



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

No.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4856** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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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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 RAMESH KOLIPAKA**  
Lecturer in PHYSICS  
TELANGANA TRIBAL WELFARE R D C(BOYS)  
MANUGURU

Aadhar No: XXXX XXXX XXXX 2011

**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..

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(**Examiner No.4857** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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To  
**Mr/Mrs S. RAJASRI**  
Lecturer in PHYSICS  
C K M ARTS & SCIENCE COLLEGE, DESAIPET,  
WARANGAL

Aadhar No: XXXX XXXX XXXX 1072

**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.4858** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
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To  
**Mr/Mrs Dr. B. Saritha**  
Lecturer in PHYSICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 8578

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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**Address**

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**Signature**



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I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4700** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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To  
**Mr/Mrs VISHNUMURTHY PUJARI**  
Lecturer in PHYSICS  
LAL BAHADUR COLLEGE NEAR MULUG ROAD

Aadhar No:

**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 **PHYSICS**  
(**Examiner No.4702** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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6. The examiner should bring one stamp size photograph.
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To  
**Mr/Mrs RADHIKA R**  
Lecturer in PHYSICS  
LAL BAHADUR COLLEGE NEAR MULUG ROAD  
Aadhar No: XXXX XXXX XXXX 0344

**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 **PHYSICS**  
(**Examiner No.4703** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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To  
**Mr/Mrs SUDHAKAR KOTHAPALLY**  
Lecturer in PHYSICS  
LAL BAHADUR COLLEGE NEAR MULUG ROAD

Aadhar No:

**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 **PHYSICS**  
(**Examiner No.4701** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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To  
**Mr/Mrs CHINTHAM RAVINDER**  
Lecturer in PHYSICS  
LAL BAHADUR COLLEGE NEAR MULUG ROAD

Aadhar No:

**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 **PHYSICS**  
(**Examiner No.4704** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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To  
**Mr/Mrs P. DHARAMAIAH**  
Lecturer in PHYSICS  
C K M ARTS & SCIENCE COLLEGE WARAGNAL  
Aadhar No: XXXX XXXX XXXX 5877

**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 **PHYSICS**  
(**Examiner No.4706** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
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To  
**Mr/Mrs CHINTHALA SRIDHAR**  
Lecturer in PHYSICS  
A B V DEGREE COLLEGE JANGAON  
Aadhar No: XXXX XXXX XXXX 7602

**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 **PHYSICS**  
(**Examiner No.4707** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
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To  
**Mr/Mrs P TYAGAI AH**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE NARSAMPET

Aadhar No: XXXX XXXX XXXX 1470

**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 **PHYSICS**  
(**Examiner No.4708** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
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To  
**Mr/Mrs Reddyvari Venugopal**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE MAHABUBABAD  
Aadhar No: XXXX XXXX XXXX 7749

**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 **PHYSICS**  
(**Examiner No.4709** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
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To  
**Mr/Mrs P. SUNEETA**  
Lecturer in PHYSICS  
S C WOMEN'S COLLEGE KOTHAGUDEM  
Aadhar No: XXXX XXXX XXXX 4933

**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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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 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.A.MAHESH KUMAR**  
Lecturer in PHYSICS  
J V R GOVT. COLLEGE SATHUPALLY

Aadhar No:

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4711** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 N SWAPNA**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE CHENNUR  
Aadhar No: XXXX XXXX XXXX 9587

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4712** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 M JAYARAJU**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE BELLAMPALLY

Aadhar No:

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4713** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 GANDI SHYAM SUNDAR**  
Lecturer in PHYSICS  
CITY MAHILA DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 7421

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4715** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 K BALASRINIVAS**  
Lecturer in PHYSICS  
S.R.DEGREE & P.G.COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 9196

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4717** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 KAMPATI POORNIMA**  
Lecturer in PHYSICS  
KAVITHA MEMORIAL DEGREE COLLEGE  
KHAMMAM

Aadhar No: XXXX XXXX XXXX 5608

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
**(Examiner No.4718 )** for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 D SRAVAN KUAMR**  
Lecturer in PHYSICS  
KAVITHA MEMORIAL DEGREE COLLEGE  
KHAMMAM

Aadhar No: XXXX XXXX XXXX 1652

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

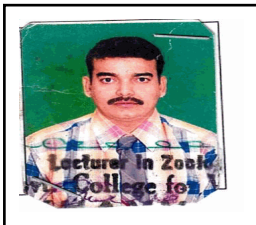
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4716** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 M RANGARAO**  
Lecturer in PHYSICS  
KAVITHA MEMORIAL DEGREE COLLEGE  
KHAMMAM

Aadhar No: XXXX XXXX XXXX 0754

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4719** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 KUKKALA RAMESH**  
Lecturer in PHYSICS  
SRI ARUNODAYA DEGREE & P.G.COLLEGE  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 3215

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4720** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 RAJU VADDI**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 6553

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4722** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 P.RAJANI**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 6189

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4721** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 M GOPIKRISHNA**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 6330

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4724** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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

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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 M NARASIMHA MURTHY**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE HANAMKONDA

Aadhar No: XXXX XXXX XXXX 4868

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4725** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 G MADHUKAR**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 3454

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4723** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date & Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 G RAJA PRASAD**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 6889

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4726** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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

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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 MODDU RAJU**  
Lecturer in PHYSICS  
MASTERJI DEG.&P.G.COL. HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 4665

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4727** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 A. PRIYANKA**  
Lecturer in PHYSICS  
MASTERJI DEG.&P.G.COL. HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 7027

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4728** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 YASEEN SYED**  
Lecturer in PHYSICS  
VIGNANA BHARATHI DEGREE COLLEGE  
MAHABUBABAD

Aadhar No: XXXX XXXX XXXX 8978

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4731** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 SHRAVANI KODAKANDLA**  
Lecturer in PHYSICS  
NEW SCIENCE DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 5781

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4732** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 RAVINDRANATH LYATHAKULA**  
Lecturer in PHYSICS  
NEW SCIENCE DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 2337

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4733** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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

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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 KALUVA SUMALYA**  
Lecturer in PHYSICS  
NEW SCIENCE DEGREE COLLEGE HANAMKONDA

Aadhar No: XXXX XXXX XXXX 3693

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4729** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 KAMALAKAR CH**  
Lecturer in PHYSICS  
NEW SCIENCE DEGREE COLLEGE HANAMKONDA

Aadhar No: XXXX XXXX XXXX 3012

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4730** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 D.LAXMINARAYANA**  
Lecturer in PHYSICS  
NEW SCIENCE DEGREE COLLEGE HANAMKONDA

Aadhar No: XXXX XXXX XXXX 4457

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4734** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 B.SHIVAKUMAR**  
Lecturer in PHYSICS  
VIDYA JYOTHI DEG.&P.G.COLLEGE STN.  
GHANPUR

Aadhar No: XXXX XXXX XXXX 6050

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4736** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 BALAMARTHI SURESH**  
Lecturer in PHYSICS  
KAVITHA DEGREE & PG COLLEGE KHAMMAM  
Aadhar No: XXXX XXXX XXXX 5139

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4737** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 LAKSHMIPRASANNA D**  
Lecturer in PHYSICS  
KAVITHA DEGREE & PG COLLEGE KHAMMAM  
Aadhar No: XXXX XXXX XXXX 9360

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4738** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 BANDARU VENU**  
Lecturer in PHYSICS  
BBM VARI GAYATRI DEG. & P.G.COLLEGE  
KHAMMAM

Aadhar No: XXXX XXXX XXXX 4306

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4739** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 NAGENDER MARIGANTI**  
Lecturer in PHYSICS  
VIKAS DEGREE COLLEGE KHAMMAM

Aadhar No: XXXX XXXX XXXX 2411

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4740** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 SIRIPARTHI MAHESH**  
Lecturer in PHYSICS  
GEETAM S DEGREE & PG COLLEGE SATHUPALLY  
Aadhar No: XXXX XXXX XXXX 6661

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4741** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 TIRUMALASETTI VENKATA RAO**  
Lecturer in PHYSICS  
KAKATIYA DEGREE COLEGE SATHUPALLY  
Aadhar No: XXXX XXXX XXXX 5694

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4742** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 SATHOSH MEDISHETTY**  
Lecturer in PHYSICS  
AURORA DEGREE COLLEGE HANAMKONDA

Aadhar No: XXXX XXXX XXXX 1864

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4743** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 SAMALA RAJESH**  
Lecturer in PHYSICS  
PADMAVATHI MAHILA COLLEGE WARANGAL  
Aadhar No: XXXX XXXX XXXX 0900

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4745** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 M. Suresh Kumar**  
Lecturer in PHYSICS  
KAKATIYA MAHILA DEGREE COLLEGE  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 1345

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4744** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 B. SANJEEVAIAH**  
Lecturer in PHYSICS  
KAKATIYA MAHILA DEGREE COLLEGE  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 9484

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4746** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 ADEPU DEVENDER**  
Lecturer in PHYSICS  
KAKATIYA MAHILA DEGREE COLLEGE  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 0566

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4747** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 B RAJESH**  
Lecturer in PHYSICS  
SAIRAM DEGREE COLLEGE THORRUR  
Aadhar No: XXXX XXXX XXXX 3624

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4749** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 GUTI BABU**  
Lecturer in PHYSICS  
D R S DEGREE & P.G.COLLEGE KHAMMAM

Aadhar No: XXXX XXXX XXXX 0884

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4748** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date & Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 SWETHA MEKALA**  
Lecturer in PHYSICS  
D R S DEGREE & P.G.COLLEGE KHAMMAM  
Aadhar No: XXXX XXXX XXXX 6745

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4750** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 Mr. P. Rambabu**  
Lecturer in PHYSICS  
PRIYADARSHINI DEG. & P.G.COLLEGE KHAMMAM

Aadhar No: XXXX XXXX XXXX 2698

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4751** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 Mr. P.Ram Prasad**  
Lecturer in PHYSICS  
JESUS MARY JOSEPH COLLEGE FOR WOMEN  
KARUNAPURAM

Aadhar No: XXXX XXXX XXXX 0209

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4752** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 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 K. RANGANADH**  
Lecturer in PHYSICS  
DR.R J REDDY COLLEGE OF HIGHER EDN.  
KHAMMAM

Aadhar No: XXXX XXXX XXXX 7719

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4753** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 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 NAKKA KUTUMBA RAO**  
Lecturer in PHYSICS  
NAVA BHARAT DEGREE COLLEGE SATHUPALLY  
Aadhar No: XXXX XXXX XXXX 2216

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4754** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 T MADHUKAR**  
Lecturer in PHYSICS  
SADHANA DEGREE COLLEGE YELLANDU  
Aadhar No: XXXX XXXX XXXX 6786

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4755** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 POTRU REVATHI**  
Lecturer in PHYSICS  
VKDVS DEGREE COLLEGE ASWARAOPET  
Aadhar No: XXXX XXXX XXXX 0448

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4756** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 PARIPALLI PURNACHANDARRAO**  
Lecturer in PHYSICS  
K L R DEGREE COLLEGE PALONCHA  
Aadhar No: XXXX XXXX XXXX 2047

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4757** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 SRIKANTH THAMMALA**  
Lecturer in PHYSICS  
SRI SAI DEGREE COLLEGE BHADRACHALAM  
Aadhar No: XXXX XXXX XXXX 8128

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4759** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 R SRINIVAS**  
Lecturer in PHYSICS  
N B R DEGREE COLLEGE NIRMAL  
Aadhar No: XXXX XXXX XXXX 7309

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4760** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 S.KIRAN REDDY**  
Lecturer in PHYSICS  
VIVEKAVARDHINI DEGREE COLLEGE  
MANCHERIAL

Aadhar No: XXXX XXXX XXXX 2945

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4761** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 GOWRARAM SIRISHA**  
Lecturer in PHYSICS  
SRI VIDYA DEGREE COLLEGE MANUGURU  
Aadhar No: XXXX XXXX XXXX 0227

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4762** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 AKULA SRIDHAR**  
Lecturer in PHYSICS  
BHARATHI DEGREE COLLEGE WARANGAL  
Aadhar No: XXXX XXXX XXXX 3046

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4763** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 BOGAM NAGARANI**  
Lecturer in PHYSICS  
S V DEGREE COLLEGE PARKAL

Aadhar No: XXXX XXXX XXXX 4230

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4764** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 L.Rajeshwar**  
Lecturer in PHYSICS  
SRI CHAITANYA DEGREE COLLEGE PALIVELPULA

Aadhar No: XXXX XXXX XXXX 8536

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4765** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 T.RESHMA DEVI**  
Lecturer in PHYSICS  
MANCHERIAL INST. OF MATHEMATICAL  
SCIENCES MANCHER

Aadhar No: XXXX XXXX XXXX 7792

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4767** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 PANEETHA**  
Lecturer in PHYSICS  
BHAVITHA DEGREE COLLEGE BELLAMPALLY

Aadhar No: XXXX XXXX XXXX 6325

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4768** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 Y VISWAPATHI RAO**  
Lecturer in PHYSICS  
BHAVITHA DEGREE COLLEGE BELLAMPALLY  
Aadhar No: XXXX XXXX XXXX 2998

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4769** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 A SRINIVAS**  
Lecturer in PHYSICS  
SRI CHAITANYA DEGREE COLLEGE ASIFABAD  
Aadhar No: XXXX XXXX XXXX 7258

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4770** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 SAMALA SHIVA KUMAR**  
Lecturer in PHYSICS  
SHAARVANI DEGREE COLLEGE HANAMKONDA  
Aadhar No: XXXX XXXX XXXX 0680

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4772** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 RAMESH PILLI**  
Lecturer in PHYSICS  
VIKAS DEGREE COLLEGE MAHABUBABAD  
Aadhar No: XXXX XXXX XXXX 8619

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4771** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 BIKKI VENKATESHWARLU**  
Lecturer in PHYSICS  
VIKAS DEGREE COLLEGE MAHABUBABAD  
Aadhar No: XXXX XXXX XXXX 5383

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4773** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 K NARSIMHULU**  
Lecturer in PHYSICS  
R R MEMORIAL DEGREE COLLEGE JANGAON  
Aadhar No: XXXX XXXX XXXX 8209

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4774** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 B Divya**  
Lecturer in PHYSICS  
GANAPATHI DEGREE COLLEGE PARKAL  
Aadhar No: XXXX XXXX XXXX 4915

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4775** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 G VENKATESHWARLU**  
Lecturer in PHYSICS  
R J R M DEGREE COLLEGE MARIPEDA  
Aadhar No: XXXX XXXX XXXX 9410

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4776** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date & Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 PRATHAPURAM BHANUCHANDER**  
Lecturer in PHYSICS  
BHARATHI DEGREE COLLEGE WARDHANNAPET  
Aadhar No: XXXX XXXX XXXX 7926

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

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(**Examiner No.4777** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
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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 GANTA VINOD KUMAR**  
Lecturer in PHYSICS  
GEETHANJALI DEGREE COLLEGE FOR WOMEN  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 0111

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

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Appointment of Examiner - Reg..

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(**Examiner No.4778** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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6. The examiner should bring one stamp size photograph.
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To  
**Mr/Mrs NELLUTLA SUMAN**  
Lecturer in PHYSICS  
MAHARSHI DEGREE COLLEGE MULUGU  
Aadhar No: XXXX XXXX XXXX 0571

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

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(**Examiner No.4779** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 DHARAVATH RAMESH**  
Lecturer in PHYSICS  
NALANDA DEGREE COLLEGE MAHABUBABAD  
Aadhar No: XXXX XXXX XXXX 8395

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4780** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 RAVINDAR ADLA**  
Lecturer in PHYSICS  
R D WOMEN'S DEGREE COLLEGE  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 1579

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4781** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 VANAKUDOTHU KISHAN**  
Lecturer in PHYSICS  
SAMAIKYA DEGREE COLLEGE MAHABUBABAD  
Aadhar No: XXXX XXXX XXXX 4489

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4782** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 K KIRAN KUMAR**  
Lecturer in PHYSICS  
SANGAMITRA DEGREE COLLEGE  
BHUPALAPALLY

Aadhar No: XXXX XXXX XXXX 0786

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4783** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 SUNKARI DEVENDER**  
Lecturer in PHYSICS  
VAASAVI DEGREE COLLEGE BHUPALAPALLY  
Aadhar No: XXXX XXXX XXXX 1946

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4784** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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



To  
**Mr/Mrs GADIPE SATHISH**  
Lecturer in PHYSICS  
VIKAS DEGREE COLLEGE JANGAON

Aadhar No: XXXX XXXX XXXX 6563

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4785** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 B RAMESH**  
Lecturer in PHYSICS  
SAHITHI DEGREE COLLEGE OF ARTS & SCIENCE  
YELLANDU

Aadhar No: XXXX XXXX XXXX 9957

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4786** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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To  
**Mr/Mrs K.LACHHI REDDY**  
Lecturer in PHYSICS  
SCARED HEART ARTS & SCIENCE COLLEGE  
TALLAMPADU

Aadhar No: XXXX XXXX XXXX 8965

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4787** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 EESAM VISHNU**  
Lecturer in PHYSICS  
SNEHA DEGREE COLLEGE YELLANDU

Aadhar No: XXXX XXXX XXXX 3131

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4788** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 K SUDHEER KUMAR**  
Lecturer in PHYSICS  
GNANA SARASWATHI DEGREE COLLEGE  
NIRMAL

Aadhar No: XXXX XXXX XXXX 6161

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4790** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 ANGOOR MALLESH**  
Lecturer in PHYSICS  
CHANAKYA DEGREE COLLEGE NIRMAL  
Aadhar No: XXXX XXXX XXXX 2386

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4791** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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.
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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 C RAVINDHAR**  
Lecturer in PHYSICS  
CHANAKYA DEGREE COLLEGE NIRMAL

Aadhar No: XXXX XXXX XXXX 2940

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4789** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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2. Each examiner should value 30 scripts per session.
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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 N.VENU**  
Lecturer in PHYSICS  
CHANAKYA DEGREE COLLEGE NIRMAL  
Aadhar No: XXXX XXXX XXXX 2269

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4793** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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.
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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 N PURSHOTHAM**  
Lecturer in PHYSICS  
GOKULDAS PURUSHOTHAMDAS LADDA DEGREE  
COLLEGE BHAINSA

Aadhar No: XXXX XXXX XXXX 9462

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4794** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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.
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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 K TRIVENI**  
Lecturer in PHYSICS  
INDIRA WOMEN'S DEGREE COLLEGE SIRPUR  
KAGHAZNAGAR

Aadhar No: XXXX XXXX XXXX 4408

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4795** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 G MAHESH**  
Lecturer in PHYSICS  
NANDANA DEGREE COLLEGE NIRMAL  
Aadhar No: XXXX XXXX XXXX 8142

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4797** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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.
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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 SANJEEV KUMAR**  
Lecturer in PHYSICS  
VAAGDEVI ARTS & SCIENCE DEGREE COLLEGE  
BHUKTAPUR

Aadhar No: XXXX XXXX XXXX 3443

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4796** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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2. Each examiner should value 30 scripts per session.
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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 SANJEEV KUMAR**  
Lecturer in PHYSICS  
VAAGDEVI ARTS & SCIENCE DEGREE COLLEGE  
BHUKTAPUR

Aadhar No: XXXX XXXX XXXX 0119

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4798** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 CHATLA SATHISH KUMAR**  
Lecturer in PHYSICS  
VAAGDEVI DEGREE COLLEGE BOATH

Aadhar No: XXXX XXXX XXXX 7278

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4799** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 KASTULAPURI MAHENDAR**  
Lecturer in PHYSICS  
VIKAS DEGREE COLLEGE PONKAL  
Aadhar No: XXXX XXXX XXXX 7545

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4800** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 CH VENKATESH**  
Lecturer in PHYSICS  
VIKAS DEGREE COLLEGE PONKAL  
Aadhar No: XXXX XXXX XXXX 4536

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4802** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 P.SWAPNA**  
Lecturer in PHYSICS  
GOUTHAM DEGREE COLLEGE NAIMNAGAR  
Aadhar No: XXXX XXXX XXXX 9786

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4803** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 BOOSA ASHOK**  
Lecturer in PHYSICS  
VASUNDHARA DEGREE COLLEGE SIRPUR  
KAGHAZNAGAR

Aadhar No: XXXX XXXX XXXX 6536

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4804** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 MANGA GEETHANJALI**  
Lecturer in PHYSICS  
MAHARSHI DEGREE COLLEGE KESAMUDRAM  
Aadhar No: XXXX XXXX XXXX 5492

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4805** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 MANCHALA POCHANNA**  
Lecturer in PHYSICS  
VIVEKANNADA DEGREE COLLEGE ADILABAD  
Aadhar No: XXXX XXXX XXXX 3788

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4806** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 K SANTHOSH**  
Lecturer in PHYSICS  
KNR DEGREE COLLEGE KHANAPUR  
Aadhar No: XXXX XXXX XXXX 6508

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4807** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 SHEELAM PRABHAKAR**  
Lecturer in PHYSICS  
VISHWAS DEGREE COLLEGE PALAKURTHY  
Aadhar No: XXXX XXXX XXXX 4036

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4808** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 D BHASKAR**  
Lecturer in PHYSICS  
JALAGAM VENGAL RAO PRAGATHI DEGREE  
COLLEGE KUSUMANCHI

Aadhar No: XXXX XXXX XXXX 1192

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4810** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 JAMBULA SAIPRASAD**  
Lecturer in PHYSICS  
GEERVANI DEGREE COLLEGE MUDHOL  
Aadhar No: XXXX XXXX XXXX 6063

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4811** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 K SATISH**  
Lecturer in PHYSICS  
SWETHA DEGREE COLLEGE CHENNUR  
Aadhar No: XXXX XXXX XXXX 0560

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4812** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 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 DONIKALA NAVEEN**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE ETURUNAGARAM  
Aadhar No: XXXX XXXX XXXX 0183

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4813** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 Thippani Venkanna**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE THORRUR

Aadhar No: XXXX XXXX XXXX 3477

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4814** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 BALAMARTHI SURESH**  
Lecturer in PHYSICS  
SIDDARTHA DEGREE COLLEGE WYRA  
Aadhar No: XXXX XXXX XXXX 5139

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4815** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 B. Rajasekhar**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE RANGSHAIPET  
Aadhar No: XXXX XXXX XXXX 0824

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4816** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 T YALADRI**  
Lecturer in PHYSICS  
KRISTHU JYOTHI DEGREE COLLEGE  
REDDYGUDEM

Aadhar No: XXXX XXXX XXXX 3840

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4817** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 CH.SRINIVASA RAO**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE MARRIPEDA  
Aadhar No: XXXX XXXX XXXX 1746

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4818** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 MALLADI SOUJANYA**  
Lecturer in PHYSICS  
K S R MAHILA DEGREE COLLEGE NARSAMPET

Aadhar No:

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4819** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 VELDI UPENDHAR**  
Lecturer in PHYSICS  
SRI VIKAS DEGREE COLLEGE NEKKONDA  
Aadhar No: XXXX XXXX XXXX 5153

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4820** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 CH.SUNIL KUMAR**  
Lecturer in PHYSICS  
MATHRU SRI DEGREE COLLEGE FOR WOMEN  
BHEEMARAM

Aadhar No: XXXX XXXX XXXX 7289

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4821** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 P.MAHENDER**  
Lecturer in PHYSICS  
SRI SRI GAYATRI DEGREE COLLEGE NELLUTLA

Aadhar No: XXXX XXXX XXXX 6507

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4822** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 B.RAJU**  
Lecturer in PHYSICS  
SRI SRI GAYATRI DEGREE COLLEGE NELLUTLA

Aadhar No: XXXX XXXX XXXX 5621

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4823** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 K PRAVEENKUMAR**  
Lecturer in PHYSICS  
KANISHKA DEGREE COLLEGE FOR WOMEN  
BHEEMARAM

Aadhar No: XXXX XXXX XXXX 4755

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4824** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 BHIMPELly RAJENDAR**  
Lecturer in PHYSICS  
SUVIDYA DEGREE COLLEGE CHITYAL

Aadhar No: XXXX XXXX XXXX 9854

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4825** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 CHITTE KUMARASWAMY**  
Lecturer in PHYSICS  
SARAYU DEGREE COLLEGE GUDUR

Aadhar No: XXXX XXXX XXXX 4284

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4827** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 G.MAHESH**  
Lecturer in PHYSICS  
SRI TEJA DEGREE COLLEGE KOWTALA  
Aadhar No: XXXX XXXX XXXX 9766

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4828** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 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 KADARI LINGANNA**  
Lecturer in PHYSICS  
SAI CHAITHANYA DEGREE COLLEGE-NERADIGON  
DA

Aadhar No: XXXX XXXX XXXX 2612

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4829** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 VENKATESHAM ADETI**  
Lecturer in PHYSICS  
VIVEKANANDA DEGREE COLLEGE LUXEPETA  
Aadhar No: XXXX XXXX XXXX 8343

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4831** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date & Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 BUDIGE RAVINDRA GOUD**  
Lecturer in PHYSICS  
VASAVI DEGREE COLLEGE BHAYYARAM  
Aadhar No: XXXX XXXX XXXX 0426

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4832** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 muthyala suresh**  
Lecturer in PHYSICS  
KESHAVA DEGREE COLLEGE FOR WOMEN  
Aadhar No: XXXX XXXX XXXX 0044

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4833** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 SARAJANA SURESH**  
Lecturer in PHYSICS  
PADISHALA VEERABHADRAIAH MEMORIAL  
COLLEGE FOR WOMENS

Aadhar No: XXXX XXXX XXXX 6069

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4834** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 A PRAVEEN**  
Lecturer in PHYSICS  
SRI RAJA RAJESWARA DEGREE COLLEGE  
BAZARHATHNOOR

Aadhar No: XXXX XXXX XXXX 3926

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4863** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 B.VENKANNA**  
Lecturer in PHYSICS  
MAHARSHI DEGREE COLLEGE, B ALAJINAGAR,  
THORRUR

Aadhar No: XXXX XXXX XXXX 5569

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4864** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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

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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 L Jithender**  
Lecturer in PHYSICS  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 2045

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4859** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date & Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 D.Swarupa**  
Lecturer in PHYSICS  
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,  
WARANGAL(WEST)

Aadhar No: XXXX XXXX XXXX 2025

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4860** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 YADANDLA PARUSHARAMULU**  
Lecturer in PHYSICS  
EKASILA DEGREE COLLEGE, JANGAON  
Aadhar No: XXXX XXXX XXXX 8344

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

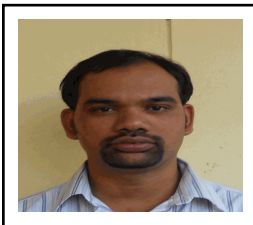
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4861** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 Poloju Madhukar**  
Lecturer in PHYSICS  
S V S DEG. & P.G.COLLEGE, VIDYARANYAPURI,  
HANAMKON

Aadhar No: XXXX XXXX XXXX 7841

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4862** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 JANAGAM SUNIL**  
Lecturer in PHYSICS  
S V S DEG. & P.G.COLLEGE, VIDYARANYAPURI,  
HANAMKON

Aadhar No: XXXX XXXX XXXX 6110

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4835** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 AKULA NARSIMHULU**  
Lecturer in PHYSICS  
Sri Vidya Degree College jangaon

Aadhar No: XXXX XXXX XXXX 3408

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4836** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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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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 K.SUDHEER KUMAR**  
Lecturer in PHYSICS  
Ekashila Degree College Mamada

Aadhar No: XXXX XXXX XXXX 6161

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4837** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 M.SURESH**  
Lecturer in PHYSICS  
Nethaji Degree College cherial

Aadhar No: XXXX XXXX XXXX 5173

**CONTROLLER OF EXAMINATIONS**

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4838** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 MEDAM BALAJI**  
Lecturer in PHYSICS  
Matrusri Degree College Asifabad

Aadhar No: XXXX XXXX XXXX 6737

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4839** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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

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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 BENDADI MAHESH**  
Lecturer in PHYSICS  
Excellent Degree College cherial  
Aadhar No: XXXX XXXX XXXX 1331

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4840** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 J.SAINATH**  
Lecturer in PHYSICS  
Sraddha Degree College mudhole  
Aadhar No: XXXX XXXX XXXX 5404

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4841** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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

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



To  
**Mr/Mrs P.RAVINDER REDDY**  
Lecturer in PHYSICS  
Sraddha Degree College mudhole

Aadhar No: XXXX XXXX XXXX 0017

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4843** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 RAPAKA NARESH**  
Lecturer in PHYSICS  
Sri Aurobindo Degree College Jangaon  
Aadhar No: XXXX XXXX XXXX 0626

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4844** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

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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 CHILUKOTI PUSHPA**  
Lecturer in PHYSICS  
Keerthana Degree College Bela

Aadhar No: XXXX XXXX XXXX 1147

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4846** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 R.SURENDAR**  
Lecturer in PHYSICS  
Avanthi Degree College Echoda

Aadhar No: XXXX XXXX XXXX 4676

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4847** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 GUGULOTHU YAKUB**  
Lecturer in PHYSICS  
Mathrusri Degree College Duggondi

Aadhar No: XXXX XXXX XXXX 3423

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
**(Examiner No.4848 )** for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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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 N ANITHA**  
Lecturer in PHYSICS  
GOVT. DEGREE COLLEGE WARDHANNAPET  
Aadhar No: XXXX XXXX XXXX 4914

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4850** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
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To  
**Mr/Mrs Thadaboina Shirisha**  
Lecturer in PHYSICS  
RESIDENTIAL DEGREE COLLEGES FOR WOMEN  
BHUPALPALLI

Aadhar No: XXXX XXXX XXXX 8858

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4851** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 E Thirumala**  
Lecturer in PHYSICS  
RESIDENTIAL DEGREE COLLEGES FOR WOMEN  
BHUPALPALLI

Aadhar No: XXXX XXXX XXXX 0379

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4853** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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 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 MAHENDER GADEELA**  
Lecturer in PHYSICS  
TELANGANA TRIBAL WELFARE R D C(BOYS)  
MARIPEDA

Aadhar No: XXXX XXXX XXXX 5179

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4854** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.**

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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 J Sathesh Goud**  
Lecturer in PHYSICS  
TELANGANA TRIBAL WELFARE R D C(BOYS)  
MARIPEDA

Aadhar No: XXXX XXXX XXXX 3515

**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.1500/Spot/Exams/KU/2020

Date: 21-Oct-2020

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - VI Semester Exams 2020 -OCT  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **PHYSICS**  
(**Examiner No.4855** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA VI Semester. -  
Semester Examinations, held in OCT 2020.

**Date &Time of commencement of Valuation: 21-Oct-2020, 02.00 pm to 06.00pm**  
**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.
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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 GANGAPURI SUNITHA**  
Lecturer in PHYSICS  
TELANGANA TRIBAL WELFARE R D C(GIRLS)  
BHADRADRI KOTHAGUDEM DISTRICT

Aadhar No: XXXX XXXX XXXX 0383

**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**