COEP Technological University

A Unitary Public University of Government of Maharashtra
(Formerly College of Engineering Pune (COEP))
Phone No. +91-20-25507073

Semester Examination Attendance Sheet

Branch Name:- Electronics and Telecommunication Engineering

Semester:- Semester VII

Course Name:- SAP Production Planning

Divisions:- Div-1

Date:- 17/11/2026

Time:- 2.30 PM TO 5.30PM

Room No. :- NC 10 -(1)

Sr No.	PRN No.	Student Name	ABC Id	Answer Book No.	Supplement No		Signature
1	612207016	DAANISH ABDUL DAYAN SHAIKH	679389820821				
2	612302010	BHUTADA YASH SUNIL	344589647611				
3	612302047	PUROHIT KESHAV SHASHIKANT	692108635763				
4	612302066	VIVEK SUNIL KHANDELWAL	617097134787				
5	612303053	DIGHE SAHIL ROHIDAS	662497424545				
6	612303075	JYOTIKA SHARAN	784953376488				
7	612303089	KATRUWAR VEDANT UMAKANT	744180818227				
8	612303110	MANE ANJALI ARJUNRAO	861158936732				
9	612303117	METKARI KSHITIJA RAVINDRA	801274851362				
10	612303140	PISE YUGANDHAR JAGDISH	978391737659				
11	612303184	TAYADE VAIBHAV PRAMOD	454375853309				
12	612305034	JAIN SAMKIT SANJAY	844450484960				
13	612305043	KARPE MANGESH NANASAHEB	775412226814				
14	612305059	MUTHA TANMAY ANAND	301948807460				
15	612305087	TUPPEKAR SWARAJ SAKHARAM	568525816279				
16	612310017	BHAGAT SWARAJ BALASO	944985120402				
17	612310023	CHAFALE SOMENDRA DEVIDAS	218239972462				
18	612310029	DABHADE SUYASH VIJAY	974814351665				
19	612310059	HARDE ADVAY BALASAHEB	572623336225				
20	612310062	JADHAV HARSHVARDHAN AJIT	530936728821				
21	612310105	NAIKWADI RAMIJ MANSUR	559925085760				
22	612310106	NALAWADE ADARSH SHIVAJI	834924329171				
23	612310120	PATIL KEDAR SHIRISH	919078587967				
24	612310121	PATIL MOHIT HEMKANT	424050768847				
25	612310123	PATIL OM ARUN	936561307224				
26	612310126	PATIL SANGRAMSINH HANMANT	995155532616				
27	612310155	SHENDAGE VAIBHAV DADASAHEB	422733358047				
28	612310157	SHINDE ATHARVA DEELIP	847889799255				
29	612311014	BAGAL OM CHANDRAKANT	619107442009				
30	612311045	KURLE ARCHIT MANDAR	353706310413				
Total Students:							
Present:				**Name & Signature of invigilator**			
Absent:							

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