

Date: 6th October 2026

IMPORTANT CIRCULAR

SUBMISSION OF EXAMINATION FORMS

Second Year, Third Year and Final Year B.Tech. Students

In continuation of the earlier circular regarding submission of examination forms within the stipulated time, all Second Year, Third Year and Final Year B.Tech. students are hereby informed that they must complete the examination form submission and payment of examination fees on or before 15th October 2026 without fail.

Students are requested to carefully follow the procedure given below:

1. **Examination Forms** are available on the Institute website: www.umat.ac.in.
2. The **Examination Fee** tab is available under “**Other Fees.**” The regular examination fee will be selected automatically. Students appearing for backlog examinations shall pay the applicable fee based on the backlog subject(s).
3. Separate examination forms must be filled for:
 - o **Regular Examination**
 - o **Backlog Examination**
4. **Examination fees** must be **paid online** through the facility made available in “**Other Fees**” Section. Students must take a printout of the examination fee payment receipt.
5. Students shall fill in the examination form carefully and submit the following documents:
 - o **Duly filled Examination Form**
 - o **Admission Confirmation Receipt for AY 2026–27**
 - o **Examination Fee Payment Receipt**
6. The above documents shall be submitted to the respective CR/SR (Class Representative/Student Representative). The CR/SR shall collect the forms and arrange them in the order of the roll numbers allotted for AY 2026–27.
7. The complete set of examination forms shall be submitted by the CR/SR to the Administrative Office on or before **15th October 2026, by 2:00 p.m.**, to:
 - o **Ms. Trupti Yadav, or**
 - o **Ms. Karishma Patil**
8. In case of any difficulty in filling the examination form or making payment of the examination fees, students may contact the above-mentioned staff members for assistance.

Important

It is mandatory for all students to adhere to the prescribed schedule for filling the examination form and payment of examination fees.

Students who have not confirmed their admission for AY 2026–27 by paying the prescribed college fees will not be permitted to appear for the examination. Such students are therefore advised to immediately complete the admission confirmation process by paying the applicable college fees.

All students are requested to take this matter seriously and ensure timely compliance.


Dr. Yogesh Nerkar
PRINCIPAL



Usha Mittal Institute of Technology
S.N.D.T. Women's University,
Juhu Tara Road, Santacruz (West), Mumbai-400 049

Fresh Examination Form

Bachelor of Technology (B. Tech) Semester V, Electronics and Communication

Receipt No. -	Receipt Date -
Amount -	

Examination Fee Amount: Rs.1150/- & Practical Fee Rs.500/- (Per Semester)

To,
The Director
Board of Examinations and Evaluation,
S.N.D.T Women's University, Mumbai-400 049.

Sir,
I request your permission to appear for the Bachelor of Technology Semester - _____ to be held in **Nov-Dec 2026** at **UMIT** Santacruz Centre.

Name:

(Write in Block letters) (Surname) (Name) (Father Name) (Mother Name)

PRN:

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Mobile. No.:

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E mail ID. _____

Subject Code	Subject Name	Internal	External
50510511	Analog and Digital Communication	✓	✓
50510521	Analog and Digital Communication Lab	✓	✓
50510512	Control Systems	✓	✓
50510513	Embedded Systems	✓	✓
50510523	Embedded Systems Lab	✓	✓
50710511	Basics of Machine Learning	✓	✓
50710521	Basics of Machine Learning Lab	✓	✓
51030811	Drone Technology	✓	✓
51030821	Drone Technology Lab	✓	✓
50841111	VLSI System Design	✓	✓
50841121	VLSI System Design Lab	✓	✓

I declare that the information furnished in this form is true to the best of my knowledge and belief.

Date:

Signature of the student

Note: Please fill in your previous qualifying examination details, (Please ✓ Passed/Failed/ATKT) and attach xerox copies of all previous Marksheets.

B.Tech Sem	Seat No	Month & Year of Appearance	Total Marks	Out of	Passed	Failed	ATKT
I							
II							
III							
IV							

I certify that Ms._____has satisfactorily completed the prescribed course of this University and has attended the lectures in accordance with the University Regulations in the academic year 2026-27.

I further certify that to the best of my knowledge and belief, the said candidate is a bonafide student of good conduct, and that she has my permission to appear for **B.Tech Sem - _____** Examination, of the UMIT, SNDT Women's University, Mumbai.

Date :

College Stamp

Signature of Principal/HOD

IMPORTANT INSTRUCTIONS

1. All the information in the form is to be filled by applicant only. Before filling the form the applicant is advised to go through the instructions given.
2. Examination form should be filled in Blue/ Black coloured ink only.
3. A xerox copy of the statement of the marks of all previous examination is to be attached.
4. The applicant should check all the information appearing in the form. In case she finds any incorrect data, the necessary corrections are to be done on the form itself.



Usha Mittal Institute of Technology
S.N.D.T. Women's University,
Juhu Tara Road, Santacruz (West), Mumbai-400 049

Fresh Examination Form

Bachelor of Technology (B. Tech) Semester V, Computer Science and Technology

Receipt No. -	Receipt Date -
Amount -	

Examination Fee Amount: Rs.1150/- & Practical Fee Rs.500/- (Per Semester)

To,
The Director
Board of Examinations and Evaluation,
S.N.D.T Women's University, Mumbai-400 049.

Sir,
I request your permission to appear for the Bachelor of Technology Semester - _____ to be held in **Nov-Dec 2026** at **UMIT** Santacruz Centre.

Name:

(Write in Block letters) (Surname) (Name) (Father Name) (Mother Name)

PRN:

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Mobile. No.:

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E mail ID. _____

Subject Code	Subject Name	Internal	External
50540111	Computer Networks	✓	✓
50540121	Computer Networks Lab	✓	✓
50520611	Database Management Systems	✓	✓
50520621	Database Management Systems Lab	✓	✓
50520612	Formal Language and Automata Theory	✓	✓
50731111	Artificial Intelligence	✓	✓
50731121	Artificial Intelligence Lab	✓	✓
51031311	Cyber Security	✓	✓
51031321	Cyber Security Lab	✓	✓
50830111	Microprocessor and Microcontroller	✓	✓
50830121	Microprocessor and Microcontroller Lab	✓	✓

I declare that the information furnished in this form is true to the best of my knowledge and belief.

Date:

Signature of the student

Note: Please fill in your previous qualifying examination details, (Please ✓ Passed/Failed/ATKT) and attach xerox copies of all previous Marksheets.

B.Tech Sem	Seat No	Month & Year of Appearance	Total Marks	Out of	Passed	Failed	ATKT
I							
II							
III							
IV							

I certify that Ms._____has satisfactorily completed the prescribed course of this University and has attended the lectures in accordance with the University Regulations in the academic year 2026-27.

I further certify that to the best of my knowledge and belief, the said candidate is a bonafide student of good conduct, and that she has my permission to appear for **B.Tech Sem - _____** Examination, of the UMIT, SNDT Women's University, Mumbai.

Date :

College Stamp

Signature of Principal/HOD

IMPORTANT INSTRUCTIONS

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Usha Mittal Institute of Technology
S.N.D.T. Women's University,
Juhu Tara Road, Santacruz (West), Mumbai-400 049

Fresh Examination Form

Bachelor of Technology (B. Tech) Semester V, Information Technology

Receipt No. -	Receipt Date -
Amount -	

Examination Fee Amount: Rs.1150/- & Practical Fee Rs.500/- (Per Semester)

To,
The Director
Board of Examinations and Evaluation,
S.N.D.T Women's University, Mumbai-400 049.

Sir,
I request your permission to appear for the Bachelor of Technology Semester - _____ to be held in **Nov-Dec 2026** at **UMIT** Santacruz Centre.

Name:

(Write in Block letters) (Surname) (Name) (Father Name) (Mother Name)

PRN:

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Mobile. No.:

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E mail ID. _____

Subject Code	Subject Name	Internal	External
50510611	Embedded, Microcontroller and IOT	✓	✓
50510621	Embedded, Microcontroller and IOT Lab	✓	✓
50510612	Fuzzy and Computational Intelligence	✓	✓
50510622	Fuzzy and Computational Intelligence Lab	✓	✓
50510613	IPR and Research Tools	✓	✓
50710611	Scalable Data Analytics for IT	✓	✓
50710621	Scalable Data Analytics for IT Lab	✓	✓
51031311	Cyber Security	✓	✓
51031321	Cyber Security Lab	✓	✓
50810611	Cloud Infrastructure and Network Essentials	✓	✓
50810621	Cloud Infrastructure and Network Essentials Lab	✓	✓

I declare that the information furnished in this form is true to the best of my knowledge and belief.

Date:

Signature of the student

Note: Please fill in your previous qualifying examination details, (Please ✓ Passed/Failed/ATKT) and attach xerox copies of all previous Marksheets.

B.Tech Sem	Seat No	Month & Year of Appearance	Total Marks	Out of	Passed	Failed	ATKT
I							
II							
III							
IV							

I certify that Ms._____has satisfactorily completed the prescribed course of this University and has attended the lectures in accordance with the University Regulations in the academic year 2026-27.

I further certify that to the best of my knowledge and belief, the said candidate is a bonafide student of good conduct, and that she has my permission to appear for **B.Tech Sem - _____** Examination, of the UMIT, SNDT Women's University, Mumbai.

Date :

College Stamp

Signature of Principal/HOD

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Usha Mittal Institute of Technology
S.N.D.T. Women's University,
Juhu Tara Road, Santacruz (West), Mumbai-400 049

Fresh Examination Form

Bachelor of Technology (B. Tech) Semester V, Computer Engineering

Receipt No. -	Receipt Date -
Amount -	

Examination Fee Amount: Rs.1150/- & Practical Fee Rs.500/- (Per Semester)

To,
The Director
Board of Examinations and Evaluation,
S.N.D.T Women's University, Mumbai-400 049.

Sir,
I request your permission to appear for the Bachelor of Technology Semester - _____ to be held in **Nov-Dec 2026** at **UMIT** Santacruz Centre.

Name:

(Write in Block letters) (Surname) (Name) (Father Name) (Mother Name)

PRN:

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Mobile. No.:

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E mail ID. _____

Subject Code	Subject Name	Internal	External
50540111	Computer Networks	✓	✓
50540121	Computer Networks Lab	✓	✓
50520611	Database Management Systems	✓	✓
50520621	Database Management Systems Lab	✓	✓
50520612	Formal Language and Automata Theory	✓	✓
50731111	Artificial Intelligence	✓	✓
50731121	Artificial Intelligence Lab	✓	✓
51031311	Cyber Security	✓	✓
51031321	Cyber Security Lab	✓	✓
50830111	Microprocessor and Microcontroller	✓	✓
50830121	Microprocessor and Microcontroller Lab	✓	✓

I declare that the information furnished in this form is true to the best of my knowledge and belief.

Date:

Signature of the student

Note: Please fill in your previous qualifying examination details, (Please ✓ Passed/Failed/ATKT) and attach xerox copies of all previous Marksheets.

B.Tech Sem	Seat No	Month & Year of Appearance	Total Marks	Out of	Passed	Failed	ATKT
I							
II							
III							
IV							

I certify that Ms._____has satisfactorily completed the prescribed course of this University and has attended the lectures in accordance with the University Regulations in the academic year 2026-27.

I further certify that to the best of my knowledge and belief, the said candidate is a bonafide student of good conduct, and that she has my permission to appear for **B.Tech Sem - _____** Examination, of the UMIT, SNDT Women's University, Mumbai.

Date :

College Stamp

Signature of Principal/HOD

IMPORTANT INSTRUCTIONS

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Usha Mittal Institute of Technology
S.N.D.T. Women's University,
Juhu Tara Road, Santacruz (West), Mumbai-400 049

Fresh Examination Form

Bachelor of Technology (B. Tech) Semester V, Data Science

Receipt No. -	Receipt Date -
Amount -	

Examination Fee Amount: Rs.1150/- & Practical Fee Rs.500/- (Per Semester)

To,
The Director
Board of Examinations and Evaluation,
S.N.D.T Women's University, Mumbai-400 049.

Sir,
I request your permission to appear for the Bachelor of Technology Semester - _____ to be held in **Nov-Dec 2026** at **UMIT** Santacruz Centre.

Name:

(Write in Block letters) (Surname) (Name) (Father Name) (Mother Name)

PRN:

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Mobile. No.:

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E mail ID. _____

Subject Code	Subject Name	Internal	External
50540111	Computer Networks	✓	✓
50540121	Computer Networks Lab	✓	✓
50510411	Digital Image and Video Processing	✓	✓
50510421	Digital Image and Video Processing Lab	✓	✓
50510412	Architecture for Data Processing	✓	✓
50731111	Artificial Intelligence	✓	✓
50731121	Artificial Intelligence Lab	✓	✓
51030811	Drone Technology	✓	✓
51030821	Drone Technology Lab	✓	✓
50810411	Internet of Things	✓	✓
50810421	Internet of Things Lab	✓	✓

I declare that the information furnished in this form is true to the best of my knowledge and belief.

Date:

Signature of the student

Note: Please fill in your previous qualifying examination details, (Please ✓ Passed/Failed/ATKT) and attach xerox copies of all previous Marksheets.

B.Tech Sem	Seat No	Month & Year of Appearance	Total Marks	Out of	Passed	Failed	ATKT
I							
II							
III							
IV							

I certify that Ms._____has satisfactorily completed the prescribed course of this University and has attended the lectures in accordance with the University Regulations in the academic year 2026-27.

I further certify that to the best of my knowledge and belief, the said candidate is a bonafide student of good conduct, and that she has my permission to appear for **B.Tech Sem - ____** Examination, of the UMIT, SNDT Women's University, Mumbai.

Date :

College Stamp

Signature of Principal/HOD

IMPORTANT INSTRUCTIONS

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2. Examination form should be filled in Blue/ Black coloured ink only.
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Usha Mittal Institute of Technology
S.N.D.T. Women's University,
Juhu Tara Road, Santacruz (West), Mumbai-400 049

Fresh Examination Form

Bachelor of Technology (B. Tech) Semester V, Artificial Intelligence

Receipt No. -	Receipt Date -
Amount -	

Examination Fee Amount: Rs.1150/- & Practical Fee Rs.500/- (Per Semester)

To,
The Director
Board of Examinations and Evaluation,
S.N.D.T Women's University, Mumbai-400 049.

Sir,
I request your permission to appear for the Bachelor of Technology Semester - _____ to be held in **Nov-Dec 2026** at **UMIT** Santacruz Centre.

Name:

(Write in Block letters) (Surname) (Name) (Father Name) (Mother Name)

PRN:

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Mobile. No.:

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E mail ID. _____

Subject Code	Subject Name	Internal	External
50540111	Computer Networks	✓	✓
50540121	Computer Networks Lab	✓	✓
50510111	Advanced AI	✓	✓
50510121	Advanced AI Lab	✓	✓
50710111	Internet of Things	✓	✓
50710121	Internet of Things Lab	✓	✓
50510112	Theory of Computation	✓	✓
51030811	Drone Technology	✓	✓
51030821	Drone Technology Lab	✓	✓
50830111	Microprocessor and Microcontroller	✓	✓
50830121	Microprocessor and Microcontroller Lab	✓	✓

I declare that the information furnished in this form is true to the best of my knowledge and belief.

Date:

Signature of the student

Note: Please fill in your previous qualifying examination details, (Please ✓ Passed/Failed/ATKT) and attach xerox copies of all previous Marksheets.

B.Tech Sem	Seat No	Month & Year of Appearance	Total Marks	Out of	Passed	Failed	ATKT
I							
II							
III							
IV							

I certify that Ms._____has satisfactorily completed the prescribed course of this University and has attended the lectures in accordance with the University Regulations in the academic year 2026-27.

I further certify that to the best of my knowledge and belief, the said candidate is a bonafide student of good conduct, and that she has my permission to appear for **B.Tech Sem - _____** Examination, of the UMIT, SNDT Women's University, Mumbai.

Date :

College Stamp

Signature of Principal/HOD

IMPORTANT INSTRUCTIONS

1. All the information in the form is to be filled by applicant only. Before filling the form the applicant is advised to go through the instructions given.
2. Examination form should be filled in Blue/ Black coloured ink only.
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