

## Jawahar Education Society's, INSTITUTE OF TECHNOLOGY, MANAGEMENT & RESEARCH, NASHIK.

Approved by AICTE, Delhi, DTE, Maharashtra, Affiliated by Savitribai Phule Pune University, Pune, NAAC Accredited

	Department of	Engineerir	ng	
		ination Application		
Name of Student:		PRN No:	AY:	
Subject: Permission to appear for In-Sem examination			(Month and Year)	
F	Respected Sir / Madam,			
]	I, the undersigned Mr./Ms.		is / was a	
	e student of our institute presently studying i			
	lemic yearto Since I co			
	, I humbly request you to grant me the pe			
_	tion scheduled to be held in the month of		_	
		(		
G. N	N AC 11 (C T/T)	911 491	Marks Obtained in	
Sr. No.	Name of Subject (Sem- I / II)	Subject Code	Previous Attempt	
Encl: Pr	evious attempt marksheet.			
			Signature of the Student	
Email Id	l:	Mobile 1	No:	
	 For I	 Department Use Only		
Seat No	Allotted:	·		
Permissi	ion Approved/ Not Approved:			
Signature of Department Exam Co-Ordinator		Signa	Signature of Head of Department	
Date:		Dates	Date:	