



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

No.1500/Spot/Exams/KU/2021

Date: 04-Apr-2021

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - I,II,III,IV,VI Semester Exams 2021 -FEB  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**  
(**Examiner No.6501** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
Semester. - Semester Examinations, held in FEB 2021.

**Date &Time of commencement of Valuation: 04-Apr-2021, 10.00 am to 02.00pm**  
**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 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 B VENKATA GOPINATH**  
Lecturer in MICROBIOLOGY  
UNIVERSITY COLLEGE KAKATIYA UNIVERSITY,  
HNK.

Aadhar No: XXXX XXXX XXXX 3010

**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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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**  
(**Examiner No.6502** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
Semester. - Semester Examinations, held in FEB 2021.

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To  
**Mr/Mrs RAMADUGU JYOTHI**  
Lecturer in MICROBIOLOGY  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

Aadhar No: XXXX XXXX XXXX 5044

**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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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**  
(**Examiner No.6503** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
Semester. - Semester Examinations, held in FEB 2021.

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To  
**Mr/Mrs N.SHOBHA RANI**  
Lecturer in MICROBIOLOGY  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 0175

**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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I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**  
(**Examiner No.6504** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
Semester. - Semester Examinations, held in FEB 2021.

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To  
**Mr/Mrs G CHANDRAKALA**  
Lecturer in MICROBIOLOGY  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 4494

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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**Address**

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(**Examiner No.6505** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
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To  
**Mr/Mrs K Srilaxmi**  
Lecturer in MICROBIOLOGY  
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,  
WARANGAL(WEST)

Aadhar No: XXXX XXXX XXXX 0376

**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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I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**  
(**Examiner No.6506** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
Semester. - Semester Examinations, held in FEB 2021.

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To  
**Mr/Mrs JULURI PRATHIBHA**  
Lecturer in MICROBIOLOGY  
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,  
WARANGAL

Aadhar No: XXXX XXXX XXXX 1889

**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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(**Examiner No.6507** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
Semester. - Semester Examinations, held in FEB 2021.

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To  
**Mr/Mrs P.Nagalohitha**  
Lecturer in MICROBIOLOGY  
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,  
BHUPALPALLI

Aadhar No: XXXX XXXX XXXX 4234

**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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(**Examiner No.6508** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA I,II,III,IV,VI  
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To  
**Mr/Mrs Aruri Suryam**  
Lecturer in MICROBIOLOGY  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 6187

**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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To  
**Mr/Mrs PONNOJU VEDASREE**  
Lecturer in MICROBIOLOGY  
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,  
WARANGAL

Aadhar No: XXXX XXXX XXXX 1756

**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**