



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

No.1264/Spot/Exams/KU/2024

Date: 08-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **ECONOMICS**  
(**Examiner No.19001** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 08-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR. SRIDHAR KUMAR LODH**  
Lecturer in ECONOMICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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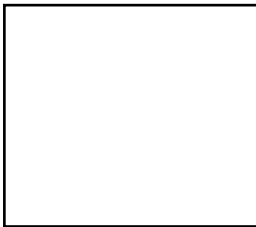
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **ECONOMICS**  
(**Examiner No.19002** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs DR. E. RAMESH**  
Lecturer in ECONOMICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

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(**Examiner No.19003** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs DR. T. SESHIAH**  
Lecturer in ECONOMICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

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To  
**Mr/Mrs DR. K. LAKSHMINARAYANA**  
Lecturer in ECONOMICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

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To  
**Mr/Mrs DR. G. VIJAYA**  
Lecturer in ECONOMICS  
UNIVERSITY COLLEGE FOR WOMEN, SUBEDARI,  
HANAMKONDA

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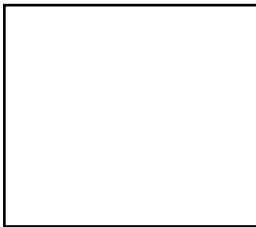
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To  
**Mr/Mrs CH. RAJAMOGILI**  
Lecturer in ECONOMICS  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

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To  
**Mr/Mrs MR. G. NAGESH**  
Lecturer in ECONOMICS  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

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To  
**Mr/Mrs DR. CH. VINODA**  
Lecturer in ECONOMICS  
UNIVERSITY P.G, COLLEGE, SUBEDARI,  
HANKAMKONDA

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To  
**Mr/Mrs DR. G. KAVITHA**  
Lecturer in ECONOMICS  
UNIVERSITY COLLEGE FOR WOMEN, SUBEDARI,  
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To  
**Mr/Mrs DR. K. SANDHYA RANI**  
Lecturer in ECONOMICS  
UNIVERSITY COLLEGE FOR WOMEN, SUBEDARI,  
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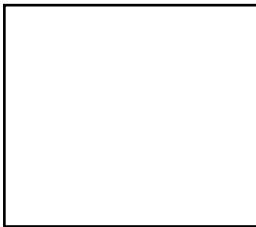
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To  
**Mr/Mrs DR. GUGULOTH KAVITHA**  
Lecturer in ECONOMICS  
UNIVERSITY COLLEGE FOR WOMEN, SUBEDARI,  
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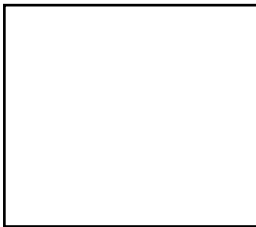
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(**Examiner No.19012** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 08-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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.
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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 EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR. V. KUMARASWAMY**  
Lecturer in ECONOMICS  
UNIVERSITY COLLEGE FOR WOMEN, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 08-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **ECONOMICS**  
(**Examiner No.19013** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs DR. A. RAVINDER**  
Lecturer in ECONOMICS  
UNIVERSITY COLLEGE FOR WOMEN, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **ECONOMICS**  
(**Examiner No.19014** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs DR. B. HARISHANKAR**  
Lecturer in ECONOMICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **ECONOMICS**  
(**Examiner No.19015** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs DR. V. NAVEEN**  
Lecturer in ECONOMICS  
UNIVERSITY P.G, COLLEGE, SUBEDARI,  
HANKAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **ECONOMICS**  
(**Examiner No.19016** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs DR. D. NIVAS**  
Lecturer in ECONOMICS  
UNIVERSITY P.G, COLLEGE, SUBEDARI,  
HANKAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

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(**Examiner No.19017** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs MR. R. MOHAN**  
Lecturer in ECONOMICS  
VIDYA JYOTHI DEG.& P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**