



SHRI RAJASTHANI SEVA SANGH'S  
Smt. PARMESHWARIDEVI DURGADUTT TIBREWALA LIONS JUHU  
COLLEGE OF ARTS, COMMERCE & SCIENCE  
(AFFILIATED TO THE UNIVERSITY OF MUMBAI)

(AUTONOMOUS)

Date: 30/07/2025.

**EXAMINATION NOTICE**

Students who FAILED/ATKT in the F.Y. (B.A. / B.COM) Semester- I / II (NEP-2020) Examination and wish to appear for Examination will be held in August-2025 are instructed to download the Examination Form from College website.

College Website: [www.spdtcollege.ac.in/](http://www.spdtcollege.ac.in/)

The form should be filled up and submitted the same in the college office as per following schedule:

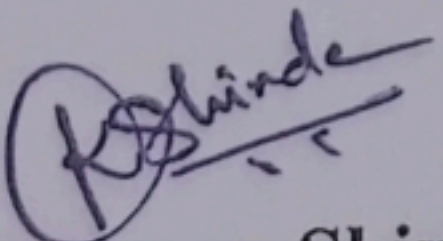
CLASS	Submission of Forms	Time
F.Y. (B.A./ B.COM) Semester – I / II (NEP- 2020)	01/08/2025 To 05/08/2025	11:00 a.m. To 1:00 p.m.

➤ **Examination Fees:**

Per subject Rs. 100/-

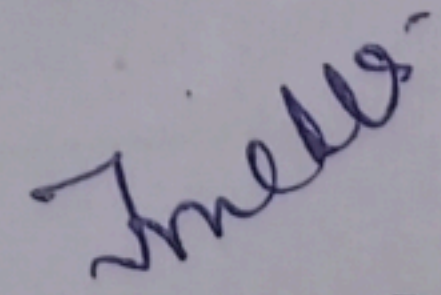
➤ **Document Required:**

- 1) Marksheet Semester I / II: 01 Photocopy for each semester
- 2) ABC ID Printout
- 3) X<sup>th</sup> Passing Certificate Photocopy or XII<sup>th</sup> Leaving Certificate

  
Dr. Karuna Shinde

Controller of Examinations



  
Dr. (Smt.) Trishla Mehta  
PRINCIPAL





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ATKT EXAMINATION FORM  
FYBCOM SEM -I (NEP2020)

Class :- \_\_\_\_\_ Semester :- \_\_\_\_\_ Seat No.:- \_\_\_\_\_

Student photo

Mobile No.: \_\_\_\_\_ Alternate Mobile No.: \_\_\_\_\_

Email ID- \_\_\_\_\_ Student ID No.: \_\_\_\_\_

Candidate Name: - \_\_\_\_\_  
(Surname)(First Name)(Middle Name)(Mother Name)

Address: - \_\_\_\_\_

( ☒ tick the appropriate box....)

SUBJECT	INTERNAL	EXTERNAL	SUBJECT	INTERNAL	EXTERNAL
Introduction to Business			Recent trends in Accounts		
Accountancy & Financial Management			Negotiation skill		
Economics for Professional Career-I			Business Communication skills		
Effective Communication I			Soft Skills & Personality Development		
Logic and data Interpretation			Indian knowledge System		
XXXXXXXXXXXXXXXXXXXX	XXXXXX	XXXXXX	Cyber Security		

Date : \_\_\_\_\_

Student Sign :- \_\_\_\_\_

**FOR OFFICE USE**

Received Amount: \_\_\_\_\_

Vide Receipt No. \_\_\_\_\_

Date : \_\_\_\_\_

Receiver Sign.: \_\_\_\_\_