Date : 12/10/2026

Vivekanand Education Society's Institute of Technology

(An Autonomous Institute Affiliated to University of Mumbai, Approved by AICTE & Recognized by Govt. of Maharashtra)

Revised Notice for **Autonomous Re-examination form for Winter -2026 (**January 2027)**exam**

Students who failed the Autonomous/ NEP examination (R-2023), (R2024) & (R-2025) of BE Semester I, III, V & VII, MCA Semester I and III, M. Tech -Semester -I are required to fill their KT examination forms for the Re -examination to be held in January 2027.

Date of Form Acceptance	Last date of the Payment	Fees
02/11/2026 to 04/11/2026	05/11/2026	Normal Fees

Exam forms will not be accepted after the last date.

Examination Forms are attached herewith. After filling the form & verification from the exam department, submit the exam form to the admin office to assign the exam fees. Examination fees will be assigned to you on the next working of form submission.

Please use the following link to pay the exam fees on or before the last date.
https://www.feepayr.com/

If you have any problem related to payment of the exam fees please contact the admin office, Room no.1, VESIT, .

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

(Without filling examination forms, examination seat no's will not be allotted, and without seat nos. You will not be allowed to appear for the examination. And the subject **will be counted as a kt., which may lose your year (YEAR DROP).**

i) End semester (Theory)
ii) Mid Term Test / Continuous Assessment
iii) Oral
iv) Practical

Re -Exam Fees Chart for UG & PG

KT Head	(UG) KT exam Fee per Subject	(PG) KT exam Fee per Subject
Theory (ES)	**1000**	**1500**
MT /CA	**500**	**750**
Practical	**500**	**750**
Term Work	**700**	**700**

If you have any query please contact the examination department.

V.E.S. INSTITUTE OF TECHNOLOGY CHEMBUR, MUMBAI-74

VIVEKANAND EDUCATION SOCIETY'S INSTITUTE OF TECHNOLOGY
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Re- Exam / Special Examination Form for Winter /Summer _____

Branch _____ Semester _____ Division _____

1.Name	Surname																Photograph Do not pin/Staple Paste inside the box only Not to be attested
	First/ Own Name																
	Father's/Husband's Name																
	Mother's Name																

2. Contact Details: - Mobile Number _____

Email Id: - _____

Postal Address: _____

_____

3. Previous attempt month & year: -_____ (Please attach result copy)

4. Name of the Subject (To be appeared for the examination) (Please √ wherever applicable)

Sr. No.	Name of the Subject	TH	MT	CA	PR/OR

5. Candidate's Signature: _____

6. Verified by: - _____

7. Fees Receipt No. _____ Date: -_____