

VIVEKANAND EDUCATION SOCIETY'S INSTITUTE OF TECHNOLOGY

09/02/2026

IMPORTANT NOTICE FOR UNIVERSITY OF MUMBAI KT STUDENTS

Students who failed in the **University examination of Engineering Semester VIII** are required to fill KT examination forms for examination to be held in May / June-2026 (Summer-2026) on or before 12/02/2026.

Examination Forms in PDF format are attached herewith for your information. You are requested to fill the KT exam form in hard copy and get it verified from exam department.

After the verification you are requested to pay the KT examination fees as applicable to you in the administration office Room No. 01 and submit the same to examination department on or before 12/02/2026.

Without paying the fees, the form will not be approved to send to Mumbai University and college will not be responsible for the same.

Please Note: Students who have been declared failed in the previous examination for the subject of any heads, which is mentioned below, are required to fill the examination forms without fail.

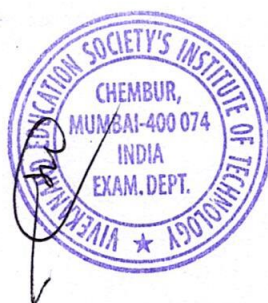
(Without examination form and /or payment of exam fees, examination seat number will not be allotted, and without seat number student will not be allowed to appear for the examination. And the subject will be counted as a kt., which may lose your year (YEAR DROP).

- i) End sem. (Theory)
- ii) Internal Assessment (Test Exam.)
- iii) Oral
- iv) Practical

KT Exam Fees Chart		
Number of Subjects	KT exam Fees	
	For UG	For PG
1 Subject	319	586
2 Subjects	586	990
3 or more subjects	1258	1859

If you have any query, please contact examination department VESIT.

Exam Department





VIVEKANAND EDUCATION SOCIETY'S INSTITUTE OF TECHNOLOGY

H.A.M.C. COLLECTOR'S COLONY, R.C.MARG, CHEMBUR, MUMBAI -400074. Tel -91-22-61532532

(On Behalf of University of Mumbai)

Admission Type

1 = Provisional ☐

0 = Non- Provisional ☐

Exam Session

1 = First Half ☐

2 = Second Half ☐

Year

Semester /Course

Branch Name:

Year of Registration at F.E. (Sem I)

1.NAME	Surname	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Photograph Do not pin/Staple Paste inside the box only Not to be attested
	First/ Own Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
	Father's/Husband's Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		
	Mother's Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>		

2. The above name in DEVANAGARI SCRIPT (in Marathi)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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3. COMPLETE POSTAL ADDRESS

PIN Tel No. /Mob.

4. Sex

1. Male ☐

2. Female ☐

5. EBC/Non- EBC

1. EBC ☐

2. Non-EBC ☐

6. Category

0 = Open 4. = NT 1 ☐

1 = SC 5. = NT 2 ☐

2 = ST 6. = NT 3 ☐

3 = DT 7. = OBC/SBC ☐

7. Student Type

1. = Student ☐

2. = Ex-Student ☐

8. Subject Offered

(Enter marks ONLY if Claiming exemption)

Paper No.	Subject Name	Marks Obtained					
		Int. Ass.	Theory	Term Work	Oral	Practical	PR & OR
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							

9. Year in which kept terms for

From July 20 To Nov. 20

From Jan. 20 To April 20

10. Details of Lower Examination

semester	Month & Year Passing	Seat No.	No. of Heads in which the student has failed
I			
II			
III			
IV			
V			
VI			

To,
Controller of Examination,
VES Institute of Technology,
H.A.M.C. Collector's Colony, R.C. Marg, Chembur-74.
Sir,
I request permission to present myself for ensuring examination. I have remitted the prescribed fee for the Same accordingly and the information furnished above is correct.

Place:

Date:-

Candidate's Signature

Certificate from the Class Teacher

I certify that student has kept terms for the examination as per University rules satisfactorily and he/ she is eligible to appear at the examination. I also certify that the information furnished is the candidate in the examination form is correct.

Place: -

Date: -

Signature