1 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058978 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 4 6 4 1 4 4 1 9**Full Name:** KHAN SOHEL JUBER**Write Name in Devanagari (Marathi):** _____

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

Correspondence Address:

Kaneriwad, kolhapur

City Kolhapur**PIN Code:** 416234**Email ID:** soheljuberkhan553490@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87964 Management Functions & Applications Paper-I Cr. 4 | 1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059356 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 9 6 0 9 8 0 5 7 0**Full Name:** KHANDEKAR AMOL LAXMAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** DHANGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GOKUL SHIRGAON

City KOLHAPUR**PIN Code:** 416234**Email ID:** amolkhandekar0508@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 1 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059284 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 2 2 2 2 9 0 0 3**Full Name:** KHEMALAPURE OMKAR NILESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** JAIN**Cast:** JAIN**Physical Disability** NOT APPLICABLE**Correspondence Address:**

FULEWADI

City FULEWADI**PIN Code:** 416010**Email ID:** omkarkhemalapure2002@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 6 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059285 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 8 2 2 0 6 3 9 1 0**Full Name:** KHOT ABHISHEK SURESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416119**Email ID:** khot77020@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058790 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 5 9 7 1 2 2 2 0**Full Name:** KHOT SAHIL BALAVANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** GAVALI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BHAGAVA CHOWK, HANBARWADI, KOLHAPUR

City HANBARWADI**PIN Code:** 416207**Email ID:** sahilshot2254@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 1 1 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058792 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 6 3 8 4 6 7 7 0**Full Name:** KOIGADE SANCHIT NIVAS**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BELE ROAD, KURUKALI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416001**Email ID:** sanchitkoigade37@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

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

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 9 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059287 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 8 4 0 9 7 0 3 6 1**Full Name:** KOLI PRATHAMESH BAPUSO**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** KOLI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HUPARI

City HUPARI**PIN Code:** 416203**Email ID:** koliprathamesh077@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4 | 1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 5 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058794 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 2 3 7 1 8 0 0 2 3**Full Name:** KOLI SANKET ADINATH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** KOLI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

gokul shirgaon

City gokul shirgaon**PIN Code:** 416234**Email ID:** sanket11koli@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87965 Principles of Marketing Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 2 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058796 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 6 9 9 6 6 0 4 1 1**Full Name:** KONDEKAR SANKET KRUSHNAT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GIRAGAON

City GIRAGAON**PIN Code:** 416013**Email ID:** sanketkondekar303@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 2 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058805 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 1 1 3 4 5 4**Full Name:** KONDURKAR SAMARTH LAXMAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SAMBHAJI NAGAR

City SAMBHAJI NAGAR**PIN Code:** 416012**Email ID:** samathkondurkar103@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 6 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058812 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 5 6 1 4 0 8 4 4 3****Full Name:** **KUIGADE ATHARV HRUSHIKESH****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416012**Email ID:** atharvkuigade364@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058815 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 2 8 4 4 8 1 2 2 0**Full Name:** KULKARNI SHREYAS AJITRAO**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HAWALDAR WADA MANGALWAR PETH KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 4 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058816 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 2 1 9 2 6 7 3 1 5**Full Name:** KUMBHAR RITESH SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** KUMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 27 SANT GORA KUMBHAR VASAHAAT BAPAT CAMP MARKET YARD , KOLHAPUR

City kolhaPUR**PIN Code:** 416005**Email ID:** riteshkumbhar1315@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 0 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058908 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 9 7 2 9 8 1 6 9 6**Full Name:** LAD YASH ANANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

185 Mahada colony, kolhapur

City Kolhapur**PIN Code:** 416000**Email ID:** yashlad700@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87964 Management Functions & Applications Paper-I Cr. 4
1/2 87977 Micro Economics Paper-II Cr. 4	1/2 87978 Financial Accounting Paper-II Cr. 4
1/2 87979 Management Functions and Applications Paper-II Cr.	1/2 87980 Principles of Marketing Paper-II Cr. 4
1/2 89309 SEC II - Constitution of Indian and Local Self Governn	1/2 87988 Insurance Paper-II Cr. 4
1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 5 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058820 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 8 8 8 9 6 8 5 2 8**Full Name:** LENDAVE OMKAR MANOHAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male **Religion:** HINDU **Cast:** MAHADEV KOLI **Physical Disability** NOT APPLICABLE**Correspondence Address:**

NERALI

City NERALI**PIN Code:** 441623**Email ID:** omkar.lendave.29@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87964 Management Functions & Applications Paper-I Cr. 4
1/2 87977 Micro Economics Paper-II Cr. 4	1/2 87978 Financial Accounting Paper-II Cr. 4
1/2 87979 Management Functions and Applications Paper-II Cr.	1/2 87980 Principles of Marketing Paper-II Cr. 4
1/2 89309 SEC II - Constitution of Indian and Local Self Governn	1/2 87988 Insurance Paper-II Cr. 4
1/2 87991 Business Communication Paper-II Cr. 4	

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 4 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059289 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 7 3 8 0 6 3 2 0**Full Name:** LOHAR SWAYAM SUBHASH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HUPARI

City HUPARI**PIN Code:** 416203**Email ID:** loharswayam21@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 7 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059291 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 4 4 8 2 8 9 1 3 9**Full Name:** MALI GANESH SAGAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

K SANGAON NEAR RENRKA TEMPLE

City K SANGAON**PIN Code:** 416216**Email ID:** ganeshmali6089@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 7 9 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058823 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 7 9 6 3 4 9 5 7**Full Name:** MALI SANDEEP GANPATI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MALI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GANESH LANE, NEAR GARM PANCHAYAT, GAON BHAG, GADMUDSHINGI, KOLHAPUR

City GADMUSHING**PIN Code:** 416119**Email ID:** ganpatismali2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058829 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 6 4 5 9 7 1 7**Full Name:** MANE RITESH SAGAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SIDDHNERLI, KAGAL, KOLHAPUR

City KAGAL**PIN Code:** 416232**Email ID:** maneritesh2072@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 2 0 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058830 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 5 9 4 8 2 1 2 9**Full Name:** MANE SAGAR TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

649 KALAMBA ROAD, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4 | 1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4 | 1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 1 9 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058832 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 9 7 0 5 9 3 2 5 2**Full Name:** MASALKAR HARSH SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1269 C WARD LAXMIPURI, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 7 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058834 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 9 7 5 5 1 4 3 1**Full Name:** MASALKAR YASH PRAKASH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 151 B KRUSHA KRUSHNAI COLONY ,KARVIR, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 7 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059293 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 2 6 0 0 9 1 1 8**Full Name:** MAVSHIKAR HARSHAD DATTATRAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SUTAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 17 SHIVNERI COLONY , PACHGAON , KOLHAPUR

City PACHGAON**PIN Code:** 416013**Email ID:** harshaddmavshikar2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87963 Micro Economics Paper-I Cr. 4
1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87973 Insurance Paper-I Cr. 4
1/1 87976 Business Communication Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 6 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058997 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 9 9 9 7 1 3 8 7 5**Full Name:** MORE RUTURAJ TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

UNCHGAON

City UNCHGAON**PIN Code:** 616012**Email ID:** moreruturaj59@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 9 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059330 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 9 3 6 8 6 0**Full Name:** MORE SAHIL RAJESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PETH VADGAON

City KOLHAPUR**PIN Code:** 416112**Email ID:** moresahilrajesh@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 7 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058878 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 7 6 3 6 4 1 8 8 7**Full Name:** MORE SURAJ VISHWAS**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MOREWADI

City MOREWADI**PIN Code:** 416013**Email ID:** surajmore1887@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058880 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 7 6 0 1 3 0 9 2**Full Name:** MORE VIJAY ANIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RENUKA NAGAR, SHIROLI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416122**Email ID:** vijaymore172004@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058883 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 9 4 0 9 0 4**Full Name:** MORE YASH KUMAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KAGAL, KOLHAPUR

City KAGAL**PIN Code:** 416216**Email ID:** moreyashkumar@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 4 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058886 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 2 1 7 9 9 4 5 6**Full Name:** MUDE RAJ DATTATRAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KALAMAWADI

City KALAMAWADI**PIN Code:** 416202**Email ID:** rajdmude2005@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 0 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058887 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 5 3 0 8 8 0 2 3 6**Full Name:** MUJAWAR FAHIM RIYAJ**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YADAVAR

City YADAVAR**PIN Code:** 416008**Email ID:** fahimujawar76@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 3 9 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058912 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 4 4 6 8 7 6 3 7 8**Full Name:** MULLANI MAHAMADMOFIJ IKBAL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TEMLAI NAKA

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 9 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059376 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 8 1 9 2 5 7 1 5**Full Name:** MURGUDE HARSH SANDEEP**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2285 B ward taste galli manglawar peth, kolhapur

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 2 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058913 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 9 0 4 6 8 0 4 7**Full Name:** NAIK DNYANESHWAR KRUSHNA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

hupari

City hupari**PIN Code:** 416203**Email ID:** rajnaik2077@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 0 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058915 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 3 7 3 9 1 5 6 5 3****Full Name:** **NAIK MAHESH SURESH****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAITAL

City JAITAL**PIN Code:** 416207**Email ID:** maheshsnaik2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4 | 1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058916 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 6 0 7 1 6 7 0 0**Full Name:** NAIKWADE JUBER RASUL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AT POST KOGNOLI, NIPPANI, BELGAUM

City KOGNOLI**PIN Code:** 591229**Email ID:** naikwadejuberrasul@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 0 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059297 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 8 2 9 8 5 8 1 0**Full Name:** NAIKWADE SAAD SHABBIR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

N.KNAGAR

City N.KNAGAR**PIN Code:** 416013**Email ID:** saadnaikwad01@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 5 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058919 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 5 3 0 7 0 7 7 0 5**Full Name:** NAIKWADE SAHIL RAFIK**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SADAR BAZAR

City SADAR BAZAR**PIN Code:** 416003**Email ID:** naikwadesahil816@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 1 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058921 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 2 3 1 8 8 4 2 4 3**Full Name:** NAYKAWADI DHIRAJ BHIMRAO**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P NAGAON BEHINDE GALAXY SUGAR NEAR MENON PISTON, HATKANGALE, KOLHAPUR

City HATKANGALE**PIN Code:** 416122**Email ID:** dhirajnaikwadi63@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 2 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059298 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 6 6 6 9 4 2 1 2 9**Full Name:** PANTOJI ROHIT PRAKASH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416001**Email ID:** rohitpantoji867@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 6 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058932 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 2 2 0 9 5 2 3 2**Full Name:** PARIT OMKAR RAJENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** PARIT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MOHITE COLONY KALAMBA ROAD, KOLHAPUR

City KALAMBA**PIN Code:** 416007**Email ID:** omkarparit595@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 89308 SEC I - Democracy, Election and Good Governance (
1/2 87977 Micro Economics Paper-II Cr. 4	1/2 87978 Financial Accounting Paper-II Cr. 4
1/2 87979 Management Functions and Applications Paper-II Cr.	1/2 87980 Principles of Marketing Paper-II Cr. 4
1/2 89309 SEC II - Constitution of Indian and Local Self Governn	1/2 87988 Insurance Paper-II Cr. 4
1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 7 8 0 1 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2022028559 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 1 7 5 7 0 9**Full Name:** PATIL SURAJ LAXMAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 212, DADU CHOUGALE NAGAR, KALMBA ROAD, KOLHAPUR

City KOLHAPUR**PIN Code:** 416007**Email ID:** sp875690@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 9 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058933 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 7 6 6 2 2 9 5 9 2**Full Name:** PATIL AADINATH DATTATRAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAVAHANAGAR

City JAVAHANAGAR**PIN Code:** 416012**Email ID:** patilaadinath31@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 5 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058939 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 2 3 0 3 7 8 3 9**Full Name:** PATIL AKSHAY BALVANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BHAMTE

City BHAMTE**PIN Code:** 416205**Email ID:** akshaybpatil2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 8 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058947 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 7 3 9 3 9 5 7 6**Full Name:** PATIL ASHISH SANDIP**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GIRAGAON

City GIRAGAON**PIN Code:** 416013**Email ID:** manojpatil123213@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 6 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059299 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 6 0 4 4 8 4 4 4 0**Full Name:** PATIL DIPAK RAJESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416008**Email ID:** dipakpatil1377@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87976 Business Communication Paper-I Cr. 4
1/2 87977 Micro Economics Paper-II Cr. 4	1/2 87978 Financial Accounting Paper-II Cr. 4
1/2 87979 Management Functions and Applications Paper-II Cr.	1/2 87980 Principles of Marketing Paper-II Cr. 4
1/2 89309 SEC II - Constitution of Indian and Local Self Governn	1/2 87988 Insurance Paper-II Cr. 4
1/2 87991 Business Communication Paper-II Cr. 4	

Optional Subjects:

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Specimen Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 1 0 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058950 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 7 3 0 1 3 3 6 3**Full Name:** PATIL HARSH SUDESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

916'E' WARD SHAHUPURI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416001**Email ID:** harshpatil6665@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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Specimen Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 2 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059300 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 7 6 0 7 4 9 3 0**Full Name:** PATIL KIRAN SHIVAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

CHANDGAD

City CHANDGAD**PIN Code:** 416552**Email ID:** patilkiran4930@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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Specimen Signature:			



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Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 0 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058954 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 3 7 4 1 1 0 0 8 0****Full Name:** **PATIL NIMESH NITIN****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** KUNBI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

522/6 RAM GALLI KALAMBA , KOLHAPUR

City KOLHAPUR**PIN Code:** 416007**Email ID:** nimeshpatil2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



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Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 0 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058956 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 2 6 1 8 6 3 7 7 2**Full Name:** PATIL PRAJWAL RAMCHANDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Siddhivinayak, Kaneriwad, kolhapur

City Kolhapur**PIN Code:** 416234**Email ID:** prajawalpatil777@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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Specimen Signature:			



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Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058967 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 9 6 0 1 9 4 8 4 9**Full Name:** PATIL PRATHAMESH PANDURANG**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BHOSLE NAGAR, PLOT NO 4, SAROBATWADI, KOLHAPUR

City SAROBATWADI**PIN Code:** 416005**Email ID:** prathameshppatil1710@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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)
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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059302 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 3 2 2 5 3 1 1 4 2**Full Name:** PATIL PRATHMESH TUSHAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416003**Email ID:** prathmeshtpatil2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059304 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 8 0 8 6 4 6 4 4**Full Name:** PATIL RITESH RAJENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P SANGAVADEWADI , KOLHAPUR

City KOLHAPUR**PIN Code:** 416202**Email ID:** riteshpatil79840@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058980 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 4 8 3 5 6 0 4 3 1**Full Name:** PATIL ROHAN SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KURLI

City KURLI**PIN Code:** 591241**Email ID:** rohanpatil2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87963 Micro Economics Paper-I Cr. 4
1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87965 Principles of Marketing Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/1 87976 Business Communication Paper-I Cr. 4
1/1 89308 SEC I - Democracy, Election and Good Governance (1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058968 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 3 0 8 8 0 2 1 6 4**Full Name:** PATIL RUGVED DIGAMBAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VITHALAI COLONY ,3RD LANE ,MANERMALA UCHGAON

City KOLHAPUR**PIN Code:** 416005**Email ID:** rugved7890@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 6 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058982 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 7 4 0 0 9 1 2 1**Full Name:** PATIL RUSHIKESH NIVAS**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHANKARWADI

City SHANKARWADI**PIN Code:** 416232**Email ID:** rushikeshnpatil2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 2 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058875 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 2 8 4 4 2 4 6 9 9**Full Name:** PATIL SACHIN JIVAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

14TH LANE

City RAJARAMPURI**PIN Code:** 416003**Email ID:** patilsachinjivan@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058874 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 7 5 8 9 9 6 9 1 1**Full Name:** PATIL SAI ASHOK**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

279 B WARD ISOLATION HOSPITAL ROAD, CHILE COLONY, NEHARU NAGAR, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 1 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058871 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 1 7 2 8 6 7 3 2 0**Full Name:** PATIL SAMARTH GANESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MOLVADE , SHAHUWADI , KOLHAPUR

City KOLHAPUR**PIN Code:** 416215**Email ID:** patilsomarth0707@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 4 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058879 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 3 2 9 4 2 7 2 3 8**Full Name:** PATIL SHIVRAJ SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAY SHIVRAY GALLI, GADMUDSHINGI, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 2 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058985 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 9 7 5 1 3 4 7 7 5**Full Name:** PATIL SHIVTEJ SHAHAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Shivaji galli wadange, kolhapur

City Kolhapur**PIN Code:** 416229**Email ID:** sahivejpatil45@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 7 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058881 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 3 8 0 4 4 5 8 4 4**Full Name:** PATIL SHRIJEET YUVRAJ**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

CHAVAN GALLI, KOGNOLI, NIPPANI, BELGAUM

City KAGNOLI**PIN Code:** 591229**Email ID:** shrijitpatil6360@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,		Form No. : 4 3 7 8 0 1 7	
The DIRECTOR, BOARD OF EXAMINATIONS AND EVALUATION, SHIVAJI UNIVERSITY, KOLHAPUR			
Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.			
PRN: 2022028606		College: Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR	
Personal Information :		Mobile NO : 7 7 9 6 5 7 8 1 0 1	
Full Name: PATIL SOURABH SANTOSH			
Write Name in Devanagari (Marathi): _____			
Gender: Male	Religion: HINDU	Cast: Maratha	Physical Disability NOT APPLICABLE
Correspondence Address:			
GOKUL SHIRGOAN, KOLHAPUR			
City KOLHAPUR	PIN Code: 416234	Email ID: patilsourabh651@gmail.com	
Study Center: N.A.			
Fees Details:		Total Fee ₹: 0	(Uni.Fee. 0)
SEM II)			
Subject Details :			
1/2 87978 Financial Accounting Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058885 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 0 7 6 9 4 5 7 5**Full Name:** PATIL SURAJ JAYWANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT NO 11 NICHITE NAGAR, KARVIR, KOLHAPUR

City GARGOTI**PIN Code:** 416012**Email ID:** surajpatil9307@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058801 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 3 3 7 8 5 5 0 3 4**Full Name:** PATIL UTTAM NAMDEV**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

29/9, KHALACHI WADI, SHENDUR, CHIKODI, BELAGAVI, KARNATAKA

City BELAGAVI**PIN Code:** 591237**Email ID:** patiluttamnamdev@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 8 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058781 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 3 2 5 0 1 8 4 3 2**Full Name:** PATIL VIGNESH YUVRAJ**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

ISPURLI, KURDU ROAD, KOLHAPUR

City ISPURLI**PIN Code:** 416207**Email ID:** vighneshpatil6129@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 4 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058988 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 7 2 4 4 2 3 4 3**Full Name:** PATIL VINAYAK SHASHIKANT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

1619 A ward Rankala wesh, sakoli corner, kolhapur

City Kolhapur**PIN Code:** 416012**Email ID:** vp699417@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058787 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 5 5 4 6 8 1 8 8**Full Name:** PATOLE RITESH VILAS**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AT POST SAVARDE BK ,KAGAL,KOLHAPUR

City SAVARDE**PIN Code:** 416219**Email ID:** patoleritesh880@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 6 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058789 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 6 3 8 2 5 2**Full Name:** PAWAR VISHWAJIT VIJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

ITKARE ,SANGLI

City SANGLI**PIN Code:** 415403**Email ID:** vishwjitp9009@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 8 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059308 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 3 2 9 1 1 0 9 1 7**Full Name:** POL SHANTANU RAJENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2846 B WARD , TAMGAON

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 1 0 2 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058795 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 5 5 9 2 6 1 1 6 7**Full Name:** POL TANMAY ANIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** DHOR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P TAMGAON

City TAMGAON**PIN Code:** 416234**Email ID:** tanamayanilpol7020@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2022028408 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 2 4 8 2 8 7 1 3**Full Name:** PORLEKAR HARSHAD EKNATH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RENUKA NAGAR, SHIROLI PULACHI , KOLHAPUR

City KOLHAPUR**PIN Code:** 416122**Email ID:** PORLEKARHARSHADEKNATH@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 2 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058798 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 2 8 6 8 3 8 3 8 3****Full Name:** **POTDAR ADITYA RAVINDRA****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SONAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

LAXMIPUR

City LAXMIPUR**PIN Code:** 416012**Email ID:** adityapotdar1442@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 6 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058799 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 1 4 9 0 7 5 3 3 6**Full Name:** POWAR INDRAJEET VIJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DADAHOUGELE NAGAR

City DADAHOUGELE NAGAR**PIN Code:** 416004**Email ID:** indrajeetvpowar2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 8 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058802 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 6 6 6 8 6 7 8 7 5**Full Name:** POWAR RAJ DIPAK**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MUDSHINGI ROAD SWAPNIL COMPLEX , UCHGAON , KOLHAPUR

City UCHGAON**PIN Code:** 416012**Email ID:** rajpwar97793@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 6 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058804 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 5 2 9 7 2 6 1 7 3**Full Name:** POWAR SARVESH DILIP**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PAWAR WADI

City PAWAR WADI**PIN Code:** 416230**Email ID:** sarveshdpowar2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058888 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 5 3 0 1 1 6 6 6 9**Full Name:** PUROHIT DEEPAK JOGARAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

BELBAG ,MANGLWAR PETH ,KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** deepakpurohit60200@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 1 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059315 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 7 5 9 1 8 9 7 3**Full Name:** RANANAWARE SNEHAL VINOD**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SAMRTH COLONY

City SAMRTH COLONY**PIN Code:** 416013**Email ID:** snehalvrnanaware2005@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 2 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058806 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 2 5 8 3 4 6 2 8**Full Name:** RANANWRE PRATHMESH VINOD**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

yadhav nagar

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 5 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059312 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 9 6 2 8 4 7 6 0**Full Name:** RANDIVE SHIVRAJ SUBHASH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

HUPRI

City HUPRI**PIN Code:** 416203**Email ID:** shivrajrandive0@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 4 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058808 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 3 4 9 8 2 1 1 8**Full Name:** RANE SAHIL SOPAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

A/P RENUKA MANDIR SAMOR, GOKUL SHRIGOAN, KOLHAPUR

City KOLHAPUR**PIN Code:** 416234**Email ID:** sahilsahil60832@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 5 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058817 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 2 7 6 6 6 3 0 4 2**Full Name:** RASHIVADE RAJ PANDIT**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

NARASOBA MANDIR CHAVADI ROAD, GADMUDSHINGI, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 1 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059310 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 1 9 7 3 3 1 5 0**Full Name:** RAUT VISHAL VITTHAL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TEMLAIWADI

City TEMLAIWADI**PIN Code:** 416005**Email ID:** rautvishal001@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4 | 1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2022031649 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 1 2 2 8 1 7**Full Name:** RODE ASHISH BABAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GHOGAREGALLI, GOKUL SHIRGAON, KOLHAPUR

City KOLHAPUR**PIN Code:** 416234**Email ID:** ASHISHRODE04@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 89308 SEC I - Democracy, Election and Good Governance (
1/2 87977 Micro Economics Paper-II Cr. 4	1/2 87978 Financial Accounting Paper-II Cr. 4
1/2 87979 Management Functions and Applications Paper-II Cr.	1/2 87980 Principles of Marketing Paper-II Cr. 4
1/2 89309 SEC II - Constitution of Indian and Local Self Governn	1/2 87988 Insurance Paper-II Cr. 4
1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 0 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059316 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 3 7 1 5 9 1 0 1 2**Full Name:** SANGAR SIDDHESH SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SANAGAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PACHGAON

City PACHGAON**PIN Code:** 416007**Email ID:** siddheshsangar2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 1 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058827 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 2 0 9 0 4 7 8 1**Full Name:** SATPUTE ALOK SANDIP**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** CHAMBHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SUBHASNAGAR

City SUBHASNAGAR**PIN Code:** 416012**Email ID:** aloksatpute88@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058833 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 4 0 5 0 7 1 4 3 6**Full Name:** SAWANT NILESH RAVINDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SANJAY NAGAR, MALBHAG , HERLE, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 1 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059318 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 5 5 8 3 3 7 2 2 9**Full Name:** SAWANT SHIVRAJ DILIIP**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416005**Email ID:** shivrajsawant2020@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059353 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 2 6 0 2 8 4 4 2**Full Name:** SAYYAD AMAN HUMAYUN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SUBHASH NAGAR

City KOLHAPUR**PIN Code:** 416012**Email ID:** amanhsayyad2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058841 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 8 8 8 6 0 4 7 1 6**Full Name:** SAYYAD RAJEKHAN MANZIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DHANWADE GALLI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** rajsayyad44@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 0 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058842 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

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

SAMBHAJINAGAR

City SAMBHAJINAGAR**PIN Code:** 416012**Email ID:** shahidsayyed5500@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 3 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059319 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 4 3 2 6 5 3 0 5 0**Full Name:** SHAIKH ABUDAKAR JUBER**Write Name in Devanagari (Marathi):** _____**Gender:** Male **Religion:** MUSLIM **Cast:** MUSLIM **Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416013**Email ID:** abudakarshaikh2006@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87963 Micro Economics Paper-I Cr. 4
1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87965 Principles of Marketing Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/1 87976 Business Communication Paper-I Cr. 4
1/1 89308 SEC I - Democracy, Election and Good Governance (1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 4 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058845 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 3 2 9 7 7 7 4 0 3**Full Name:** SHAIKH ARKAM ASLAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DINA BAZAR

City DINA BAZAR**PIN Code:** 416002**Email ID:** shaikharkam411@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 5 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058889 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 9 0 1 8 0 7 0 7**Full Name:** SHAIKH NIRAJ ASIF**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHUKRWAR PETH

City SHUKRWAR PETH**PIN Code:** 416002**Email ID:** niraj1990@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87963 Micro Economics Paper-I Cr. 4
1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87965 Principles of Marketing Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/1 87976 Business Communication Paper-I Cr. 4
1/1 89308 SEC I - Democracy, Election and Good Governance (1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058892 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 3 8 7 6 6 5 1 7 6**Full Name:** SHAIKH SAMEER IMTIYAJ**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2514 D WARD KESAPUR GALLI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** sameershaikh97412@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 1 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058893 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 1 0 8 9 9 5 3 8**Full Name:** SHAIKH SOHEL IRFAN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** MUSLIM**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

sambhajinagar

City sambhajinagar**PIN Code:** 416012**Email ID:** sohel59822@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 9 0 6 5 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023067806 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 3 7 8 5 9 2 7 1 3**Full Name:** SHINDE SWAYAM SHEKHAR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2777 C WARD JUNA BUDHWAR PETH KOLHAPUR

City kolhapur**PIN Code:** 416002**Email ID:** swayamshinde2929@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058899 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 7 2 0 1 8 8 3**Full Name:** SHINDE TEJAS ANANDRAO**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** PARIT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

CHILE COLONY, KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** tejasashinde2006@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058900 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 6 5 8 9 3 6 9 3**Full Name:** SHINGE GAURAV SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AMBEDKAR CHOWK, MALWADI SHIROLI PULACHI, HATAKANGALE

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 5 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058902 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 9 5 1 7 1 4 0 2**Full Name:** SOLANKURE VIVEK SUNL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAIN ROAD KOGNOLI, NIPPANI

City KOGNOLI**PIN Code:** 591229**Email ID:** solankarevivek@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 3 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059320 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 7 5 9 2 7 9 7 0**Full Name:** SONAVALE RITESH DNYANDEV**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** JOSHI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SANYUDRI COLLONY

City SANYUDRI COLLONY**PIN Code:** 416005**Email ID:** riteshsonvale49@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 6 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058990 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 8 4 0 9 7 9 8 9 3**Full Name:** SONAVANE BHIMRAO UTTAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

B.WARD

City B.WARD**PIN Code:** 416012**Email ID:** bhimraouttam2001@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 9 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058903 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 7 4 4 9 1 1 8 4 7**Full Name:** SONULE SARVESH RUPESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** MANG**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANERMALA ,UCHGAON,KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 4 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058906 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 8 5 5 8 7 1 3 0 9**Full Name:** SOUNDALKAR HARSHAL RAMCHANDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

npg group ,girgaon ,kolhapur

City KOLHAPUR**PIN Code:** 416013**Email ID:** harshalsoundalkar09@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 2 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058907 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 4 8 3 0 4 6 0 7 0**Full Name:** SUTAR ABHISHEK SAMBHAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SUTAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

AAMEBDKAR NAGAR , HATKANGALE

City NAGAON**PIN Code:** 416122**Email ID:** abhisheksutar4278@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 1 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058991 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 5 7 4 9 4 7 1 4**Full Name:** SUTAR GOURAV ANIL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SUTAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Krant singh nana Patil Nagar, kolhapur

City Kolhapur**PIN Code:** 416012**Email ID:** gouravsutar3643@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 2 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058911 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 7 6 2 3 8 6**Full Name:** SUTAR SAMARTH ABHIMANYU**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJARAMPURI

City RAJARAMPURI**PIN Code:** 416008**Email ID:** samarthsutar2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 8 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058914 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 5 1 7 2 2 1 2 7 9**Full Name:** SUTAR SAMARTH MUKUND**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SUTAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2795 B ward kolhapur

City Kolhapur**PIN Code:** 416012**Email ID:** samarthmsutar2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 9 8 1**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058917 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 5 6 5 8 4 6 1 6**Full Name:** SUTAR SWAYAM SANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** SONAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PLOT-648 MANDLIK VASAHAAT, KOLHAPUR

City KOLHAPUR**PIN Code:** 416002**Email ID:** swayamsutar23@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 8 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059324 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 7 2 4 5 6 1 6 8**Full Name:** TELI SANKET RAMESH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

814 A WARD SHIVAJI PETH

City KOLHAPUR**PIN Code:** 416012**Email ID:** sanketeli6168@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 3 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058918 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 8 4 0 4 2 7 5 4**Full Name:** THORAT PRANAV PRAVIN**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAGRATINAGAR , RAJARAMPURI , KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** pranavt931@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 9 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058920 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 6 1 8 6 4 5 8 4 5**Full Name:** TIRAVAT VIGNESH TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MAIN ROAD ,SULGAV ,NIPPANI

City SULGAV**PIN Code:** 591229**Email ID:** vighneshtiravat6113@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 9 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059337 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 3 4 2 7 6 6 8 1**Full Name:** TIWARE SWAPNIL RAGHUNATH**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YALGUD

City YALGUD**PIN Code:** 416236**Email ID:** swapniltiware99@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 4 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058922 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 3 0 7 4 9 4 2 4 1****Full Name:** **TORASKAR DNYANDEV DHANAJI****Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAVAHARNAGAR

City JAVAHARNAGAR**PIN Code:** 416012**Email ID:** atharvtoraskar1@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 0 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059323 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 2 5 2 5 9 8**Full Name:** ULAPE PREM SAMARSING**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KASABA BHAWDA

City KASABA BHAWDA**PIN Code:** 616006**Email ID:** premulape@icloud.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 4 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058929 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 6 2 0 4 2 9 2 2 2**Full Name:** UNDALE SHREE RAJU**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

LAXMI COLONY E WARD GURU MARKET TEMBALAIWADI , KOLHAPUR

City KOLHAPUR**PIN Code:** 416005**Email ID:** shreeundale469@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4 | 1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87965 Principles of Marketing Paper-I Cr. 4 | 1/1 87973 Insurance Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4 | 1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4 | 1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4 | 1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4 | 1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 4 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058931 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 7 6 7 1 9 1 9 8 5**Full Name:** VADAR ROHIT PARSHURAM**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** VADAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

VASANT CHAVAN , DAULAT NAGAR , RAJARAMPURI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** varadrohit77@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058935 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 7 5 0 7 9 7 7**Full Name:** VADAR SATEJ RAMCHANDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** VADAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SANGWADEWADI, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87963 Micro Economics Paper-I Cr. 4
1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87965 Principles of Marketing Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/1 87976 Business Communication Paper-I Cr. 4
1/1 89308 SEC I - Democracy, Election and Good Governance (1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 2 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059325 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 9 9 9 9 8 9 8 7 2**Full Name:** YADAV MANISH TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAVIVAR PETH

City RAVIVAR PETH**PIN Code:** 416002**Email ID:** moyo0660482@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87963 Micro Economics Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 6 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059326 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 5 7 7 7 0 5 2**Full Name:** YADAV PRATIK SUDHIR**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DEVKAR PANDA

City DEVKAR PANDA**PIN Code:** 416011**Email ID:** pratikyadav2811@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87963 Micro Economics Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 6 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058946 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 5 5 9 2 7 7 8 2 7**Full Name:** YADAV RAKESH RAJENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHIRASHI

City SHIRASHI**PIN Code:** 415408**Email ID:** rakeshyadev7559@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058949 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 2 7 6 6 6 4 5 3 6**Full Name:** YADAV YASH VITTHAL**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YADAVWADI ,UCHGAON ,KOLHAPUR

City UCHGOAN**PIN Code:** 416005**Email ID:** yashyadav2322@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058951 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 4 2 1 7 5 2 4 5 4**Full Name:** YAVALUJE KIRAN PANDURANG**Write Name in Devanagari (Marathi):** _____**Gender:** Male**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGESHWAR GALI, UCHGOAN, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 8 2 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058485 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 3 2 9 4 3 6 5 6 2**Full Name:** ! ABHANGE URMILA UTTAM**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** CHAMBHAR **Physical Disability** NOT APPLICABLE

Correspondence Address:

ARJUNWAD ROAD, PADISHE MALA, CHINCHWAD, KOLHAPUR

City KOLHAPUR**PIN Code:** 416210**Email ID:** abhangeurmilauttam@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 7 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058495 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 6 6 9 5 4 7 9 4 3**Full Name:** ! AMBEKAR VAISHNAVI RAVINDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

378 PLOT NO 20A

City KOLHAPUR**PIN Code:** 416012**Email ID:** ambekarvaishnavi01@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058510 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 2 6 2 0 3 7 9 6 9**Full Name:** ! BAGADE SANJANA MAHESH**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

TRIMURTI NAGAR, KAMERIWADI, KOLHAPUR

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

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059350 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 8 2 3 0 3 5 1 0 8**Full Name:** ! BAGWAN TAHIR ALLAUDDIN**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** Other**Cast:** MUSLIM**Physical Disability** NOT APPLICABLE**Correspondence Address:**

JAWAHAR NAGAR

City KOLHAPUR**PIN Code:** 416012**Email ID:** tahirabagwan2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023061376 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 6 9 9 4 4 7 0 1 3**Full Name:** ! BHAVAD VEDIKA TANAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Other **Physical Disability** NOT APPLICABLE**Correspondence Address:**

KALAMBA CH SHAVAJI GALLI

City KOLHAPUR**PIN Code:** 416007**Email ID:** vedikabhavad9195@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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Specimen Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 8 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058536 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 4 1 4 7 0 7**Full Name:** ! BHOYI GAYATRI SANJU**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** BHOI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2704 B WARD MANGALWAR PETH , KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** gayatrisbhooyi2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 6 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059003 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 8 8 7 8 3 2 7 2 5**Full Name:** ! BHOSALE PARMESHWARI VIJAY**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

SHIROLI

City SHIROLI**PIN Code:** 416122**Email ID:** psmrshwaribhosle2005@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87973 Insurance Paper-I Cr. 4
1/1 87976 Business Communication Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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Specimen Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 7 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058560 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 8 2 3 0 7 0 6 1 1**Full Name:** ! CHIKDUL KAVERI DARYAPPA**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** MAHAR **Physical Disability** NOT APPLICABLE**Correspondence Address:**

SUDHAKAR JOSHI NAGAR ,A WARD NEAR SAMBHAJI NAGAR ,KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** kaveridchikdul2005@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 1 9 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058579 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 0 1 1 6 9 2 2 9 9**Full Name:** ! DABHOLE MAYURI BHIKAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

2674 LOKMANYA SANKUL, KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** mayuridabhole2299@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 2 1 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058583 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 4 4 8 1 2 4 2 1 0**Full Name:** ! DARWAN DIYA SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2493 B WARD BHOSALE GALLI, MANGALWAR PETH KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 4 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059268 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 9 2 1 4 0 4 4 5 6**Full Name:** ! DHANAWADE KASHISH VIJAY**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** MAHAR **Physical Disability** NOT APPLICABLE

Correspondence Address:

PATIL NAGAR

City PATIL NAGAR**PIN Code:** 416013**Email ID:** kashishdhanawade2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 8 5 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058629 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 1 5 8 1 8 2 9 1 8**Full Name:** ! DHOBAL MANSI SHANTARAM**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** SANAGAR **Physical Disability** NOT APPLICABLE**Correspondence Address:**

2800 B WARD MANGALWAR PETH, KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** dhobalemansishantaram@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058632 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 7 6 2 6 2 4 9 0 0**Full Name:** ! DHOBALE SNEHA BHIKAJI**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** SONAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

2800 B WARD ,MANGLWAR PETH,KOLHAPUR

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

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

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1/2 87988 Insurance Paper-II Cr. 4

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 2 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058636 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 4 2 2 9 3 0 6 1 8**Full Name:** ! DHOPE RUTUJA MARUTI**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

POWAR NAGAR

City POWAR NAGAR**PIN Code:** 416013**Email ID:** rutuja224@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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Place:	Date:	Student's Signature (Please sign strictly in the box shown below)	Principal's Signature & Seal (Please sign in the box shown below)
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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 6 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059006 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 9 2 3 0 2 1 9 0 9**Full Name:** ! DIXIT VAISHNAVI SANTOSH**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

LAXMI COLONY

City LAXMI COLONY**PIN Code:** 416005**Email ID:** dixitvaishnavi302@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 7 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058644 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 7 0 9 5 8 0 2 5 8**Full Name:** ! GADAVEKAR HARSHADA RAVINDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416007**Email ID:** harshadargadavekar2005@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 7 9 1 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058736 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 9 0 1 6 4 5 5 0**Full Name:** ! GOKHALE AKSHATA ATUL**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** BRAHMIN **Physical Disability** NOT APPLICABLE

Correspondence Address:

FL NO. 3, BALAJI APARTMENTS, INGALENAGAR

City KOLHAPUR**PIN Code:** 416008**Email ID:** kolhapur.akshata@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058759 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 4 9 8 0 2 1 6 0 2**Full Name:** ! JADHAV NIKITA KUMAR**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

GHORAPADE VASAHAAT , GADMUDSHINGI, KOLHAPUR

City GADMUDSHINGI**PIN Code:** 416119**Email ID:** nikitajadhav72008@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058773 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 7 8 8 7 9 2 5 4 8 3**Full Name:** ! JADHAV SALONI KIRAN**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHAHUPURI GOPPADE GALLI, KOLHAPUR

City KOLHAPUR**PIN Code:** 416003**Email ID:** khandagalesalonijadhav@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058738 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 2 0 9 1 2 3 8 9 9**Full Name:** ! JAGDALE SIDDHI DADASO**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

PLOT NO.68 PARVATI PARK, SARNOBATWADI, KOLHAPUR

City SARNOBATWADI**PIN Code:** 416004**Email ID:** siddhijagdale18@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 8 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058866 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 2 7 8 9 9 0 8 7**Full Name:** ! KAMBLE DIKSHA PRAKASH**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

Navin colony E Ward Yadav Nagar

City Kolhapur**PIN Code:** 416008**Email ID:** dikshapkamble2004@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 9 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058758 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 1 2 8 9 1 1 3 5**Full Name:** ! KAMBLE POONAM MAHESH**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

DAULTNAGAR

City DAULTNAGAR**PIN Code:** 416008**Email ID:** poonammkamble2001@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 8 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058876 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 1 7 5 7 6 2 3 3 0**Full Name:** ! KAMBLE SNEHAL SURESH**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** MAHAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

806 near budhavihar, ambedkar road, murgud

City Murgud**PIN Code:** 416219**Email ID:** snehalkamble052005@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 3 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058780 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 9 9 9 5 7 4 1 1**Full Name:** ! KHADAGALE ASHWINI VISHNU**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SARNOBATWADI MALI MALA

City SARNOBATWADI**PIN Code:** 416004**Email ID:** ashwinivkhadagale2005bcom@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 8 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059288 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 6 6 8 3 0 3 1 3**Full Name:** ! KURANE TANISHA SURESH**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** MAHAR **Physical Disability** NOT APPLICABLE

Correspondence Address:

KARVEER

City KARVEER**PIN Code:** 416002**Email ID:** tanishakurane159@gail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4 | 1/1 87964 Management Functions & Applications Paper-I Cr. 4

1/1 87973 Insurance Paper-I Cr. 4 | 1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:**



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 4 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058822 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** **9 3 5 9 7 7 5 8 3 0****Full Name:** **! MAGDUM SAKSHI SANDIP****Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAM NAGA 3RD LINE ,BAMANI,KAGAL

City KOLHAPUR**PIN Code:** 416232**Email ID:** sakshismagdum2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 1 8**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059292 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 6 7 2 0 0 7 4 9**Full Name:** ! MANGLEKAR SIDDHI DHANANJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** SALI**Physical Disability** NOT APPLICABLE**Correspondence Address:**

277/B26 CHAVAN COLONY

City CHVAN COLONY**PIN Code:** 416012**Email ID:** siddhidmanglekar2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 7 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059294 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 7 9 9 8 7 0 0 6 2**Full Name:** ! MORE MADHURA KUMAR**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** CHAMBHAR **Physical Disability** NOT APPLICABLE

Correspondence Address:

KAGAIL

City KAGAIL**PIN Code:** 416216**Email ID:** madhuramore73@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 7 0**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059296 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 1 0 5 0 1 7 1 3**Full Name:** ! MORE PRACHI PRATAP**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

shaniwar peth 2109

City kolhapur**PIN Code:** 416002**Email ID:** prachimore012@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 4 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058890 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 3 5 0 6 3 3 6 6 1**Full Name:** ! MULLA KHALID JAVED**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** MUSLIM **Cast:** MUSLIM **Physical Disability** NOT APPLICABLE

Correspondence Address:

SUDARASHAN SOSAYATI, TEMABALAIWADI, UCHGAON, KOLHAPUR

City UCHGAON**PIN Code:** 416005**Email ID:** khalidbhai12op@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4	1/1 87963 Micro Economics Paper-I Cr. 4
1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/1 87965 Principles of Marketing Paper-I Cr. 4
1/1 87973 Insurance Paper-I Cr. 4	1/1 87976 Business Communication Paper-I Cr. 4
1/1 89308 SEC I - Democracy, Election and Good Governance (1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 0 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058924 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 8 5 6 9 9 0 1 5 4**Full Name:** ! PACHGAONKAR SWATI BAJARANG**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJARAMPURI

City RAJARAMPURI**PIN Code:** 416007**Email ID:** swatibpachgaonkar2006@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 5 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058928 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 8 3 4 6 9 0 1 4 7**Full Name:** ! PARALE NISHA NANDKUMAR**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

vadakashivale

City vadakashivale**PIN Code:** 416207**Email ID:** nishaparalebcom@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058930 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 7 9 6 5 7 9 1 9**Full Name:** ! PARASE VAISHNAVI RAVINDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Holar**Physical Disability** NOT APPLICABLE**Correspondence Address:**

878 'C' WARD UMA TAXIES SHUBHASH ROAD RAVIVAR PETH, KOLHAPUR

City KOLHAPUR**PIN Code:** 416002**Email ID:** vaibhavparse2002@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058941 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 0 4 2 6 1 2 8 5**Full Name:** ! PATIL APARNA SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

692/7, SAMARTH COLONY , SAMBHAJI NAGAR, KOLHAPUR

City KOLHAPUR**PIN Code:** 416012**Email ID:** patilapuu6@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058943 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 4 4 6 4 2 6 0 9 2**Full Name:** ! PATIL ASHIKA SUNIL**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Holar**Physical Disability** NOT APPLICABLE**Correspondence Address:**

YADAV NAGAR , KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 5 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058948 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 6 3 7 1 8 3 0 9 9**Full Name:** ! PATIL ASHWINI ANIL**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** Other**Cast:** Other**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GIRGAON

City GIRGAON**PIN Code:** 416013**Email ID:** ashwinipatil9637183099@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 8 9 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059303 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 4 3 2 0 0 2 8 3 5**Full Name:** ! PATIL RAJANIGANDHA UTTAM**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGLWAR

City MANGLWAR**PIN Code:** 416012**Email ID:** rajanisachu2002@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 4 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058986 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 8 3 0 4 2 7 1 8 5**Full Name:** ! PATIL RUTUPARNA RAMCHANDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

RAJARAMPURI

City RAJARAMPURI**PIN Code:** 416008**Email ID:** rutupatil283@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4 | 1/1 89308 SEC I - Democracy, Election and Good Governance (

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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.

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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 5 3**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058877 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 2 9 9 9 7 6 8 4**Full Name:** ! PATIL SAYLI ANIL**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Holar**Physical Disability** NOT APPLICABLE**Correspondence Address:**

45/304 E WARD YADAV NAGAR , KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** sayliapatil2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

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

1/1 87962 Financial Accounting Paper-I Cr. 4

1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 7 5 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059305 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 5 2 9 8 3 9 8 9**Full Name:** ! PAWAR BHAKTI DNYANDEV**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

PAWAR GALI

City PAWAR GALI**PIN Code:** 591229**Email ID:** bhaktidnyandev2006@gail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 3 9 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058791 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 8 4 6 8 9 9 8 3 8 4**Full Name:** ! PHADTARE MINAKSHI MANGESH**Write Name in Devanagari (Marathi):** _____**Gender:** Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE**Correspondence Address:**

MANGLWAR PETH

City MANGLWAR PETH**PIN Code:** 416012**Email ID:** minakshimphadtare2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87964 Management Functions & Applications Paper-I Cr. 4	1/2 87977 Micro Economics Paper-II Cr. 4
1/2 87978 Financial Accounting Paper-II Cr. 4	1/2 87979 Management Functions and Applications Paper-II Cr.
1/2 87980 Principles of Marketing Paper-II Cr. 4	1/2 89309 SEC II - Constitution of Indian and Local Self Governn
1/2 87988 Insurance Paper-II Cr. 4	1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058793 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 2 8 4 4 3 6 0 6 6**Full Name:** PISAL PRAJAKATA VISHAL**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

609 B WARD MANISHA NAGAR 46/5, KOLHAPUR

City KOLHAPUR**PIN Code:** 416004**Email ID:** prajaktapk1@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 8 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059309 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 6 1 6 4 4 0 4 6**Full Name:** ! POWAR SANIKA YOGESH**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Maratha**Physical Disability** NOT APPLICABLE**Correspondence Address:**

SHIROLI PULACHI

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 4 7 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058811 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 1 8 0 0 9 4 5 9 6**Full Name:** ! RASAL AADITI UMESH**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** PARIT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

KARVEER

City KARVEER**PIN Code:** 416008**Email ID:** aaditurasal2005@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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)
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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 8 0 9 9**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058814 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 2 8 4 0 5 0 4 2 8**Full Name:** ! RASAL ANKITA NARENDRA**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** PARIT**Physical Disability** NOT APPLICABLE**Correspondence Address:**

214 E WARD YADAV NAGAR, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** rasalankitanarendra@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

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



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 9 1 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023059313 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 5 5 8 5 4 5 8 8 5**Full Name:** ! SAKARIYA KHUSHI BHANUKUMAR**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** JAIN**Physical Disability** NOT APPLICABLE**Correspondence Address:**

790 PT 17 RAIGAD COLONY

City KOLHAPUR**PIN Code:** 416007**Email ID:** kushijain4372@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 5 3 6**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058819 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 0 2 1 7 5 5 1 8 0**Full Name:** ! SALOKHE SRUSHTI AJIT**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

SHUKAR WAR PETH

City SHUKAR WAR PETH**PIN Code:** 416002**Email ID:** srushtisalokhe03@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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.

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Specimen Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 9 6 5 2**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058821 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 0 5 8 1 6 5 5 4 4**Full Name:** ! SANTI SACHIRANI KUMAR**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** Lingayat**Physical Disability** NOT APPLICABLE**Correspondence Address:**

mali galli

City sarbonatwadi**PIN Code:** 416004**Email ID:** sachiranisanti465@gmail.com**Study Center:** N.A.**Fees Details:**

Total Fee ₹: 0

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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.

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Specimen Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2022031774 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 5 7 9 0 9 0 2 0 5**Full Name:** ! SATHE KOMAL NANASAHEB**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

RAJENDRANAGAR, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** SATHEKOMALNANASAHEB@GMAIL.COM**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

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)
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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

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

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058894 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR**Personal Information :****Mobile NO :** 9 1 4 6 8 0 8 2 6 6**Full Name:** ! SHARMA PRIYANKA ASHOK**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** SUTAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

GOKULSHIRGOAN, KIT KAMANNEAR, KOLHAPUR

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

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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)
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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 8 7 9 8 7**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058926 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 9 9 2 3 8 2 8 4 4 1**Full Name:** !UBALE DIKSHA MARUTI**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** MAHAR **Physical Disability** NOT APPLICABLE

Correspondence Address:

RAJENDRA NAGAR, NAVIN VASAHAAT, KARVEER, KOLHAPUR

City KOLHAPUR**PIN Code:** 416008**Email ID:** dikshamubale2006@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0** (Uni.Fee. 0)**SEM I), SEM II)****Subject Details :**

1/1 87962 Financial Accounting Paper-I Cr. 4 | 1/1 87976 Business Communication Paper-I Cr. 4

1/2 87977 Micro Economics Paper-II Cr. 4 | 1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr. | 1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn | 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II 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 Signature:			



SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



To,

Form No. : **4 3 7 8 0 1 5**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2022027013 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 8 0 1 0 1 4 8 6 9 9**Full Name:** ! UTTURKAR ARYA VIJAY**Write Name in Devanagari (Marathi):** _____**Gender:** Female**Religion:** HINDU**Cast:** SONAR**Physical Disability** NOT APPLICABLE**Correspondence Address:**

NAVDURGA GALLI, VIKRAMNAGAR, KOLHAPUR

City KOLHAPUR**PIN Code:** 416005**Email ID:** aryautturkar754@gmail.com**Study Center:** N.A.**Fees Details:**Total Fee ₹: **0**

(Uni.Fee. 0)

SEM II)**Subject Details :**

1/2 87978 Financial Accounting Paper-II Cr. 4

| 1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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SHIVAJI UNIVERSITY, KOLHAPUR
Application Form for **B.COM (C.B.C.S) PART 1 SEM II (NEP)**
Examination, March-2024



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Form No. : **4 3 8 9 5 6 4**

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

Sir, I request the permission to present myself at the B.COM (C.B.C.S) PART 1 SEM II (NEP) exam to be held in March-2024 for the papers mentioned below.

PRN: 2023058942 **College:** Gopal Krishna Ghokhale College, Kolhapur. , KOLHAPUR

Personal Information :**Mobile NO :** 7 3 7 8 8 3 5 8 1 6**Full Name:** ! YADAV PRAJAKTA RAVINDRA**Write Name in Devanagari (Marathi):** _____

Gender: Female **Religion:** HINDU **Cast:** Maratha **Physical Disability** NOT APPLICABLE

Correspondence Address:

KAGAL

City KAGAL**PIN Code:** 416012**Email ID:** prajaktar1999@gmail.com**Study Center:** N.A.**Fees Details:****Total Fee ₹:** 0 (Uni.Fee. 0)**SEM II)****Subject Details :**

1/2 87977 Micro Economics Paper-II Cr. 4

1/2 87978 Financial Accounting Paper-II Cr. 4

1/2 87979 Management Functions and Applications Paper-II Cr.

1/2 87980 Principles of Marketing Paper-II Cr. 4

1/2 89309 SEC II - Constitution of Indian and Local Self Governn

1/2 87988 Insurance Paper-II Cr. 4

1/2 87991 Business Communication Paper-II Cr. 4

Optional Subjects:

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