



OFFICE OF THE CONTROLLER OF EXAMINATIONS
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

Date:22-01-2018

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A. – I/I & II/I Semester Exams
2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24001) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations,
KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per
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Colleges should submit a proof of having, faced the Selection Committee. They must
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Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the
scripts valued by him/her.
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particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs R. Kalyani
Lecturer in Microbiology,
Vaagdevi Degree College,
Kishanpura

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24002**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
9. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs K. Sindhura
Lecturer in Microbiology,
Padmavathi Mahila College,
Kothawada

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24003) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
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10. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs P. Shyamala
Lecturer in Microbiology,
Residential Degree Colleges For Women,
Mancherial

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24004**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

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11. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs S Ajay Kumar Chaitanya
Lecturer in Microbiology,
Kavitha Memorial Degree College,
Khammam

Declaration

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Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24005) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm

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7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
12. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Muthyala Kapil
Lecturer in Microbiology,
Naveena(Goutham)Degree College,
Khammam

Declaration

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Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24006**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
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- 7 Each examiner should value 30 scripts per session.
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7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
13. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Juluri Prathibha
Lecturer in Microbiology,
Padmavathi Mahila College,
Kothawada

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24007**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
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7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
14. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs G. Chandrakala
Lecturer in Microbiology,
Vaagdevi Degree College,
Kishanpura

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24008) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

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15. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs N. Shobha Rani
Lecturer in Microbiology,
Vaagdevi Degree College,
Kishanpura

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24009) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

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16. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Enapa Guravaiah
Lecturer in Microbiology,
Sadhana Degree College,
Yellandu

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24010**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

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for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Narsimha Chary M
Lecturer in Microbiology,
Govt. Degree College For Women,
Adilabad

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24011**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

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for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Pasunuti Anil
Lecturer in Microbiology,
Vikas Degree College,
Station Road

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24012**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

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for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Kommu Srinivasa Rao
Lecturer in Microbiology,
D R S Degree & P.G.College,
Mamillagudem

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

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I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24013**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

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6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
20. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Sajja Suresh Babu
Lecturer in Microbiology,
Kavitha Memorial Degree College,
Khammam

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



OFFICE OF THE CONTROLLER OF EXAMINATIONS
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

Date:22-01-2018

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A. – I/I & II/I Semester Exams
2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24014**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree Colleges should submit a proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
- 15 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
21. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr.B.Venkata Gopinath
Lecturer in Microbiology,
Univ. Arts & Science College,
Subedari

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

Date:22-01-2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24015) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations,
KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per
University Norms. Kindly note the following:

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree
Colleges should submit a proof of having, faced the Selection Committee. They must
also submit a copy of Qualifying Examination, Service and Salary Certificates to the
Chairman, Board of Studies for joining spot valuation camp.
- 16 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the
scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary
particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only
those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
22. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. S. Jeevan Chandra
Lecturer in Microbiology,
Kakatiya Govt Degree College,
Hanamkonda

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24016**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree Colleges should submit a proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
- 17 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
23. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. Jayaprakash
Lecturer in Microbiology,
Univ. Arts & Science College,
Hanamkonda

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(**Examiner No. 24017**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm

Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations,
KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per
University Norms. Kindly note the following:

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree
Colleges should submit a proof of having, faced the Selection Committee. They must
also submit a copy of Qualifying Examination, Service and Salary Certificates to the
Chairman, Board of Studies for joining spot valuation camp.
- 18 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the
scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary
particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only
those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
24. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs V. Swetha
Lecturer in Microbiology,
Pingle Govt Degree College for Women,
Waddepally

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24018**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree Colleges should submit a proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
- 19 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
25. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. G. Renuka
Lecturer in Microbiology,
Govt Pingle College for Women,
Waddepally

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

Date:22-01-2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology**
(Examiner No. 24019) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations,
held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations,
KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per
University Norms. Kindly note the following:

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Colleges should submit a proof of having, faced the Selection Committee. They must
also submit a copy of Qualifying Examination, Service and Salary Certificates to the
Chairman, Board of Studies for joining spot valuation camp.
- 20 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the
scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary
particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only
those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
26. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Gousiya Begum
Lecturer in Microbiology,
Vaagdevi Degree & PG College,
Hanamkonda

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24020**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree Colleges should submit a proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
- 21 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
27. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. M. Jaya Prakash
Lecturer in Microbiology,
Univ. Arts & Science College,
Hanamkonda

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



OFFICE OF THE CONTROLLER OF EXAMINATIONS
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

Date:22-01-2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (Examiner No. 24021) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

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- 22 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
28. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs G. Srikanth
Lecturer in Microbiology,
A B V Govt Degree College,
Jangaon

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature



OFFICE OF THE CONTROLLER OF EXAMINATIONS
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No. 773/Spot/Exams/KU/2018

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2017-18 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as Examiner in **Microbiology** (**Examiner No. 24022**) for the valuation Answer scripts of B.Sc. I/I & II/I Semester Examinations, held in December/January- 2017-18.

Date & Time of commencement of Valuation: 23-01-2018, 02.00 pm to 06.00 pm

Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

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- 23 Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
29. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

for CONTROLLER OF EXAMINATIONS

To
Mr/Mrs P. Kiran Kumar
Lecturer in Microbiology,
Samatha Degree College,
Thorrur

Declaration

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

Address

Signature

