



SINHGAD TECHNICAL EDUCATION SOCIETY'S
SINHGAD COLLEGE OF ENGINEERINGTM

[Affiliated to University of Pune & Approved by (AICTE) (ID No. PU/PN/Engg./116 (1996)]

S. No. 44/1, Vadgaon (Bk.), Off Sinhgad Road, Pune - 411 041.

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Prof. M. N. Navale
M.E. (Elect.) MIE, MBA
Founder - President

Dr. (Mrs.) Sunanda M. Navale
B.A., M.P.M., Ph.D.
Founder - Secretary

Dr. S. D. Lokhande
M.E., Ph.D. (Electronics Engg.)
Principal

Date: 12/06/2013

To,
The Principal
All UoP affiliated engineering colleges

Subject: One Day workshop on "Engineering Mathematics III" (Revised 2012)

Dear Sir/Madam,

Board of Studies [BoS] in Engineering Sciences, University of Pune [UoP] is organizing a one day workshop on Engineering Mathematics III (Revised 2012).

During the WS it is proposed to finalize action plan on syllabus coverage, tutorial conduction, examination pattern, term work assessment, MCQs etc. The Work Shop will be held at the Sinhgad College of Engineering, Pune 411 041 on 21st June 2013 at 09.00 am in IT Seminar Hall (C3 building, 3rd floor).

You are requested to depute at least One Mathematics faculty member from your college for this workshop. Names of participating faculty members may be conveyed, on or before 20th June 2013, by email to:

Mrs. S. D. Navare	sdnavare.scoe@sinhgad.edu	9890335388
Dr. R. S. Shewale	rsshewale.scoe@sinhgad.edu	9403580208
Mrs. M. N. Joshi	mnjoshi.scoe@sinhgad.edu	9823364225

Mrs. S. D. Navare
Co-ordinator



Dr. S. D. Lokhande
Principal



Sinhgad Institutes

Sinhgad Technical Education Society's
Sinhgad College of Engineering,
Vadgaon (Bk), Pune 41

Organizes

One day Workshop on Engineering Mathematics III (Revised 2012)

Sponsored by

Board of College and University Development
University of Pune, Pune

on

21st June 2013

Coordinator

Mrs. S. D. Navare

Head, Department of Applied Sciences

Sinhgad College of Engineering

S. No. 44/1, Vadgaon (Budruk)

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Registration Form

1. Full Name : _____
2. Designation : _____
3. College : _____
4. College Address : _____
5. Experience : Teaching _____, Professional _____
6. Residential Address : _____

7. Cell No. : _____
8. Email Id : _____

Date:

Applicant's Sign.

The information of Prof. _____
provided above is true to the best of my knowledge. He/She is hereby
deputed and sponsored for attending the said work-shop.

Date:

Principal

College seal