



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

No.288/Spot/Exams/KU/2016

Date: 23-12-2016

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc- Supplementary
Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39001)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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.
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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs D. Mallikarjun
Lecturer in Commerce
C K M Arts & Science College
Desaipet

Declaration

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

Address

Signature



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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39002)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
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for **Controller of Examinations**

To
Mr/Mrs Jyothi B
Lecturer in Commerce
R D Women`S 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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I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39003)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

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for **Controller of Examinations**

To
Mr/Mrs B.Anuradha
Lecturer in Commerce
Masterji Deg.&P.G.Coll.
Hunter 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 **Business Communications (Examiner No: 39004)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

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for **Controller of Examinations**

To
Mr/Mrs G Hari Krishna
Lecturer in Commerce
Masterji Deg.&P.G.Coll.
Hunter Road

Declaration

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Address

Signature



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I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39005)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

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for **Controller of Examinations**

To
Mr/Mrs M.Nagaraju
Lecturer in Commerce
Masterji Deg.&P.G.Coll.
Hunter Road

Declaration

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Address

Signature



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I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39006)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm

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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.
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for **Controller of Examinations**

To
Mr/Mrs Manoj Kumar Gaddam
Lecturer in Commerce
Vikas Degree College
Jangaon

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 **Business Communications (Examiner No: 39007)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm
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for **Controller of Examinations**

To
Mr/Mrs Dr. Suresh Chandra
Lecturer in Commerce
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 **Business Communications (Examiner No: 39008)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm

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for **Controller of Examinations**

To
Mr/Mrs Srinivas Chippa
Lecturer in Commerce
Shaarvani 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 **Business Communications (Examiner No: 39009)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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for **Controller of Examinations**

To
Mr/Mrs T. Anusha Reddy
Lecturer in Commerce
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 **Business Communications (Examiner No: 39010)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm

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for **Controller of Examinations**

To
Mr/Mrs Arshiya Tabassum
Lecturer in Commerce
Islamia Arts & Science College
M G 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 **Business Communications (Examiner No: 39011)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

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for **Controller of Examinations**

To
Mr/Mrs Bhavani Kankanana
Lecturer in Commerce
A V V Degree College
Mattewada

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 **Business Communications (Examiner No: 39012)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

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To
Mr/Mrs Bola Ravinder
Lecturer in Commerce
K S R Mahila Degree College
Narsampet

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 **Business Communications (Examiner No: 39013)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

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for **Controller of Examinations**

To
Mr/Mrs Kunde Prabhakar
Lecturer in Commerce
K S R Mahila Degree College
Narsampet

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 **Business Communications (Examiner No: 39014)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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.
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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Venkanna Radharapu
Lecturer in Commerce
Maharshi Degree College
Palakurthi

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc- Supplementary
Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39015)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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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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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs N.Bikshapathi
Lecturer in Commerce
S V Degree College
Parkal

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

STRICTLY CONFIDENTIAL

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Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc- Supplementary
Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39016)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Valugula Dhanunjaiah
Lecturer in Commerce
Dr M R Reddy Degree College
Parkal

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39017)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Tallapelly Rayalingu
Lecturer in Commerce
Vikas Degree College
Ponkal

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39018)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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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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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Bollampalli Bixapathi
Lecturer in Commerce
Vishwas Degree College
Rajeev Chowrasta

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

STRICTLY CONFIDENTIAL

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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39019)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm

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

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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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Guda Rajamouli
Lecturer in Commerce
Samatha Degree College
Thorrur

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39020)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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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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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Shiraboina Swapna
Lecturer in Commerce
Sairam Degree College
Thorrur

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39021)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 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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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.
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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Madhireddy Devendar Reddy
Lecturer in Commerce
Bharathi Degree College
Wsardhannapet

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

STRICTLY CONFIDENTIAL

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Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc- Supplementary
Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39022)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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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 is 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).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Shankapelly Kanakachary
Lecturer in Commerce
Bharathi Degree College
Wsardhannapet

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.288/Spot/Exams/KU/2016

Date: 23-12-2016

STRICTLY CONFIDENTIAL

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Examinations 2016 - Appointment of Examiner – Reg.

* * *†

I am pleased to inform you that you are appointed as **Examiner** in **Business Communications (Examiner No: 39023)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 24-12-2016, 12.00 Noon to 04.00 pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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9. Only Local Conveyance will be paid

for **Controller of Examinations**

To
Mr/Mrs Kathula Vasantha
Lecturer in Commerce
Avanthi Degree College
Zafargud

Declaration

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

Address

Signature