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2.5.2: Percentage of student complaints/grievances about evaluation against a total number of students who appeared in the examinations during the last five years.

2.5.2.1: Number of complaints/grievances about evaluation year-wise during the last five years.

YEAR	2019-20	2020-21	2021-22	2022-23	2023-24
NUMBER OF COMPLAINTS / GRIEVANCES	11	21	19	20	30

2.5.2.2: Number of students who appeared in the examination conducted by the institution year-wise during the last five years.

YEAR	2019-20	2020-21	2021-22	2022-23	2023-24
NUMBER	1640	2274	2317	2105	1971



Swarrnim Startup & Innovation University

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At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420

CERTIFICATE

This is to inform that Aarihant Homoeopathic Medical College and Research Institute Having Programme code 7 have 20 number of students for rechecking and reassessment in year 2023-24 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/reassessment summary

Sr no	Year	No of recheck
1	2023-24	20



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Aarihant Homoeopathic Medical College and Research Institute

Recheck/reassessment Academic year 2023-24

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1.	2174001036	Raval Vipulkumar Maheshbhai	73011201	Human Pathology And Microbiology	Pass
2.	2174001041	Khandala Rohitbhai Pratapbhai	73011201	Human Pathology And Microbiology	Pass
3.	2174001051	Kalsariya Pradikbhai Hareshbhai	73011201	Human Pathology And Microbiology	Pass
4.	2174001055	Champavat Jayrajsinh Virendrasinh	73011201	Human Pathology And Microbiology	Pass
5.	2174001071	Prajapati Parth Chandrakant	73011201	Human Pathology And Microbiology	Pass
6.	2174001072	Nagraj Sai Nareshkumar	73011201	Human Pathology And Microbiology	Pass
7.	2174001073	Sadhu Dharmikkumar Laldas	73011201	Human Pathology And Microbiology	Pass
8.	2174001074	Ramani Vinit Prakashbhai	73011201	Human Pathology And Microbiology	Pass
9.	2174001075	Jinjala Tushar Harjibhai	73011201	Human Pathology And Microbiology	Pass
10.	2174001080	Patel Milankumar Rajeshbhai	73011201	Human Pathology And Microbiology	Pass
11.	2174001046	Raval Vipulkumar Maheshbhai	73011203	Organon Of Medicine	Pass
12.	2174001019	Goswami Sandhya Nimeshkumar	73011203	Organon Of Medicine	Pass
13.	2174001099	Patil Kanan Nareshbhai	73011204	Homoeopathic Materia Medica	Pass
14.	1743002008	Prajapati Jill Bipinchandra	73011204	Homoeopathic Materia Medica	No Change
15.	2174001072	Nagraj Sai Nareshkumar	73011202	Forensic Medicine & Toxicology	Pass
16.	2174001073	Sadhu Dharmikkumar Laldas	73011202	Forensic Medicine & Toxicology	Pass
17.	2174001074	Ramani Vinit Prakashbhai	73011202	Forensic Medicine & Toxicology	Pass



SWARRNIM
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UNIVERSITY
WHERE IDEAS COME ALIVE.

INDIA'S FIRST UNIVERSITY FOR STARTUP

18.	2174001082	Jinjala Tushar Harjibhai	73011202	Forensic Medicine & Toxicology	Pass
19.	2174001083	Baldaniya Nikulbhai Jerambhai	73011202	Forensic Medicine & Toxicology	No Change
20.	2174001084	Der Sohilkhan Bhikhankhan	73011202	Forensic Medicine & Toxicology	No Change



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SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

2174001036

WINTER/SUMMER EXAMINATION

Name :		Raval Vipulkumar maheshbhai			
Enrollment. :		2174001036			
Institute :		AHMC & RI			
Branch Name With Code :				SEM: YEAR: 2	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011201	Human Pathology & microbiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 29/3/23

Vipul
Signature of Student

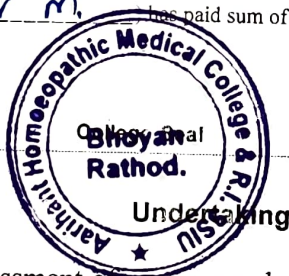
For Office Use Only (Institute Copy)

The student Raval Vipulkumar m.

SUMMER/WINTER EXAMINATION-.

has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees

Date: 29/3/23



Aarohant
Principal
Authorized Signatory
Aarohant Homoeopathic Medical College &
Bhoyan Rathod, Gandhinagar.

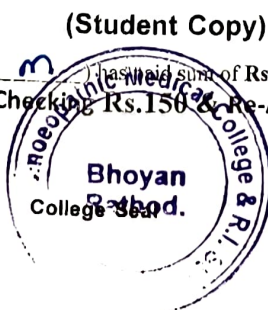
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Vipul
Signature of Student

The student Raval Vipulkumar m.

SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 29/3/23



Aarohant
Principal
Authorized Signatory
Aarohant Homoeopathic Medical College &
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

2174001091

WINTER/SUMMER EXAMINATION

Name :	Khandala Rohitbhai Pratekbhai				
Enrollment :	2174001091				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2

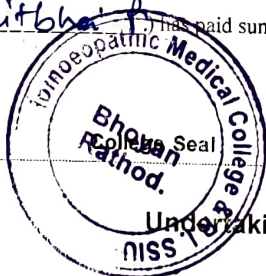
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011201	Human Pathology & Microbiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 21/3/23

Signature of Student

The student Khandala Rohitbhai has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 21/3/23



Under Taking

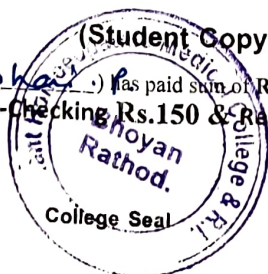
Principal
Aarihant Homoeopathic Medical College & Research Institute
Bhojan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student Khandala Rohitbhai has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 21/3/20



Principal
Aarihant Homoeopathic Medical College & Research Institute
Bhojan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

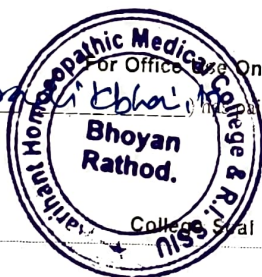
*21741001051

WINTER/SUMMER EXAMINATION

Name :		Kalsariya Pradikbhai Hareeshbhai			
Enrollment. :		2171001051			
Institute :		A H M C & R I			
Branch Name With Code :					SEM: 2 YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011201	Human Pathology & microbiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 29/3/23

The student (Kalsariya Pradikbhai Hareeshbhai)
SUMMER/WINTER EXAMINATION-



Signature of Student

Principal

Aarohant Homoeopathic Medical College & R.I. SSIU, Bhoyan Rathod, Gandhinagar.

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Kalsariya Pradikbhai Hareeshbhai)
SUMMER/WINTER EXAMINATION-2024.



(Student Copy)

paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees

Date: 29/3/23

College Seal

Aarohant Homoeopathic Medical College & R.I. SSIU, Bhoyan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam --:

Enrollment No.

* 2174001055

WINTER/SUMMER EXAMINATION

Name :	Champavat Jayrajsinh Virendrasinh				
Enrollment :	2174001055				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	13011201	Human Pathology & Microbiology		✓	
2.					
3.					
4.					
5.					
6.					

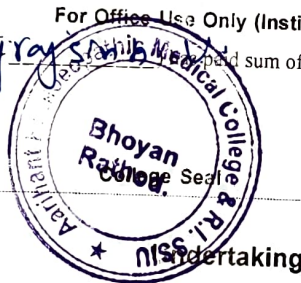
Date: 29/3/23

Signature of Student

The student (Champavat Jayrajsinh) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees.

SUMMER/WINTER EXAMINATION-

Date: 29/3/23



Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory

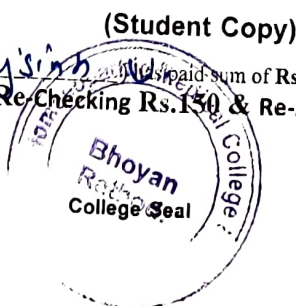
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Champavat Jayrajsinh) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees.

SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 29/3/23



Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No. _____

WINTER/SUMMER EXAMINATION

Name :	Pratyapati Parth Chandsakant				
Enrollment. :	2174001071				
Institute :	AHMC & RI				
Branch Name With Code :	-				
					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011201	Human Pathology and Microbiology		✓	
2.					
3.					
4.					
5.					
6.					

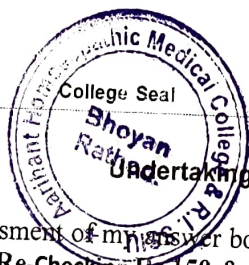
Date: 30/3/23

Parth
Signature of Student

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The student (Pratyapati Parth C.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 30/3/23



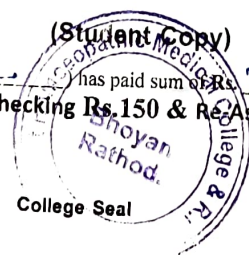
Shoyan Rathod
Principal
Aaroh Homoeopathic Medical College & Research Institute
Bhopal, Gandhinagar

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Parth
Signature of Student

The student (Pratyapati Parth C.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23



Shoyan Rathod
Principal
Aaroh Homoeopathic Medical College & Research Institute
Bhopal, Gandhinagar

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No. _____

--: Re-Assessment / Re-Checking for University Exam ::-

* _____ *

WINTER/SUMMER EXAMINATION

Name :	Nagraj Sai Nareshkumar				
Enrollment. :	2174001072				
Institute :	AHMC & RI				
Branch Name With Code :	73011201			SEM:	
				YEAR:	2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011201	Human Pathology & microbiology		✓	
2.					
3.					
4.					
5.					
6.					

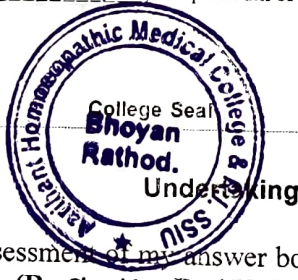
Date: 31/3/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Nagraj Sai Nareshkumar) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 31/3/23



Principal
Aarohit Homoeopathic Medical College & Research Institute
Bhoyan Rathod, Gandhinagar

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Nagraj Sai Nareshkumar) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 31/3/23



Principal
Aarohit Homoeopathic Medical College & Research Institute
Bhoyan Rathod, Gandhinagar

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

*2174001073

WINTER/SUMMER EXAMINATION

Name :	Sadhya Dharmik Kumar Ladda				
Enrollment. :	2174001073				
Institute :	AHMC + RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011201	Human Pathology & microbiology		✓	
2.					
3.					
4.					
5.					
6.					

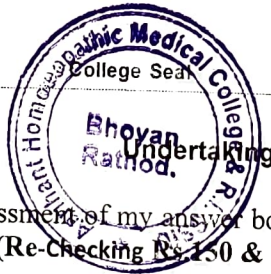
Date: 29/3/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Sadhya Dharmik Kumar L) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 21/3/23

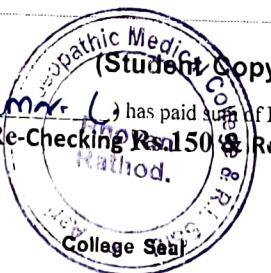


Principal
Aarohit Homoeopathic Medical College & Research Institute
Bhojan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Sadhya Dharmik Kumar L) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)



Date: 21/3/23

Principal
Aarohit Homoeopathic Medical College & Research Institute
Bhojan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

Re-Assessment / Re-Checking for University Exam :-

2174001079

WINTER/SUMMER EXAMINATION

Name :	Ramani vinit Prakashbhai				
Enrollment. :	2174001079				
Institute :	AHMC & R.I				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301/201	Human pathology & Microbiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 29/3/23

Signature of Student

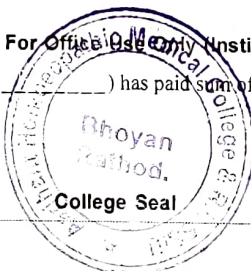
The student (Ramani Vinit P.)

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) has paid sum of Rs. /- as University Re-assessment / Re-Checking fees

SUMMER/WINTER EXAMINATION-.

Date: 29/3/23



Undertaking

Principal
Aarihant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Ramani Vinit P.)

(Student Copy)

) has paid sum of Rs. /- as University Re-assessment / Re-Checking fees

SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 29/3/23

College Seal

Principal
Aarihant Homoeopathic Medical College
Bhojan Rathod, Gandhinagar
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam --:

* 2174001075

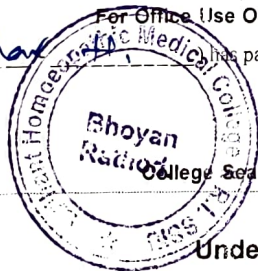
WINTER/SUMMER EXAMINATION

Name :	Jinjale Tushar Harjibhai				
Enrollment. :	2174001075				
Institute :	AHMC&RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	730112a	Human Pathology & microbiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 21/3/23

Tushar
Signature of Student

The student Jinjale Tushar Harjibhai has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.



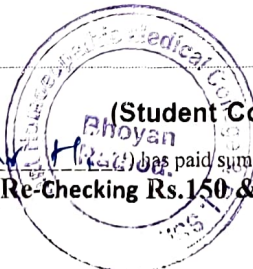
Aarohant
Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Date: 21/3/23

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Tushar
Signature of Student



The student Jinjale Tushar Harjibhai has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 21/3/23

College Seal

Aarohant
Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

:: Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

* 2174001080 *

WINTER/SUMMER EXAMINATION

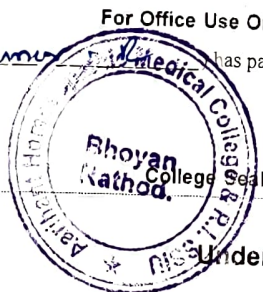
Name :	Patel Milankumar Rajeshbhai				
Enrollment. :	2174001080				
Institute :	MCMCR				
Branch Name With Code :					
					SEM:
					YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301201	Human Pathology & Microbiology.		✓	
2.					
3.					
4.					
5.					
6.					

Date: 30/3/23

Milankumar
Signature of Student

The student (Patel Milankumar) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 30/3/23



Undertaking

Aarbhant
Principal
Aarbhant Homoeopathic Medical College & P.H.C. Gandhinagar, Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Milankumar
Signature of Student

(Student Copy)
The student (Patel Milankumar) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23

College Seal

Aarbhant
Principal
Aarbhant Homoeopathic Medical College & P.H.C. Gandhinagar, Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2174001046 *

WINTER/SUMMER EXAMINATION

Name :	Raval Vipulkumar Maheshbhai				
Enrollment. :	2174001046				
Institute :	Anmc&RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011203	Organ of Medin		✓	
2.					
3.					
4.					
5.					
6.					

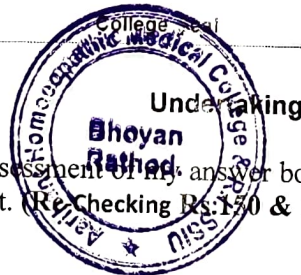
Date: 29/3/23

Vipulkumar
Signature of Student

For Office Use Only (Institute Copy)

The student (Raval Vipulkumar m.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 29/3/23



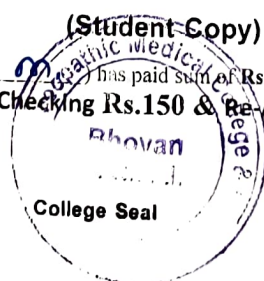
Anant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment on my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Vipulkumar
Signature of Student

(Student Copy)
The student (Raval Vipulkumar m.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Date: 29/3/23



Anant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

*2174001019

WINTER/SUMMER EXAMINATION

Name :	Goswami Sandhya Nimeshkumar				
Enrollment. :	2174001019				
Institute :	AHMC & RI				
Branch Name With Code :				SEM:	
				YEAR:	2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011203	organ of medicine		✓	
2.					
3.					
4.					
5.					
6.					

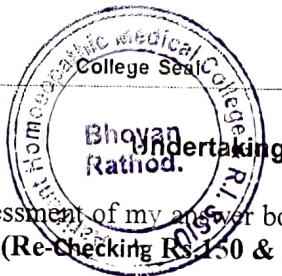
Date: 30/3/23

Sandhya
Signature of Student

For Office Use Only (Institute Copy)

The student (Goswami Sandhya N) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 30/3/23



Signature of Authorized Signatory

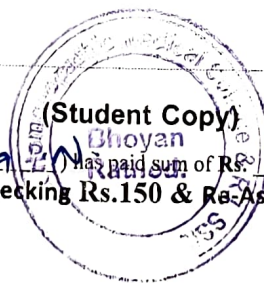
Adhant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Sandhya
Signature of Student

The student (Goswami Sandhya N) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23



College Seal

Signature of Authorized Signatory
Adhant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2174001099

WINTER/SUMMER EXAMINATION

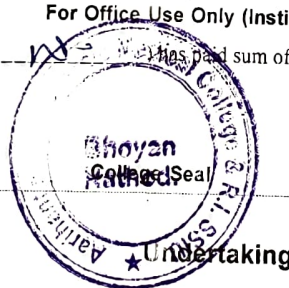
Name :	PATIL KANAN NARESHBHAI				
Enrollment. :	2174001099				
Institute :	AHMC & RJ				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011204	HOMOEOPATHIC MATERIA MEDICA		✓	
2.					
3.					
4.					
5.					
6.					

Date: 29/3/23

Signature of Student

The student Patil Kanan has paid sum of Rs. 3001/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 29/3/23



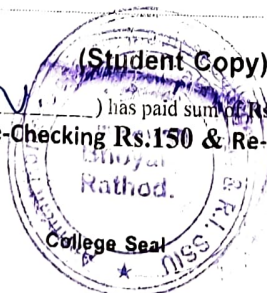
Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student Patil Kanan has paid sum of Rs. 3001/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 29/3/23



Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1743002008 *

WINTER/SUMMER EXAMINATION

Name :	PRAJAPATI JILL BIPINCHANDRA				
Enrollment. :	1743002008				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011204	HOMOEOPATHIC MATERIA MEDICA		✓	
2.					
3.					
4.					
5.					
6.					

Date: 30/3/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Prajapati Jill R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 30/3/23

College Seal

Undertaking

Principal
Aarhant Homoeopathic Medical College &
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Prajapati Jill R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23

College Seal

(Student Copy)

Principal
Aarhant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2174001072 *

WINTER/SUMMER EXAMINATION

Name :	Nagrat Sai Abreshkumar				
Enrollment. :	2174001072				
Institute :	AHMC & RI				
Branch Name With Code :				SEM:	
				YEAR:	2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 30/3/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Nagrat Sai N.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 30/3/23

College Seal

Undertaking

Authorized Signatory

Aarhant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Nagrat Sai N.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23

College Seal

Aarhant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

:: Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

* 2174001073 *

WINTER/SUMMER EXAMINATION

Name :	Sadhu Dharmikumar Lalday				
Enrollment. :	2174001073				
Institute :	AHMC + RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 29/3/23

Sadhu
Signature of Student

For Office Use Only (Institute Copy)

The student Sadhu. Dharmikumar has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.



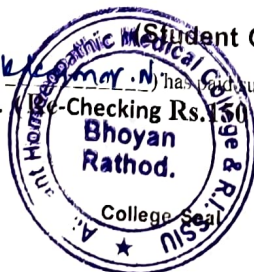
Date: 29/3/23

Aarbhav
Authorized Signatory
Aarbhav Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Sadhu
Signature of Student

The student Sadhu Dharmikumar has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)



Date: 29/3/23

Aarbhav
Authorized Signatory
Aarbhav Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam --:

Enrollment No.

*2174001074

WINTER/SUMMER EXAMINATION

Name :	RAMANI VINIT PRAKASHBHAI				
Enrollment. :	2174001074				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73016202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

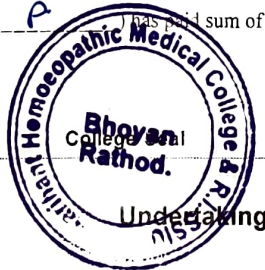
Date: 30/3/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Ramani Vinit P) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 30/3/23



Principal
Authorized Signatory

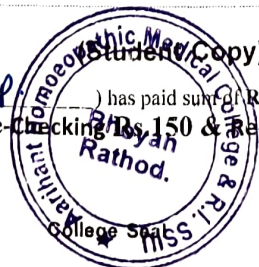
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Ramani Vinit P) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23



Principal
Authorized Signatory
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2174001082 *

WINTER/SUMMER EXAMINATION

Name :	JINJALA TUSHAR HARJIS BHAI				
Enrollment. :	2174001082				
Institute :	AHMC & R I				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

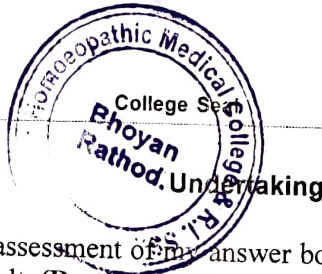
Date: 30/3/23

Tushar
Signature of Student

For Office Use Only (Institute Copy)

The student Jinjala Tushar H. has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 30/3/23



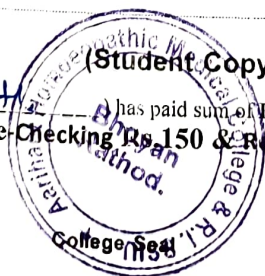
Aarohant
Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar
Authorized Signatory

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Tushar
Signature of Student

The student Jinjala Tushar H. has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 30/3/23



Aarohant
Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2174001083 *

WINTER/SUMMER EXAMINATION

Name :		Baldaniya Nikulbhai Jevambhai			
Enrollment. :		2174001083			
Institute :		AHMC & RI			
Branch Name With Code :				SEM: YEAR: 2	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

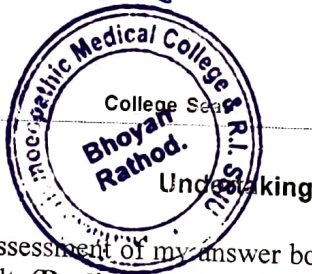
Date: 29/3/23

nul
Signature of Student

For Office Use Only (Institute Copy)

The student (Baldaniya Nikulbhai J) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 29/3/23



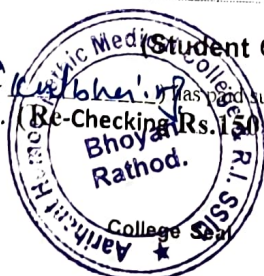
Aarohant
Principal
Aarohant Homoeopathic Medical College & R.I. SSIU, Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

nul
Signature of Student

The student (Baldaniya Nikulbhai J) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 29/3/23



Aarohant
Principal
Aarohant Homoeopathic Medical College & R.I. SSIU, Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

* 2174001084

WINTER/SUMMER EXAMINATION

Name :	DER SOHIL KHAN BHIKHANKHAN				
Enrollment. :	2174001084				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	78011202	FORENSIC MEDICINE & TOXICOLOGY		✓	
2.					
3.					
4.					
5.					
6.					

Date: 29/3/23

The student (DER SOHIL KHAN BHIKHANKHAN) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees

For Office Use Only (Institute Copy)



Signature of Student

Date: 21/3/23

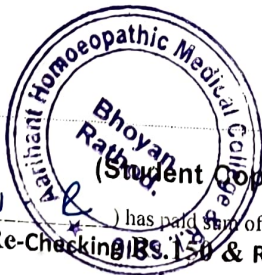
Authorized Signatory
Aarilant Homoeopathic Medical College & RI, Gandhinagar
Bhoyan Rathod, Gandhinagar

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (DER SOHIL KHAN BHIKHANKHAN) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees

SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)



Date: 29/3/23

College Seal

Authorized Signatory
Aarilant Homoeopathic Medical College & RI, Gandhinagar
Bhoyan Rathod, Gandhinagar

CERTIFICATE

This is to inform that Aarihant Homoeopathic Medical College and Research Institute Having Programme code 7 have 2 number of students for rechecking and reassessment in year 2022-23 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2022-23	2



Swarnnim Startup & Innovation University

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At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420

Aarihant Homoeopathic Medical College and Research Institute

Recheck/reassessment Academic year 2022-23

Sr No.	Enrollment No	Name	Subject Code	Subject Name	Result
1	2174001049	Vaghela Rajveersinh Ganpatsinh	73011101	Human Anatomy	Pass
2	2174001013	Patel Khushi Bhagvatkumar	73011101	Human Anatomy	Pass

SWARNNIM
STARTUP & INNOVATION
UNIVERSITY
WHERE IDEAS COME ALIVE.



Swarnnim Startup & Innovation University

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At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No. _____

*

WINTER/SUMMER EXAMINATION

Name :	Vaghela Jayveersinh Gampatsinh				
Enrollment. :	2174001049				
Institute :	AHC & RT				
Branch Name With Code :					SEM: _____ YEAR: \
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301101	Human Anatomy		✓	
2.					
3.					
4.					
5.					
6.					

Date: 14/3/23

Signature of Student

The student Vaghela Jayveersinh G has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION.



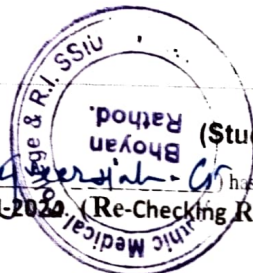
Undertaking

Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory

Date: 14/3/23

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



(Student Copy)

The student Vaghela Jayveersinh G has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2022. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 14/3/23

College Seal

Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No. _____

*

WINTER/SUMMER EXAMINATION

Name :	Patel Khushi Bhayratkumar				
Enrollment. :	2174001013				
Institute :	AHC & RI				
Branch Name With Code :					SEM: _____ YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011101	Human Anatomy		✓	
2.					
3.					
4.					
5.					
6.					

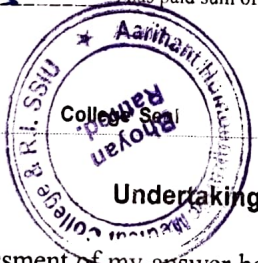
Date: 15/3/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Patel Khushi - B.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 15/3/23

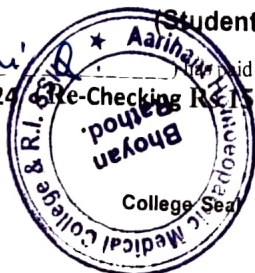


Principal
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Patel Khushi - B.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)



Principal
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Date: 15/3/23

CERTIFICATE

This is to inform that Aarihant Homoeopathic Medical College and Research Institute Having Programme code 7 have 13 number of students for rechecking and reassessment in year 2021-22 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2021-22	13



Swarnnim Startup & Innovation University

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At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420

Aarihant Homoeopathic Medical College and Research Institute

Recheck/reassessment Academic year 2021-22

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1964001009	Rajput Mihir Nandbahadur	73011204	Homoeopathic Materia Medica	No Change
2	2074001097	Hadiya Khushalbhai Himatbhai	73011102	Physiology	No Change
3	1964001010	Fafal Foram Devendrabhai	73011201	Human Pathology And Microbiology	Pass
4	1964001017	Jinjala Chirag Labhabhai	73011202	Forensic Medicine & Toxicology	Pass
5	2074001095	Zala Yashkumar Vikramsinh	73011102	Physiology	No Change
6	1964001020	Gosai Priteshgiri Natvargiri	73011204	Homoeopathic Materia Medica	No Change
7	2074001025	Rabari Bhavnaben Ratnabhai	73011102	Physiology	Pass
8	2074001026	Rathod Hani Jitendrakumar	73011102	Physiology	Pass
9	1964001029	Nisarata Rahulbhai Virsingbhai	73011202	Forensic Medicine & Toxicology	Pass
10	2074001097	Hadiya Khushalbhai Himatbhai	73011102	Physiology	No Change
11	1964001032	Patel Tirthkumar Ghanshyambhai	73011202	Forensic Medicine & Toxicology	No Change
12	2074001003	Chavda Urmiben Kailashbhai	73011102	Physiology	Pass
13	2074001007	Tarunkumar Gunvantbhai Ladumor	73011102	Physiology	Pass



Swarnnim Startup & Innovation University

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At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

-- Re-Assessment / Re-Checking for University Exam --

* 196901009

WINTER/SUMMER EXAMINATION

Name :	Rajput Mihir Navel bahadur				
Enrollment. :	196901009				
Institute :	APME & PS				
Branch Name With Code :					SEM: 2nd YEAR: 2nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7304204	1st yr - mar Med 1009,		✓	
2.					
3.					
4.					
5.					
6.					

Date: 23/1/21

Mihir
Signature of Student

For Office Use Only (Institute Copy)

The student Rajput Mihir Navel bahadur has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 28/1/21

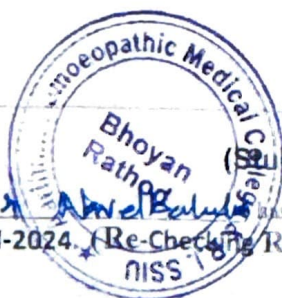


University taking

Parthiv Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Mihir
Signature of Student



(Student Copy)

The student Rajput Mihir Navel Bahadur has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21

College Seal

Parthiv Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2074001097

WINTER/SUMMER EXAMINATION

Name :	Hadiya Khushalkhau Himmatkhau					
Enrollment. :	2074001097					
Institute :	Ame & PI					
Branch Name With Code :						SEM: 7 th YEAR: 7 th
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS	
1.	78011102	Human Physiology		✓		
2.						
3.						
4.						
5.						
6.						

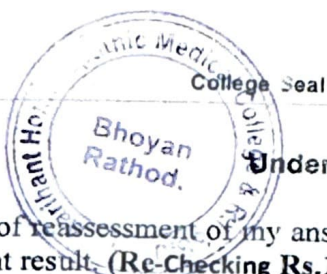
Date: 24/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student Hadiya Khushalkhau. H has paid sum of Rs. _____/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 24/1/21



Undertaking

Principal
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



(Student Copy)

The student Hadiya Khushalkhau. H has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21

College Seal

Principal
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

* 1964001010

WINTER/SUMMER EXAMINATION

Name :	Jafal Goram D.				
Enrollment. :	1964001010				
Institute :	Aarim & R.R.				
Branch Name With Code :					SEM: 2nd YEAR: 2nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	18011201	HUMAN PATHOLOGY		✓	
2.					
3.					
4.					
5.					
6.					

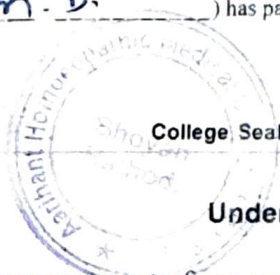
Date: 23/1/24

Jafal.
Signature of Student

For Office Use Only (Institute Copy)

The student (Jafal Goram D.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 23/1/24



College Seal

Undertaking

Aarim Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Jafal
Signature of Student

(Student Copy)

The student (Jafal Goram D.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/24

College Seal

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 1964001017 *

WINTER/SUMMER EXAMINATION

Name :	Jinjala Chirag Labhabhai				
Enrollment. :	1964001017				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: 2nd YEAR: 2nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	FORENSIC MEDICINE & TOXICOLOGY		✓	
2.					
3.					
4.					
5.					
6.					

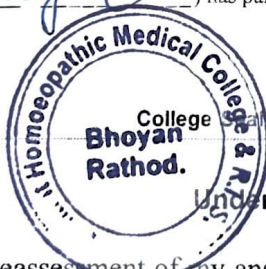
Date: 24/1/24

Signature of Student

For Office Use Only (Institute Copy)

The student (Jinjala Chirag L) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 24/1/24



Undertaking

Principal
Authorized Signatory
Aarohant Homoeopathic Medical College & Research Institute
Bhoyan Rathod, Gandhinagar.

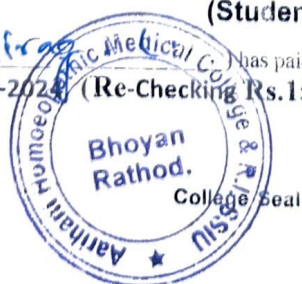
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Jinjala Chirag L) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/24



Principal
Authorized Signatory
Aarohant Homoeopathic Medical College & Research Institute
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 2074001095

WINTER/SUMMER EXAMINATION

Name :	Zala Yashkumar vijayramsinh				
Enrollment. :	2074001095				
Institute :	AMAL RPF				
Branch Name With Code :					SEM: 2nd YEAR: 2nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011002	FMT	✓	✓	
2.					
3.					
4.					
5.					
6.					

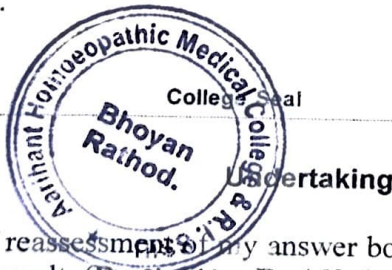
Date: 23/1/21

Zala Yashu
Signature of Student

For Office Use Only (Institute Copy)

The student (Zala Yashkumar V.) has paid sum of Rs. 150/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 22/1/21



Aufesher
Authorized Signatory

Principal
Aarohant Homoeopathic Medical College &
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Zala Yashu
Signature of Student

The student (Zala Yashkumar V.) has paid sum of Rs. 150/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21



College Seal

Aufesher
Principal
Aarohant Homoeopathic Medical College &
Bhoyan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

Re-Assessment / Re-Checking for University Exam :-

* 1964001020

WINTER/SUMMER EXAMINATION

Name :	Gosai Priteshgiri Natvargiri				
Enrollment. :	1964001020				
Institute :	Arimo & Rd				
Branch Name With Code :					SEM: 2 nd YEAR: 2 nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011204	Hom. Mat Medica		✓	
2.					
3.					
4.					
5.					
6.					

Date: 25/1/21

Pritesh:
Signature of Student

For Office Use Only (Institute Copy)

The student (Gosai Priteshgiri N.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 25/1/21



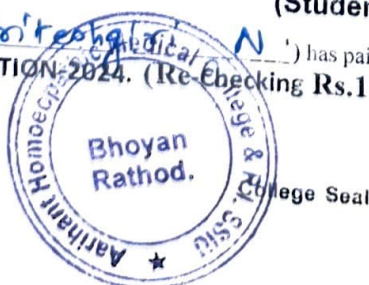
Principal
Authorized Signatory
Aarihant Homoeopathic Medical College & R.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Pritesh:
Signature of Student

The student (Gosai Priteshgiri N.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Date: 25/1/21



Principal
Authorized Signatory
Aarihant Homoeopathic Medical College
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2074001025

WINTER/SUMMER EXAMINATION

Name :	Rabari Bhavaneben Ratanbhai				
Enrollment. :	2074001025				
Institute :	AHMC&RI				
Branch Name With Code :					SEM: YEAR: 1 st
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology		✓	
2.					
3.					
4.					
5.					
6.					

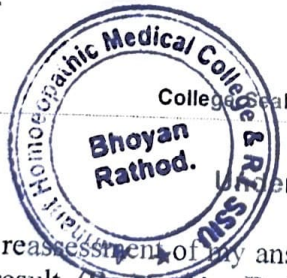
Date: 24/1/21

Bhavaneben
Signature of Student

For Office Use Only (Institute Copy)

The student (Rabari Bhavaneben R) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 24/1/21



College Seal

Bhoyan Rathod.

Authorizing

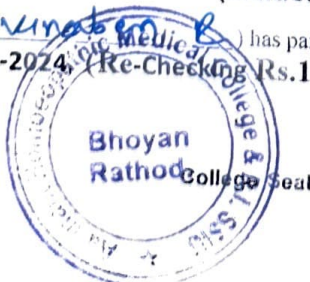
Anupama
Authorized Signatory
Aarman Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Bhavaneben
Signature of Student

(Student Copy)
The student (Rabari Bhavaneben R) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024, (Re-checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21



Bhoyan Rathod.

College Seal

Anupama
Authorized Signatory
Aarman Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam ::-

* 2074001026 *

WINTER/SUMMER EXAMINATION

Name :	Rathod Hani Jitendrakumar				
Enrollment. :	2074001026				
Institute :	Aan'hand Honscopatic Medical college & RI.				
Branch Name With Code :	Physiology & 73011102				SEM: 2 nd YEAR: 2 nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology		✓	
2.					
3.					
4.					
5.					
6.					

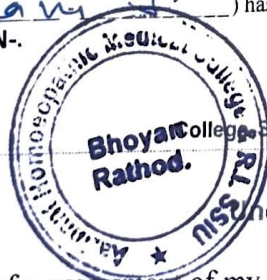
Date: 25/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Rathod Hani J.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 25/1/21



Undertaking

Authorized Signatory

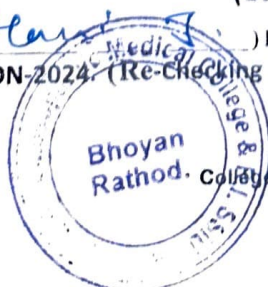
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Rathod Hani J.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 25/1/21



College Seal

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

:: Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

* 1964001029 *

WINTER/SUMMER EXAMINATION

Name :	Nisarata Rahulbhai Vrasingbhai				
Enrollment. :	1964001029				
Institute :	Aarohant Medical College & R.T.				
Branch Name With Code :	73011204	Forensic Medicine & Toxicology			SEM: 2nd YEAR: 2nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic Medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 23/1/21

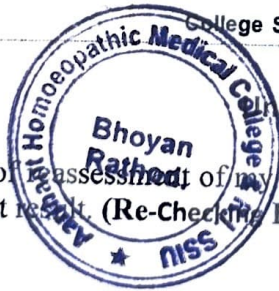
Signature of Student

For Office Use Only (Institute Copy)

The student (Nisarata Rahulbhai V) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 23/1/21

Authorized Signatory



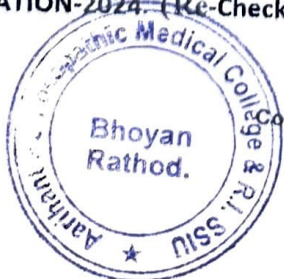
I, hereby declare that the result of re-assessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Nisarata Rahulbhai V) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21



Principal
Aarohant Homoeopathic Medical College & R.T. SSIU
Bhoyan Rathod, Gandhinagar



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

*2079001097

WINTER/SUMMER EXAMINATION

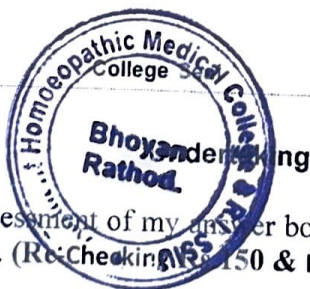
Name :	Hadiya Khushalbhai Himatbhai				
Enrollment. :	2079001097				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: 1 YEAR: 2 nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7311102	Physiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/1/21

Signature of Student

The student (Hadiya Khushalbhai) For Office Use Only (Institute Copy) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 24/1/21

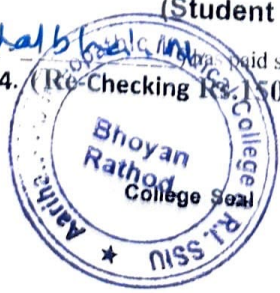


Signature of Principal
Principal
Aarohant Homoeopathic Medical College
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Hadiya Khushalbhai) (Student Copy) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees,
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)



Signature of Principal
Principal
Aarohant Homoeopathic Medical College & Research Institute
Bhoyan Rathod, Gandhinagar.

Date: 24/1/21



SWARNIM STARTUP & INNOVATION UNIVERSITY

:: Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

* 1964001032

WINTER/SUMMER EXAMINATION

Name :	Patel Tirthkumar Ghanshyam Bhari				
Enrollment. :	1964001032				
Institute :	Aarhant Homoeopathic Medical College & R.C.				
Branch Name With Code :	73011202 of RMT				
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic Science & Medical Botany	✓		
2.					
3.					
4.					
5.					
6.					

SEM: 2021-22
YEAR: 2021-22

Date: 23/1/21

Signature of Student

The student (Patel Tirthkumar Cr-) has paid sum of Rs. 150/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 23/1/21



Authorized Signatory
Principal
Aarhant Homoeopathic Medical College & R.C.
Bhoyan Rathod, Gandhinagar

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



The student () has paid sum of Rs. 150/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21

Principal
Aarhant Homoeopathic Medical College & R.C.
Bhoyan Rathod, Gandhinagar

College Seal



SWARNIM STARTUP & INNOVATION UNIVERSITY
-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 2074001003 *

WINTER/SUMMER EXAMINATION

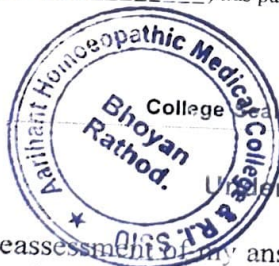
Name :	Charda Urmiben Kailashbhai				
Enrollment. :	2074001003				
Institute :	AHMC & RI				
Branch Name With Code :					
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	SEM: YEAR: 202
1.	73011102	Physiology		✓	REMARKS
2.					
3.					
4.					
5.					
6.					

Date: 24/1/21

Signature of Student

The student (Charda Urmiben K.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 24/1/21



Under taking

Principal
Aarihant Homoeopathic Medical College & R.
Bhoyan Rathod, Gandhinagar.

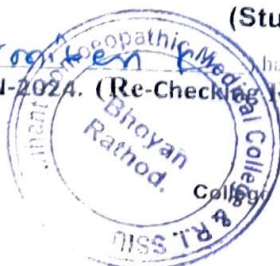
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Charda Urmiben K.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21



College Seal

Principal
Aarihant Homoeopathic Medical College & R.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

Re-Assessment / Re-Checking for University Exam

* 2074001007 *

WINTER/SUMMER EXAMINATION

Name :	Tarunkumar Arnavantbhai Ladumai				
Enrollment. :	2074001007				
Institute :	AKMCS&RI				
Branch Name With Code :					SEM: YEAR: 1st
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/1/21

Tadema
Signature of Student

For Office Use Only (Institute Copy)

The student (Tarunkumar Ar. Ladumai) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 24/1/21



Authorized Signatory
Principal

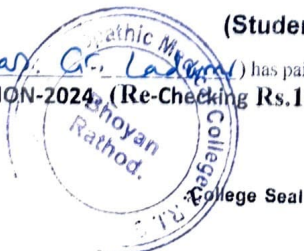
Aarihant Homoeopathic Medical College & Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of the answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Tadema
Signature of Student

(Student Copy)

The student (Tarunkumar Ar. Ladumai) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)



Principal

Aarihant Homoeopathic Medical College & Bhoyan Rathod, Gandhinagar.

Date: 24/1/21

CERTIFICATE

This is to inform that Aarihant Homoeopathic Medical College and Research Institute Having Programme code 7 have 13 number of students for rechecking and reassessment in year 2020-21 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2020-21	13



Aarihant Homoeopathic Medical College and Research Institute

Recheck/reassessment Academic year 2020-21

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1964001082	Parmar Kaushal Yashvantkumar	73011101	Human Anatomy	No Change
2	1964001013	Shah Deep Jayesh	73011102	Physiology Incl. Biochemistry	Pass
3	1964001046	Ghanchi Konaintanya Mohsinbhai	73011102	Physiology Incl. Biochemistry	No Change
4	1964001016	Rathod Vishwa Jayeshbhai	73011102	Physiology Incl. Biochemistry	No Change
5	1964001038	Soni Devanshi Rajeshkumar	73011102	Physiology Incl. Biochemistry	No Change
6	1964001046	Piprani Abdul Aziz Mohmed Faruk	73011102	Physiology Incl. Biochemistry	No Change
7	1874001069	Rathod Vishwa Jayeshbhai	73011103	Homoeopathic Pharmacy	No Change
8	1874001063	Saiyed Mobasara Razaali	73011202	Forensic Medicine & Toxicology	Pass
9	1874001002	Prajapati Sagar Rajubhai	73011202	Forensic Medicine & Toxicology	No Change
10	1874001089	Ansari Saminkausar Irfan Ahmed	73011202	Forensic Medicine & Toxicology	Pass
11	1874001044	Shaikh Hasnen Irfnbhai	73011202	Forensic Medicine & Toxicology	No Change
12	1874001027	Panchal Shreya Kamleshbhai	73011202	Forensic Medicine & Toxicology	Pass
13	1874001028	Labana Bhumika Vinodbhai	73011202	Forensic Medicine & Toxicology	Pass



Swarnnim Startup & Innovation University

+91 - 95123 43333 | info@swarnnim.edu.in | www.swarnnim.edu.in

At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 1964001082

WINTER/SUMMER EXAMINATION

Name :	Parmar Kaushal Yashvantkumar				
Enrollment. :	1964001082				
Institute :	AHMC & RI				
Branch Name With Code :				SEM:	
				YEAR:	1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301101	Human anatomy		✓	
2.					
3.					
4.					
5.					
6.					

Date: 23/1/21

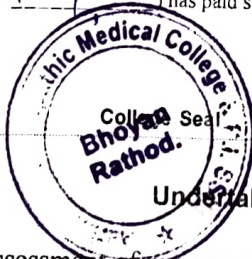
The student (Parmar Kaushal Yashvantkumar) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees.

For Office Use Only (Institute Copy)

Signature of Student

SUMMER/WINTER EXAMINATION-

Date: 23/1/21



Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Authorized Signatory

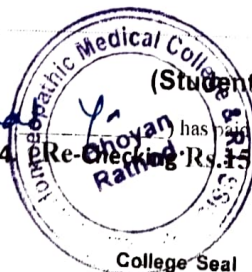
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Parmar Kaushal Yashvantkumar) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees.

SUMMER/WINTER EXAMINATION-2024

Date: 23/1/21



(Student Copy)

Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam --:

* 1964001013

WINTER/SUMMER EXAMINATION

Name :	Shah Deep Jayesh				
Enrollment. :	1964001013				
Institute :	AHMC & RI				
Branch Name With Code :				SEM:	
				YEAR:	1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology incl. Biochemistry		✓	
2.					
3.					
4.					
5.					
6.					

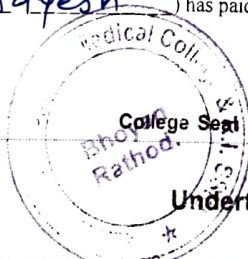
Date: 24/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Shah Deep Jayesh) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 24/1/21



Undertaking

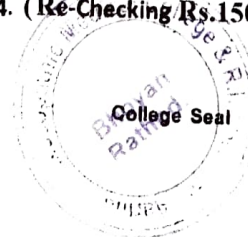
Authorized Signatory
Principal
Aarihant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Shah Deep Jayesh) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees .
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21



Authorized Signatory
Principal
Aarihant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam

Enrollment No.

* 1964001016

WINTER/SUMMER EXAMINATION

Name :	Ganchi Konaintanya Mohsinbhai				
Enrollment. :	1964001046				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology incl. Biochemistry		✓	
2.					
3.					
4.					
5.					
6.					

Date: 23/1/21

Signature of Student

The student Ganchi Konaintanya M. has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 23/1/21

College Seal

Undertaking

Principal
Aarham Homoeopathic Medical College
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student Ganchi Konaintanya M. has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21

College Seal

Authorized Signatory

Principal
Aarham Homoeopathic Medical College & R
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

* 1964001016

WINTER/SUMMER EXAMINATION

Name :	Rathod Vishwa Jayeshbhai				
Enrollment. :	1964001016				
Institute :	AHMC & RI				
Branch Name With Code :					
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology incl. Biochemistry		✓	
2.					
3.					
4.					
5.					
6.					

Date: 25/1/21

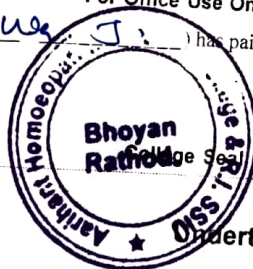
Signature of Student

The student Rathod Vishwa
SUMMER/WINTER EXAMINATION-

For Office Use Only (Institute Copy)

has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees

Date: 25/1/21



Undertaking

Signature of Vishwa
Authorized Signatory

Principal
Ardhant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

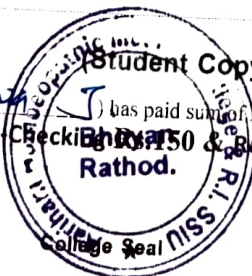
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student: Vishwa

The student Rathod Vishwa (Student Copy)

SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 25/1/21



Undertaking

Signature of Vishwa
Authorized Signatory
Principal
Ardhant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1964001038

WINTER/SUMMER EXAMINATION

Name :	Soni Devanshi Rakeshkumar				
Enrollment. :	1964001038				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 1

SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011102	Physiology incl. Biochemistry		✓	
2.					
3.					
4.					
5.					
6.					

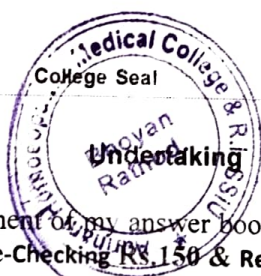
Date: 23/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Soni Devanshi R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 23/1/21

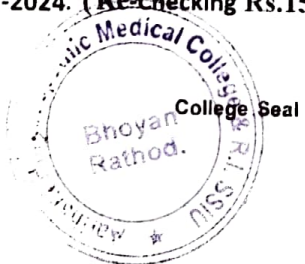


Authorized Signatory
Principal
Aarihant Homoeopathic Medical College & Research Institute, Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Soni Devanshi R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)



Authorized Signatory
Principal
Aarihant Homoeopathic Medical College & Research Institute, Bhoyan Rathod, Gandhinagar.

Date: 23/1/21



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

Re-Assessment / Re-Checking for University Exam :-

* 1964001046

WINTER/SUMMER EXAMINATION

Name :	Piprani Abdul Aziz mohmed Faruk				
Enrollment :	1964001046				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 1

SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301102	Physiology incl Biochemistry		✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Piprani Abdul Aziz) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 24/1/21

College Seal

Undertaking

Authorized Signatory

Principal

Aarohant Homoeopathic Medical College & Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Piprani Abdul Aziz) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21

College Seal

Authorized Signatory

Aarohant Homoeopathic Medical College & Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 1874001069

WINTER/SUMMER EXAMINATION

Name :	Rathod Vishwa Jayeshbhai				
Enrollment. :	1874001069				
Institute :	AHMC + RI				
Branch Name With Code :					SEM: YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301103	Homoeopathic pharmacy		✓	
2.					
3.					
4.					
5.					
6.					

Date: 23/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Rathod Vishwa J.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 23/1/21

College Seal

Undertaking

Principal Authorized Signatory

Aarhant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Rathod Vishwa J.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21

College Seal

Principal
Aarhant Homoeopathic Medical College & R.I.
Bhojan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

:: Re-Assessment / Re-Checking for University Exam ::

* 1874001063

WINTER/SUMMER EXAMINATION

Name :	Saied mobasara Razaali				
Enrollment. :	1874001063				
Institute :	AHMC + RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7311202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Saied mobasara R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 24/1/21

College Seal

Principal
Aarohant Homoeopathic Medical College &
Bhoyan Rathod, Gandhinagar.

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Saied mobasara R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21

College Seal

Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

* 1874001002 *

WINTER/SUMMER EXAMINATION

Name :	Pratapati Sagar Ratubhai				
Enrollment. :	1874001002				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

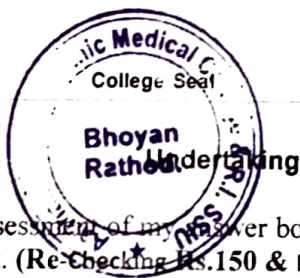
Date: 23/1/21

P.S.P.
Signature of Student

For Office Use Only (Institute Copy)

The student (Pratapati Sagar R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 23/1/21



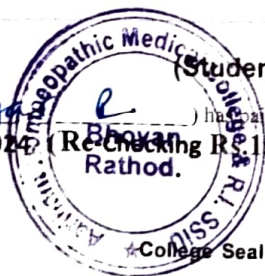
Principal Authorized Signatory
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

P.S.P.
Signature of Student

The student (Pratapati Sagar R.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21



Principal Authorized Signatory
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--- Re-Assessment / Re-Checking for University Exam ---

Enrollment No.

* 1874001089 *

WINTER/SUMMER EXAMINATION

Name :	Ansari Saminkausar Irfan Ahmed				
Enrollment. :	1874001089				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/1/24

Signature of Student

The student (Ansari Saminkausar Irfan Ahmed) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

For Office Use Only (Institute Copy)



Date: 24/1/24

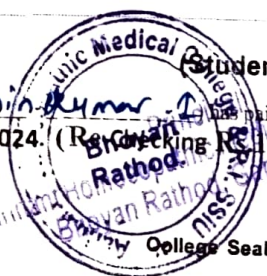
Signature of Student

Authorized Signatory

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Ansari Saminkausar Irfan Ahmed) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs. 150 & Re-Assessment Rs. 300 Per Subject)



Date: 24/1/24

Signature of Student

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 1874001044 *

WINTER/SUMMER EXAMINATION

Name :	Shaikh Hasnen Irdbnbhai				
Enrollment. :	1874001044				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

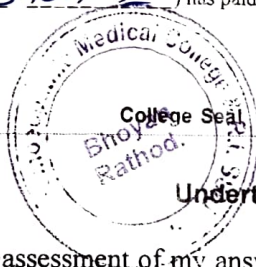
Date: 23/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Shaikh Hasnen I) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 23/1/21



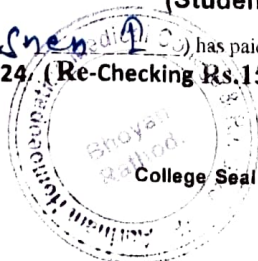
Undertaking

Principal
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Shaikh Hasnen I) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024 (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)



(Student Copy)

Principal
Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Date: 23/1/21

Authorized Signatory

**SWARNIM STARTUP & INNOVATION UNIVERSITY**

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1874001027 *

WINTER/SUMMER EXAMINATION

Name :	Panchal Shreya Kamleshbhai				
Enrollment. :	1874001027				
Institute :	AHMC + RI				
Branch Name With Code :					SEM: YEAR: 2

SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 23/1/21

Signature of Student

The student (Panchal Shreya K.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 23/1/21

College Seal

Undertaking

Principal
Aarihant Homoeopathic Medical College & R.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Panchal Shreya K.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 23/1/21

College Seal

Principal
Aarihant Homoeopathic Medical College & R.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

* 1874001028

WINTER/SUMMER EXAMINATION

Name :	Labana Bhumika Vinodbhai				
Enrollment. :	1874001028				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 2
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011202	Forensic medicine & Toxicology		✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/1/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Labana Bhumika V.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 24/1/21

College Seal

Undertaking

Principal
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Labana Bhumika V.) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 24/1/21

College Seal

Principal
Bhoyan Rathod, Gandhinagar.
Authorized Signatory

CERTIFICATE

This is to inform that Aarihant Homoeopathic Medical College and Research Institute Having Programme code 7 have 4 number of students for rechecking and reassessment in year 2019-20 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2019-20	4



Aarihant Homoeopathic Medical College and Research Institute

Recheck/reassessment Academic year 2019-20

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1874001041	Oza Deep Kishorbhai	73011101	Human Anatomy	Pass
2	1874001057	Patel Vaibhav Rameshbhai	73011101	Human Anatomy	Pass
3	1874001048	Parmar Sameep Narottambhai	73011101	Human Anatomy	Pass
4	1874001090	Sachi Dipakkumar Patel	73011101	Human Anatomy	Pass

SWARNNIM
STARTUP & INNOVATION
UNIVERSITY
WHERE IDEAS COME ALIVE.



Swarnnim Startup & Innovation University

+91 - 95123 43333 | info@swarnnim.edu.in | www.swarnnim.edu.in

At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 1874001041 *

WINTER/SUMMER EXAMINATION

Name :	Oza Deep Kishorbhai				
Enrollment. :	1874001041				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	7301101	Human Anatomy		✓	
2.					
3.					
4.					
5.					
6.					

Date: 6/12/2019

Signature of Student

For Office Use Only (Institute Copy)

The student (Oza Deep Kishorbhai) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 6/12/2019

College Seal

Undertaking

Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)
The student (Oza Deep Kishorbhai) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 6/12/2019

College Seal

Authorized Signatory

Principal
Aarohant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1874001057

WINTER/SUMMER EXAMINATION

Name :	Patel Vaibhav Ramesh bhai				
Enrollment. :	1874001057				
Institute :	AHMC & RI				
Branch Name With Code :					SEM: YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011101	Human anatomy		✓	
2.					
3.					
4.					
5.					
6.					

Date: 6/12/19

Signature of Student

The student Patel Vaibhav. R.
SUMMER/WINTER EXAMINATION-

For Office Use Only (Institute Copy)

has paid sum of Rs. 3005/- as University Re-assessment / Re-Checking fees

Date: 6/12/19



undertaking

Authorized Signatory

Signature of Principal

Principal

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

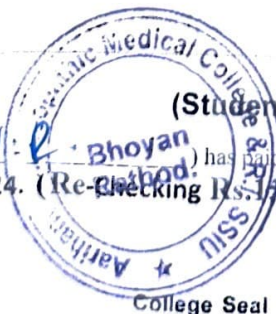
Signature of Student

The student Patel Vaibhav. R.
SUMMER/WINTER EXAMINATION-2024.

(Student Copy)

has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
(Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 6/12/19



College Seal

Aarihant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1874001048 *

WINTER/SUMMER EXAMINATION

Name :	Parmar Sameep Navottambhai				
Enrollment. :	1874001048				
Institute :	AHMC + RI				
Branch Name With Code :					SEM: YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011101	Human anatomy		✓	
2.					
3.					
4.					
5.					
6.					

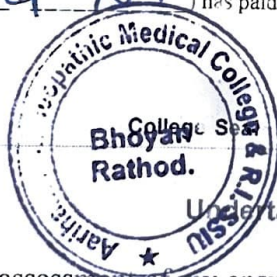
Date: 6/12/19

Signature of Student

For Office Use Only (Institute Copy)

The student (Parmar Sameep Navottambhai) has paid sum of Rs. 200/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 6/12/19



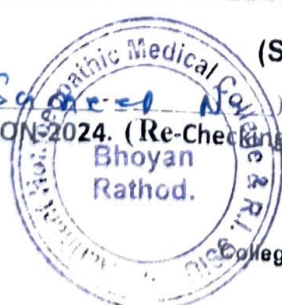
Principal.
Aarohit Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be final and binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

The student (Parmar Sameep Navottambhai) has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 6/12/19



Principal.
Aarohit Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1874001090

WINTER/SUMMER EXAMINATION

Name :	Sachi Dipakkumar Patel				
Enrollment. :	1874001090				
Institute :	AHMC & RJ				
Branch Name With Code :					SEM: YEAR: 1
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	73011101	Human anatomy		✓	
2.					
3.					
4.					
5.					
6.					

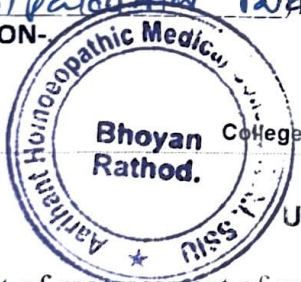
Date: 7/12/19

Signature of Student

For Office Use Only (Institute Copy)

The student Sachi Dipakkumar Patel has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 7/12/19



College Seal

Undertaking

Signature of Authorized Signatory
Bhoyan Rathod, Gandhinagar.

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student Sachi Dipakkumar Patel has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 7/12/19



College Seal

Principal
Aarilant Homoeopathic Medical College & R.I.
Bhoyan Rathod, Gandhinagar.
Authorized Signatory

CERTIFICATE

This is to inform that Aarihant Ayurvedic Medical College and Research Institute Having Programme code 10 have 8 number of students for rechecking and reassessment in year 2022-23 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment summary

Sr no	Year	No of recheck
1	2022-23	8



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Aarihant Ayurvedic Medical College and Research Institute

Recheck/reassessment Academic year 2022-23

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1910400108	Patel Dhruvil Jagdishbhai	43061304	Agadtantra	Pass
2	1910400108	Makwana Poojaben Mohanbhai	43061301	Swasthvritta	Pass
3	1910400111	Parmar Maulik Kumar Rameshchandra	43061304	Agadtantra	No Change
4	1910400112	Dave Janhvi Rajeshkumar	43061304	Agadtantra	Pass
5	1910400112	Sagar Khilvatben Prakashbhai	43061301	Swasthvritta	Pass
6	1910400116	Thakor Pradip Bachubhai	43061304	Agadtantra	Pass
7	1910400117	Thakkar Parth Kamleshkumar	43061304	Agadtantra	Pass
8	1910400117	Thakkar Jay Vinodchandra	43061304	Agadtantra	No Change



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SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam :-

Enrollment No.

* 1910400108 *

WINTER/SUMMER EXAMINATION

Name :	Patel Dhruv. Jaydrshbhai				
Enrollment. :	1910400108				
Institute :	Aarihant Ayurvedic medical college				
Branch Name With Code :	B.A.M.S Ayurvedy				SEM: 3rd yr B.A.
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	4306304	AgadTurtm		✓	
2.					
3.					
4.					
5.					
6.					

Date: 27/01/27

Signature of Student

The student (Patel Dhruv. Jaydrshbhai) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 27/01/27

College Seal

Authorized Signatory

Undertaking

Principal

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400108 *

WINTER/SUMMER EXAMINATION

Name :	Makvare Pooja Mohanbhai				
Enrollment. :	1910400108				
Institute :	Aarihant Ayurvedic Medical College				
Branch Name With Code :	B.A.M.S				SEM: / YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	1910400108	Swastharniti	.	✓	
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

For Office Use Only (Institute Copy)

The student (Pooja Makvare) has paid sum of Rs. 000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 27/9/23

College Seal

Undertaking

Authorized Signatory
Principal

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

191040011

WINTER/SUMMER EXAMINATION

Name :	Parman Muelik Kumar Rameshchary				
Enrollment. :	191040011				
Institute :	Aarihant Ayurved medical college				
Branch Name With Code :	B.A.M.S Ayurved				SEM: YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	93061304	Agad Tantra		✓	
2.					
3.					
4.					
5.					
6.					

Date: 27/9/23

Signature of Student

For Office Use Only (Institute Copy)

The student Parman Muelik Kumar Rameshchary has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 27/9/23

College Seal

Undertaking

Authorized Signatory

Principal

Aarihant Ayurvedic Medical
College and Research Institute

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Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 1910400116 *

WINTER/SUMMER EXAMINATION

Name :		Thakur Pradip Bachubhai			
Enrollment. :		1910400116			
Institute :		Aarohant Ayurved. Medical College			
Branch Name With Code :		B.A.M.S		SEM: Agad Tenth YEAR: Agad Tenth	

SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43661309	Agad Tenth		✓	
2.					
3.					
4.					
5.					
6.					

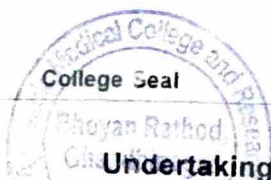
Date: 27/9/23

Signature of Student

The student Thakur Pradip B. has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees

SUMMER/WINTER EXAMINATION-

Date: 27/9/27



Authorized Signatory

Principal
Aarohant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400116 *

WINTER/SUMMER EXAMINATION

Name :	Thakker Pirth Ramlesh Kumar				
Enrollment. :	1910400116				
Institute :	Aarihant Ayurvedic Medical College				
Branch Name With Code :	B.A.M.S				SEM: 3rd year YEAR: 3rd year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061304	Thakker Pirth Ram		✓	
2.		Ramlesh Kumar			
3.					
4.					
5.					
6.					

Date: 26/9/23

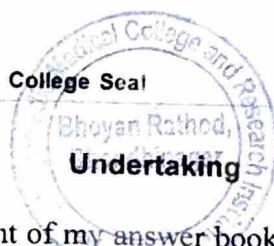
Signature of Student

For Office Use Only (Institute Copy)

The student Pirth Thakker Ramlesh Kumar has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION.

Date: 26/9/23

College Seal



Signature of Principal

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-- Re-Assessment / Re-Checking for University Exam --

Enrollment No.

* 1910400117 *

WINTER/SUMMER EXAMINATION

Name :		Thakker Jay Vinodchandra			
Enrollment. :		1910400117			
Institute :		AAMCER			
Branch Name With Code :		BAMS		SEM:	3 rd year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061304	Agad. tantra	-	✓	
2.					
3.					
4.					
5.					
6.					

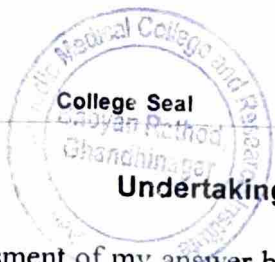
Date: 22/9/22

Signature of Student

For Office Use Only (Institute Copy)

The student (Thakker Jay. V.) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date: 22/9/23



Undertaking

Principal
Authorized Signatory
Aarihant Ayurvedic Medical
College and Research Institute

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Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400112 *

WINTER/SUMMER EXAMINATION

Name :	Sagar Khilvathem Bhaikarbhui				
Enrollment. :	1910400112				
Institute :	Aarihan Ayurvedic medical College & Research Institute				
Branch Name With Code :	BAMS				SEM: 3rd year YEAR: 3rd year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061304	Swasthvrina	-	✓	
2.					
3.					
4.					
5.					
6.					

Date: 25/9/23

Signature of Student

For Office Use Only (Institute Copy)

The student (Sagar Khilvathem P) has paid sum of Rs 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 25/9/23



Signature of Principal

Principal Signatory
Aarihan Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400119 *

WINTER/SUMMER EXAMINATION

Name :	Dare Tembri Rajeshkumar				
Enrollment. :	1910400119				
Institute :	AAMC & RI				
Branch Name With Code :	B Ams				SEM: 3 rd year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061304	Agadtemora	-	✓	
2.					
3.					
4.					
5.					
6.					

Date: 28/9/23

For Office Use Only (Institute Copy)

Signature of Student

The student Dare Tembri R. has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees

SUMMER/WINTER EXAMINATION-

Date: 28/9/23

College Seal
Bhojan Rathod
Ghandhinagar
Undertaking

Authorized Signatory

Principal

Aarihant Ayurvedic Medical

College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

CERTIFICATE

This is to inform that Aarihant Ayurvedic Medical College and Research Institute Having Programme code 10 have 6 number of students for rechecking and reassessment in year 2021-22 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2021-22	6

SWARNNIM
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Aarihant Ayurvedic Medical College and Research Institute

Recheck/reassessment Academic year 2021-22

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	2010401020	Gamit Archana Chemabhai	43061105	Rachana Sharir	Pass
2	1910400110	Parmar Maulik Kumar Rameshchandra	43061201	Dravya Guna	No Change
3	1910400149	Damor Ketankumar Kantibhai	43061201	Dravya Guna	No Change
4	1910400155	Chaudhary Srushti Rameshbhai	43061102	Sanskrit	No Change
5	2010401081	Patel Dhruv Manishkumar	43061101	Padarth Vigyan Evum Ayurveda Itihas	No Change
6	1910400117	Thakkar Jay Vinodchandra	43061201	Dravya Guna	No Change



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SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2010401020 *

WINTER/SUMMER EXAMINATION

Name :		<u>Gemist Archer. Chennabhy</u>			
Enrollment. :		<u>2010401020</u>			
Institute :		<u>Aarohit Ayurved. Medical College</u>			
Branch Name With Code :		<u>Ayurved</u>		SEM: YEAR:	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	<u>43061105</u>	<u>Dechan Sher-</u>	.	<u>—</u>	
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

For Office Use Only (Institute Copy)

The student Gemist Archer. Chennabhy has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date:

College Seal

Undertaking

Authorized Signatory
Principal

Aarohit Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

Re-Assessment / Re-Checking for University Exam

Enrollment No.

* 1910400110 *

WINTER/SUMMER EXAMINATION

Name :	Parmanu Manlik Kumar Kameshwar				
Enrollment :	1910400110				
Institute :	Aarim 2				
Branch Name With Code :	BAMS				SEM: 2nd year YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061201	Darjygm	-	✓	
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

For Office Use Only (Institute Copy)

The student (Parmanu Manlik Kumar K) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date:

College Seat
Undertaking

Authorized Signatory

Principal
Aarim Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

:: Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

1910400149

WINTER/SUMMER EXAMINATION

Name :	Daman Ketan Kumar Ranb'hari				
Enrollment. :	1910400149				
Institute :	Aarihant Ayurvedic Medical College				
Branch Name With Code :	B.A.M.S				SEM: 2 nd YEAR: 2 nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061201	Dravya Gun		✓	
2.					
3.					
4.					
5.					
6.					

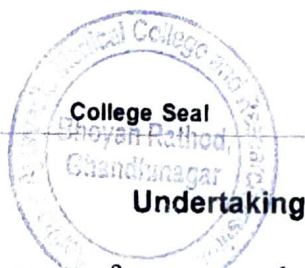
Date:

Signature of Student

For Office Use Only (Institute Copy)

The student Daman Ketan Kumar has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION.

Date:



Undertaking

Principal
Aarihant Ayurvedic Medical
College and Research Institute

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Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400151 *

WINTER/SUMMER EXAMINATION

Name :		Chaudhary Srushti Parmeshbhai			
Enrollment. :		1910400151			
Institute :		Aarohant Ayurved. Medical College			
Branch Name With Code :		B.A.M.S			SEM:
					YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43081102	Sanskrit		✓	
2.					
3.					
4.					
5.					
6.					

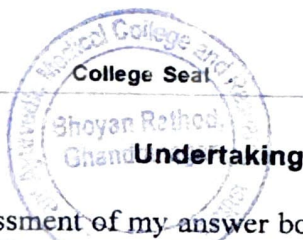
Date:

Signature of Student

For Office Use Only (Institute Copy)

The student Chudhary Srushti Parmeshbhai has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date:



Authorized Signatory
Principal

Aarohant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 2010401081 *

WINTER/SUMMER EXAMINATION

Name :	Patal Dhruv Manish Kumar				
Enrollment. :	2010401081				
Institute :	AARIHANT				
Branch Name With Code :	BAMS				SEM: 1 st yr YEAR: 1 st yr
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	9300110	Perduron Vignam & rgumelith		✓	
2.					
3.					
4.					
5.					
6.					

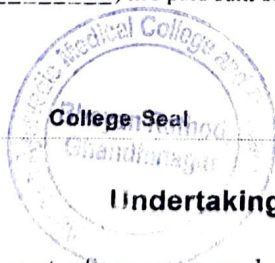
Date:

Signature of Student

For Office Use Only (Institute Copy)

The student (Patal Dhruv M) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-

Date:



College Seal

Undertaking

Authorized Signatory
Principal

Aarihant Ayurvedic Medical
College and Research Institute

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Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400113 *

WINTER/SUMMER EXAMINATION

Name :	Thakkar Jay Vinodchandra				
Enrollment. :	1910400113				
Institute :	AAMCER				
Branch Name With Code :	BAMS				SEM: 2 nd YEAR: 2 nd
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	19104001	Pranayama	-	✓	
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

For Office Use Only (Institute Copy)

The student Thakkar Jay ✓) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION.

Date:

College Seal

Authorized Signatory

Undertaking

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

CERTIFICATE

This is to inform that Aarihant Ayurvedic Medical College and Research Institute Having Programme code 10 have 6 number of students for rechecking and reassessment in year 2020-21 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/reassessment summary

Sr no	Year	No of recheck
1	2020-21	6



Aarihant Ayurvedic Medical College and Research Institute

Swarnnim Startup & Innovation University

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Recheck/reassessment Academic year 2020-21

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1910400155	Chaudhary Srushti Rameshbhai	43061101	Padarth Vigyan Evum Ayurveda Itihas	Pass
2	1910400110	Parmar Maulik Kumar Rameshchandra	43061102	Sanskrit	No Change
3	1910400104	Patel Dhruvil Jagdishbhai	43061103	Maulik Siddhant Evum Ashtang Hridaya	Pass
4	1910400151	Pandya Vama Jigneshkumar	43061104	Kriya Sharir	No Change
5	1910400126	Patel Chintan Kireetbhai	43061105	Rachana Sharir	Pass
6	1910400102	Patel Krupaliben Rameshbhai	43061103	Maulik Siddhant Evum Ashtang Hridaya	No Change





SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400155 *

WINTER/SUMMER EXAMINATION

Name :	Chandhary Suresh Ramesh Chai				
Enrollment. :	1910400155				
Institute :	AAMC ERJ				
Branch Name With Code :	B.A.M.S				SEM: 1 st year YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061101	Padarth Vigyan Evam Agard itihaz		✓	
2.					
3.					
4.					
5.					
6.					

Date: 22/3/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Chandhary Suresh Ramesh Chai) has paid sum of Rs. 1000 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 22/3/21

College Seal

Authorized Signatory

Undertaking

Principal

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400110 *

WINTER/SUMMER EXAMINATION

Name :	Palmer manlik Kumar Remesh Chandra				
Enrollment. :	1910400110				
Institute :	AAMC ERJ				
Branch Name With Code :	B.A.M.S				SEM: 1st year YEAR: 1st year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061102	Sanskrit	-	✓	
2.					
3.					
4.					
5.					
6.					

Date: 22/3/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Palmer manlik Kumar B.) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees SUMMER/WINTER EXAMINATION-.

Date: 22/3/21



College Seal
Undertaking

Principal
Authorized Signatory
Aarohant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

:: Re-Assessment / Re-Checking for University Exam ::

Enrollment No.

* 1910400104 *

WINTER/SUMMER EXAMINATION

Name :	Patel Dhruvil Jagdishbhai				
Enrollment. :	1910400104				
Institute :	Aarohant Ayurvedic Medical College & Research Institute				
Branch Name With Code :	Ayurveda				SEM: 1 st year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061103	manlik siddhant Evum Astheny Hridaya		✓	
2.					
3.					
4.					
5.					
6.					

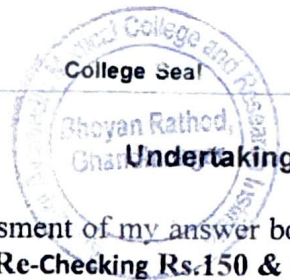
Date: 23/3/21

Signature of Student
Dhruvil

For Office Use Only (Institute Copy)

The student Patel Dhruvil Jagdishbhai has paid sum of Rs. 1000 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 23/3/21



Undertaking

Principal Signatory
Aarohant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student
Dhruvil



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400151 *

WINTER/SUMMER EXAMINATION

Name :	Pamdyer Varna Jyeshth Kumar				
Enrollment. :	1910400151				
Institute :	AAMC & AI				
Branch Name With Code :	BAMS				SEM: 1st Year
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061104	Krishnakumar	-	✓	
2.					
3.					
4.					
5.					
6.					

Date: 24/3/21

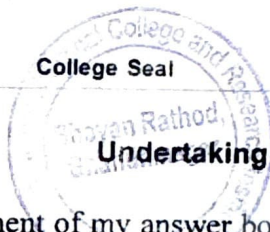
Signature of Student

For Office Use Only (Institute Copy)

The student (Pamdyer Varna Jyeshth Kumar) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 24/3/21

College Seal



Undertaking

Principal Signatory

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

-:: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400126 *

WINTER/SUMMER EXAMINATION

Name :		Patel Chintan Kireetbhai			
Enrollment :		1910400126			
Institute :		AAMC LRI			
Branch Name With Code :		Ayurveda			SEM: 1 st year YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061105	Rachana Shrivastava		✓	
2.					
3.					
4.					
5.					
6.					

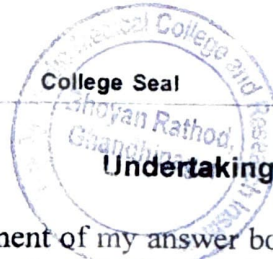
Date: 26/3/21

Signature of Student

For Office Use Only (Institute Copy)

The student Patel Chintan Kireetbhai has paid sum of Rs. 1000 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 26/3/21



Signature of Principal

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1910400102 *

WINTER/SUMMER EXAMINATION

Name :		Patel Komaliben Rameshbhai			
Enrollment. :		1910400102			
Institute :		Aarihant Ayurvedic Medical College & Research Institute			
Branch Name With Code :		Ayurveda		SEM: 1 st year YEAR: 1 st year	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	43061103	Manik Sindhani Avum Arjun Hardaga	-	✓	
2.					
3.					
4.					
5.					
6.					

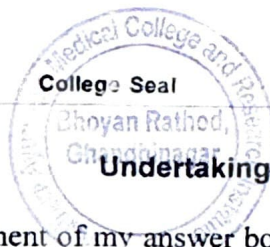
Date: 26/3/21

Signature of Student

For Office Use Only (Institute Copy)

The student (Patel Komaliben R) has paid sum of Rs. 1000/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 26/3/21



Authorized Signatory
Principal

Aarihant Ayurvedic Medical
College and Research Institute

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

CERTIFICATE

This is to inform that Venus Institute of Physiotherapy (BPT) having Programme code -1 have 3 number of students for rechecking and reassessment in year 2019-20 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2019-20	3



Venus Institute of Physiotherapy

Result/Reassessment 2019-20

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1844001009	Shah Urvashi B.	63011206	Electrotherapy	No Change
2	17430010108	Patel Devansh H.	63011305	Physical & Functional Diagnosis	No Change
3	1743001023	Patel Jeet A.	63011305	Physical & Functional Diagnosis	No Change

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SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam --:

* 1844001009 *

WINTER/SUMMER EXAMINATION

Name :	Shah Urvasi B				
Enrollment. :	1844001009				
Institute :	Venus Institute of Physiotherapy				
Branch Name With Code :	BPT 63011206				SEM: 2nd Yr YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	63011206	Electrotherapy		✓	NO change
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

The student (Shah Urvasi) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

For Office Use Only (Institute Copy)

Bhoyan Rathod
Dist-Gandhinagar

Date:

College Seal

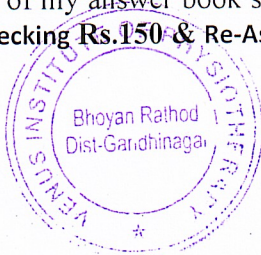
VENUS INSTITUTE OF
PHYSIOTHERAPY

Authorized Signatory

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student



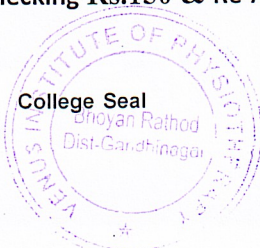
PRINCIPAL
VENUS INSTITUTE OF
PHYSIOTHERAPY

(Student Copy)

The student (Shah Urvasi) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date:

College Seal



PRINCIPAL
VENUS INSTITUTE OF
PHYSIOTHERAPY

Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam --:

* 1743 00 10 108 *

WINTER/SUMMER EXAMINATION

Name :	Patel Devansh H.				
Enrollment. :	1743 00 10 108				
Institute :	Venus Institute of Physiotherapy				
Branch Name With Code :	BPT / 63011305				SEM: 3rd Yr YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	63011305	Physical & Functional Diagnosis		✓	No change
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

The student (Patel Devansh H.)
SUMMER/WINTER EXAMINATION-.

For Office Use Only (Institute Copy)

Bhayan Rathod Dist-Gandhinagar has paid sum of Rs. 300 /- as University Re-assessment / Re-Checking fees

Date:

College Seal

VENUS INSTITUTE OF
PHYSIOTHERAPY
Authorized Signatory

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

PRINCIPAL
VENUS INSTITUTE OF
PHYSIOTHERAPY

(Student Copy)

The student (Patel Devansh H.) has paid sum of Rs. 300 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date:

College Seal

Authorized Signatory

VENUS INSTITUTE OF
PHYSIOTHERAPY



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 1743001023 *

WINTER/SUMMER EXAMINATION

Name :	Patel Jeet A				
Enrollment. :	1743001023				
Institute :	Venus institute of Physiotherapy				
Branch Name With Code :	BPT 63011305			SEM:	3 rd year
				YEAR:	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	63011305	Physical & functional diagnoses		✓	No change
2.					
3.					
4.					
5.					
6.					

Date:

Signature of Student

The student (patel)
SUMMER/WINTER EXAMINATION-.

For Office Use Only (Institute Copy)

Jeet has paid sum of Rs. 300 /- as University Re-assessment / Re-Checking fees

Date:

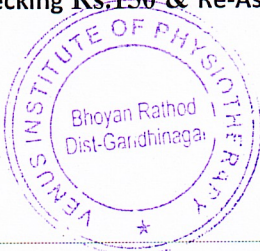
College Seal

PRINCIPAL
VENUS INSTITUTE OF
PHYSIOTHERAPY
Authorized Signatory

Undertaking

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Signature of Student



PRINCIPAL
VENUS INSTITUTE OF
PHYSIOTHERAPY

(Student Copy)

The student (Jeet) - patel) has paid sum of Rs. 300 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date:

College Seal

Authorized Signatory



PRINCIPAL
VENUS INSTITUTE OF
PHYSIOTHERAPY

CERTIFICATE

This is to inform that Aarihant Institute Of Nursing & PPBSc Nursing having Programme code 8 have 4 number of students for rechecking and reassessment in year 2023-24 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/reassessment summary

Sr no	Year	No of recheck
1	2023-24	4



Aarihant Institute Of Nursing & PPBSc Nursing

Recheck/Reassessment Academic Year 2023-24

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	2184001012	Baria Rajkumar	83011204	CHN-1	Pass
2	2184001013	Damor Anilkumar	83011204	CHN-1	Pass
3	2184001015	Damor Rajeshkumar	83011204	CHN-1	Pass
4	2184001020	Desai Alok	83011204	CHN-1	No Change



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SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam --:

* 2184001012 *

WINTER/SUMMER EXAMINATION

Name :	Baria Rajkumar				
Enrollment. :	2184001012				
Institute :	Aarohan Institute of Nursing				
Branch Name With Code :	B.Sc Nursing				SEM: 2nd year YEAR: B.Sc Nursing
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	830124	CHN-I		✓	
2.					
3.					
4.					
5.					
6.					

Date: 13/9/2024

Rajkumar
Signature of Student

For Office Use Only (Institute Copy)

The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 13/9/2024

College Seal

Authorized Signatory

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Rajkumar
Signature of Student

(Student Copy)

The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 13/9/2024

College Seal

Authorized Signatory

**SWARNIM STARTUP & INNOVATION UNIVERSITY**

Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 2184001013 ***WINTER/SUMMER EXAMINATION**

Name :	Damas Anilkumar				
Enrollment. :	2184001013				
Institute :	Aarohant Institute of Nursing				
Branch Name With Code :	Nursing.				SEM: 2nd yr B.Sc. YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	8301204	CHN-I		L	
2.					
3.					
4.					
5.					
6.					

Date: 12/9/24

Signature of Student

For Office Use Only (Institute Copy)

The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 12/9/2024

College Seal

Principal
Authorized Signatory
Aarohant Institute of Nursing
Bhoyan Rathod, Gandhinagar.**Undertaking**I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. **(Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)**

Signature of Student

(Student Copy)The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 12/9/2024.

College Seal

Principal
Authorized Signatory
Aarohant Institute of Nursing
Bhoyan Rathod, Gandhinagar.

**SWARNIM STARTUP & INNOVATION UNIVERSITY**

Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 2184001015 ***WINTER/SUMMER EXAMINATION**

Name :		Danoor Rageshkumar			
Enrollment :		2184001015			
Institute :		Aarhant Institute of Nursing			
Branch Name With Code :		B.Sc Nursing		SEM: 2nd year YEAR: B-Sc Nursing	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	83011204	CHN - I		✓	
2.					
3.					
4.					
5.					
6.					

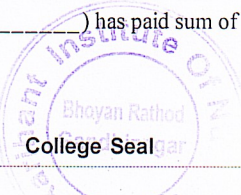
Date: 13/9/2024

D. Ragesh
Signature of Student

For Office Use Only (Institute Copy)

The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 13/9/2024

Principal
Authorized Signatory**Undertaking**

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

D. Ragesh
Signature of Student

(Student Copy)

The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 13/9/2024

Principal
Authorized Signatory

**SWARNIM STARTUP & INNOVATION UNIVERSITY**

Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 2184001020 ***WINTER/SUMMER EXAMINATION**

Name :		Desai Alok			
Enrollment. :		2184001020			
Institute :		Aarohant Institute of Nursing			
Branch Name With Code :		B.Sc Nursing		SEM: YEAR:	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	83011204	CHN-I		✓	
2.					
3.					
4.					
5.					
6.					

Date: 13/9/24

Signature of Student

For Office Use Only (Institute Copy)

The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 13/9/24

College Seal

Principal
Aarohant Institute of Nursing
Authorized Signatory**Undertaking**

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. **(Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)**

Signature of Student**(Student Copy)**The student () has paid sum of Rs. /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 13/9/24

College Seal

Principal
Aarohant Institute of Nursing
Authorized Signatory
Bhayan Rathod, Gandhinagar

CERTIFICATE

This is to inform that School of Management, Commerce and Liberal Arts having Programme code - 2 has 6 numbers of students for rechecking and reassessment in the year 2023-24 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of Recheck
1	2023-24	6



School of Management, Commerce and Liberal Arts

Recheck/reassessment 2023-24

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	2114004014	Thakor Himali Santoshbhai	12300013	Advanced Program In Entrepreneurship	No Change
2	2114001007	Prajapati Deep Mukeshbhai	14010501	Cost Accounting II	No Change
3	2114001011	Patel Het Vipulkumar	14010501	Cost Accounting II	No Change
4	2114001005	Jangid Anurag Mukeshbhai	14010503	Company Law	No Change
5	2114004012	Mewada Janvi Sandipkumar	14020501	Company Law	No Change
6	2114004005	Patel Nishidhkumar Anantbhai	14020505	Recruitment And Selection	No Change



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**SWARNIM STARTUP & INNOVATION UNIVERSITY**

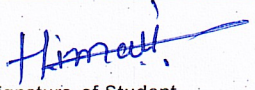
Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 2114004014 ***WINTER/SUMMER EXAMINATION**

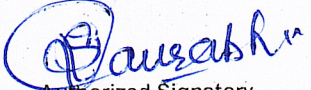
Name :	Thakor Himani Santhoshbhai				
Enrollment. :	2114004014				
Institute :	SMCLA				
Branch Name With Code :	SMCLA				SEM: 5th sem YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	12300013	Advanced Program in			
2.		entrepreneurship		✓	
3.					
4.					
5.					
6.					

Date: 9/2/24


Signature of Student

The student (Thakor Himani - 3001-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

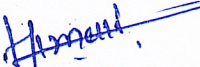
SWARNIM SCHOOL OF
BUSINESS
College Seal


Authorized Signatory

Date: 9/2/24

Undertaking

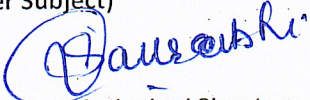
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)


Signature of Student**(Student Copy)**

The student (Thakor Himani - 3001-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 9/2/24

SWARNIM SCHOOL OF
BUSINESS
College Seal


Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam ::-

* 2114001007 *

WINTER/SUMMER EXAMINATION

Name :	Prayurati Deep Mukeshbhai				
Enrollment. :	2114001007				
Institute :	SMCLA				
Branch Name With Code :	SMCLA				SEM: 5 th YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	14010501	COST ACCOUNTING II		✓	
2.					
3.					
4.					
5.					
6.					

Date: 9/2/24

Signature of Student

The student (Deep Prayurati - 300/-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-



Date: 9/2/24

Authorized Signatory

Undertaking

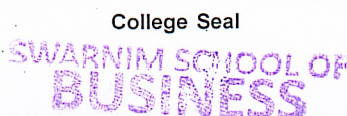
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Signature of Student

(Student Copy)

The student (Prayurati Deep - 300/-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 9/2/24



Authorized Signatory

**SWARNIM STARTUP & INNOVATION UNIVERSITY**

Enrollment No.

-:: Re-Assessment / Re-Checking for University Exam ::-

* 2114001011 ***WINTER/SUMMER EXAMINATION**

Name :	Patel Het Vipul Kumar				
Enrollment. :	2114001011				
Institute :	SMCLA				
Branch Name With Code :	SMCLA				SEM: 5 th sem YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	14010501	COST Accounting II		✓	
2.					
3.					
4.					
5.					
6.					

Date: 9/2/24
Signature of Student

For Office Use Only (Institute Copy)

The student (Patel Het - 300/-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.Date: 9/2/24SWARNIM SCHOOL OF
BUSINESS
College Seal
Authorized Signatory**Undertaking**I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. **(Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)**
Signature of Student

(Student Copy)

The student (Patel Het - 300/-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)Date: 9/2/24

College Seal

SWARNIM SCHOOL OF
BUSINESS
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.


--: Re-Assessment / Re-Checking for University Exam ::-

* 2114001005 *

WINTER/SUMMER EXAMINATION

Name :	Jangid Anurag Mukeshbhai				
Enrollment :	2114001005				
Institute :	SMCLA				
Branch Name With Code :	SMCLA				SEM: 5th sem YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	14010503	Microcomputer			
2.		Computer law		✓	
3.					
4.					
5.					
6.					

Date: 9/2/24

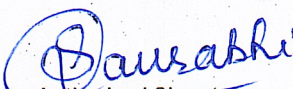

Signature of Student

For Office Use Only (Institute Copy)

The student Jangid Anurag - 3001- has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.


Date: 9/2/24

SWARNIM SCHOOL OF
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BUSINESS


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Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

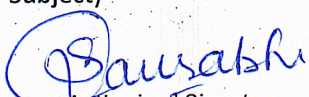

Signature of Student

(Student Copy)

The student Jangid Anurag - 3001- has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 9/2/24

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BUSINESS


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SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

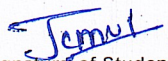
--: Re-Assessment / Re-Checking for University Exam ::-

2114004012

WINTER/SUMMER EXAMINATION

Name :	Mewada Jyoti Sandipkumar				
Enrollment. :	2114004012				
Institute :	SMCLA				
Branch Name With Code :	SMCLA				SEM: 5th sem YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	14020501	Company Law		✓	
2.					
3.					
4.					
5.					
6.					

Date: 9/2/24

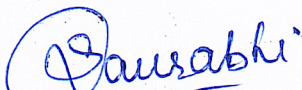

Signature of Student

For Office Use Only (Institute Copy)

The student (Mewada Jyoti) - 300/- has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

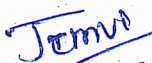
Date: 9/2/24

SWARNIM SCHOOL OF
BUSINESS
College Seal


Authorized Signatory

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)


Signature of Student

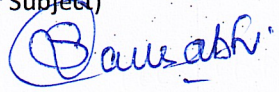
(Student Copy)

The student (Mewada Jyoti) - 300/- has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 9/2/24

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BUSINESS


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SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.


--: Re-Assessment / Re-Checking for University Exam ::-

* 2114004005 *

WINTER/SUMMER EXAMINATION

Name :	Patel Nihidhkruman				
Enrollment. :	2114004005				
Institute :	SMCLA				
Branch Name With Code :	SMCLA				SEM: 5th-12 YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	14020505	Recruitment And Selection		✓	
2.					
3.					
4.					
5.					
6.					

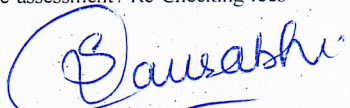
Date: 9/2/24


Signature of Student

The student (Patel Nihidh - 300/-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.


Date: 9/2/24

SWARNIM SCHOOL OF
BUSINESS
College Seal


Authorized Signatory

Undertaking

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)


Signature of Student

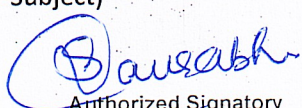
(Student Copy)

The student (Patel Nihidh - 300/-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 9/2/24

College Seal

SWARNIM SCHOOL OF
BUSINESS


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CERTIFICATE

This is to inform that Institute of Design having Programme code - 3 having 3 number of students for rechecking and reassessment in year 2019-20 enrolled at examination department of Swarnnim Startup and Innovation University.

Recheck/Reassessment Summary

Sr no	Year	No of recheck
1	2019-20	3



Swarnnim Institute Of Designs

Result/Reassessment 2019-20

Sr No.	Enrollment	Name	Subject Code	Subject Name	Result
1	1825009003	Patel Tarangkumar K.	23090503	Heat Transfer	No Change
2	1925002003	Shrimali Dhruvika P.	23020304	Fluid Flow Operation	Pass
3	1723002002	Trivedi Harshkuamr R.	23000020	Scaling Up The Venture	Pass

SWARRNIM
STARTUP & INNOVATION
UNIVERSITY
WHERE IDEAS COME ALIVE.



Swarnnim Startup & Innovation University

+91 - 95123 43333 | info@swarnnim.edu.in | www.swarnnim.edu.in

At Post Bhoyan Rathod, Nr. ONGC WSS, Opp. IFFCO Adalaj-Kalol Highway, Gandhinagar, Gujarat - 382420



SWARNIM STARTUP & INNOVATION UNIVERSITY

--: Re-Assessment / Re-Checking for University Exam ::-

Enrollment No.

* 1825009003 *

WINTER/SUMMER EXAMINATION

Name :	Patel Tasungkumar . K				
Enrollment. :	1825009003				
Institute :	Swarnim Institute of Design				
Branch Name With Code :	Design			SEM:	5th sem
				YEAR:	
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	23090503	Heat Transfer Desig.		✓	
2.					
3.					
4.					
5.					
6.					

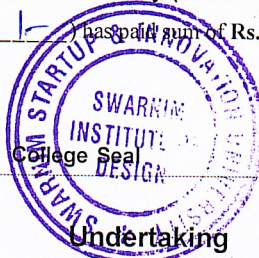
Date: 19/2/19

Tasung
Signature of Student

For Office Use Only (Institute Copy)

The student (Patel Tasung - 3001-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 19/2/19



Undertaking

Shantanu
Authorized Signatory

I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Tasung
Signature of Student

(Student Copy)

The student (Patel Tasung - 3001-) has paid sum of Rs. 300/- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 19/2/19



Shantanu
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

--: Re-Assessment / Re-Checking for University Exam ::-

* 1925002003 *

WINTER/SUMMER EXAMINATION

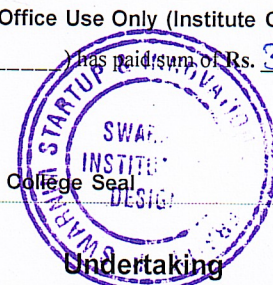
Name :	Shrimati Dhruvika.P				
Enrollment. :	1925002003				
Institute :	Swarnim Institute of Design				
Branch Name With Code :	Design				SEM: 3rd sem YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	23020304	Fluid flow operation		✓	
2.					
3.					
4.					
5.					
6.					

Date: 13/2/19

Dhruvika
Signature of Student

The student (Shrimati Dhruvika.P) has paid sum of Rs. 300 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 13/2/19



Shantana
Authorized Signatory

Undertaking

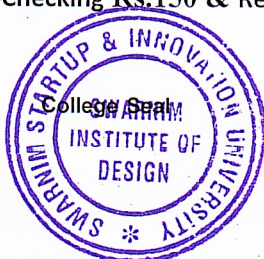
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Dhruvika
Signature of Student

(Student Copy)

The student (Shrimati Dhruvika.P) has paid sum of Rs. 300 /- as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 13/2/19



Shantana
Authorized Signatory



SWARNIM STARTUP & INNOVATION UNIVERSITY

Enrollment No.

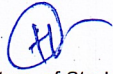
-:: Re-Assessment / Re-Checking for University Exam ::-

* 1723002002 *

WINTER/SUMMER EXAMINATION

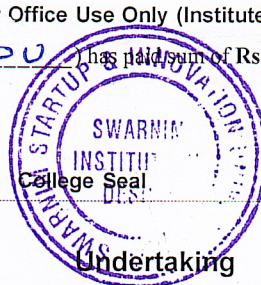
Name :	Tivedi Harshkumar R.				
Enrollment. :	1723002002				
Institute :	Design				
Branch Name With Code :	Design				SEM: 3rd sem YEAR:
SR NO.	SUBJECT CODE	SUBJECT NAME WITH PRESENT GRADE	RECHECK	RE-ASSESSMENT	REMARKS
1.	23000020	Scaling up the Venture		✓	
2.					
3.					
4.					
5.					
6.					

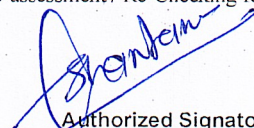
Date: 13/2/19


Signature of Student


The student Tivedi Harsh - 300 has paid sum of Rs. 300 - as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-.

Date: 13/2/19




Authorized Signatory

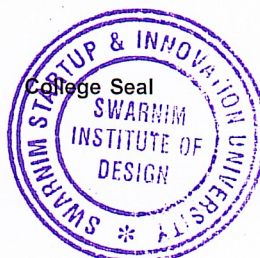
I, hereby declare that the result of reassessment of my answer book shall be binding on me and that I shall accept the revised marks and subsequent result. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

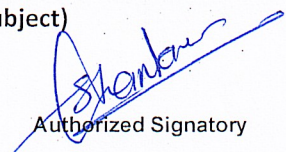

Signature of Student

(Student Copy)

The student Harsh Tivedi - 300 has paid sum of Rs. 300 - as University Re-assessment / Re-Checking fees
SUMMER/WINTER EXAMINATION-2024. (Re-Checking Rs.150 & Re-Assessment Rs. 300 Per Subject)

Date: 13/2/19




Authorized Signatory