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FORM NO : 1681330

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RAJASTHAN TECHNICAL UNIVERSITY, KOTA
B.TECH. SEM - VI EXAM - 2018 (REBACK / MERCY BACK)
(BACK)
BRANCH : ELECTRICAL ENGINEERING

09-Feb-2018

EXAMINATION FORM

College : GOVT. ENGINEERING COLLEGE, AJMER (1209)

Form No : 1681330
 Roll No : 12EEAEE001
 Enrollment No : 12E1EAEEM45P001
 Applicant Name : AJEET KUMAR
 Father's Name : SURESH KUMAR VERMA
 Mother's Name : RITA DEVI
 Gender : MALE
 Date Of Birth : 15-Dec-1994
 Mobile : 9782275440
 Email ID : ajtkr996@gmail.com
 You have Aadhaar Card :
 Aadhaar No.



Ajeet Kumar
 Signature of the Student

Contact Details**Permanent Address**

VILL-NIRPURA, P.O. DHARAUT., P.S. MAKHDUMPUR,
 DHARAUT
 BIHAR BIHAR-804405

Correspondance Address

VILL-NIRPURA, P.O. DHARAUT., P.S. MAKHDUMPUR,
 DHARAUT
 BIHAR BIHAR-804405

12. Theory Subject(s)

CODE	SUBJECT NAME
6EE3A	SWITCHGEAR & PROTECTION (6543)
6EE4A	ADVANCED POWER ELECTRONICS (6544)

13. Practical Subject(s)

CODE	SUBJECT NAME

14. Elective Theory/Improv. Subject(s)

CODE	SUBJECT NAME

15. Elective Practical/Improv. Subject(s)

CODE	SUBJECT NAME

Signature Of Head Of Institute

Signature Of Student



RAJASTHAN TECHNICAL UNIVERSITY, KOTA
B.TECH. SEM - VI EXAM - 2018 (REBACK / MERCY BACK)
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BRANCH : ELECTRICAL ENGINEERING
EXAMINATION FORM

09-Feb-2018

College : GOVT. ENGINEERING COLLEGE, AJMER (1209)

Form No : 1681331
 Roll No : 12EEAEE038
 Enrollment No : 12E1EAEEM45P038
 Applicant Name : SHUBHAM KUMAR SINGH
 Father's Name : DHARM NATH SINGH
 Mother's Name : SUNITA SINGH
 Gender: MALE
 Date Of Birth: 06-Jan-1995
 Mobile: 9571223036
 Email ID: shubhamdhrw10@gmail.com
 You have Aadhaar Card :
 Aadhaar No.



Permanent Address	Contact Details	Correspondance Address
PATHAK COLONY,MANAITAND,PODHANBAD JHARKHAND, 826001 JHARKHAND JHARKHAND-826001		PATHAK COLONY,MANAITAND,PODHANBAD JHARKHAND, 826001 JHARKHAND JHARKHAND-826001

12. Theory Subject(s)		13. Practical Subject(s)	
CODE	SUBJECT NAME	CODE	SUBJECT NAME
6EE6.2A	POWER SYSTEM INSTRUMENTATION (6547)		
14. Elective Theory/Improv. Subject(s)		15. Elective Practical/Improv. Subject(s)	
CODE	SUBJECT NAME	CODE	SUBJECT NAME

Signature Of Head Of Institute

Signature Of Student