



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24421** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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 I ROHINI**  
Lecturer in COMMERCE  
A S C D M COLLEGE FOR WOMEN, FORT ROAD,  
WARANGAL

**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 **COMMERCE**  
(**Examiner No.24422** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs P. SUMAN**  
Lecturer in COMMERCE  
C K M ARTS & SCIENCE COLLEGE, DESAIPET,  
WARANGAL

**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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VALUATION CAMP.**



To  
**Mr/Mrs K.SWATHI**  
Lecturer in COMMERCE  
A S C D M COLLEGE FOR WOMEN, FORT ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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(**Examiner No.24424** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs KHUTEJA KUBRA**  
Lecturer in COMMERCE  
ISLAMIA ARTS & SCIENCE COLLEGE WARANGAL

**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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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24425** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs SWATHI MUKKA**  
Lecturer in COMMERCE  
MAHABOOBIA PANJETHAN DEG. COLLEGE,  
GORREKUNTA

**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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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24426** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs BANDI KIRANKUMAR**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE COLLEGE,  
BHEEMARAM

**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 **COMMERCE**  
(**Examiner No.24427** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs T. Shireesha**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,  
BHUPALPALLI

**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 **COMMERCE**  
(**Examiner No.24428** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs BOLLEPALLY RAJ KUMAR**  
Lecturer in COMMERCE  
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24429** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs REGULA THIRUPATHI**  
Lecturer in COMMERCE  
JAGRUTHI WOMENS DEGREE COLLEGE  
BHEEMARAM

**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 **COMMERCE**  
(**Examiner No.24430** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs POGAKULA VEERABHADRASWAMY**  
Lecturer in COMMERCE  
KESHAVA DEGREE COLLEGE FOR WOMEN  
BHEEMARAM

**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 **COMMERCE**  
(**Examiner No.24431** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs DR. A. SUNITHA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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(**Examiner No.24432** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs AYESHA SIDDIQUA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24433** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 Ragula Rajashekar**  
Lecturer in COMMERCE  
Sri Raja Rajeswari Degree College Jangaon

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24434** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 LALITHA SANGINENI**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24420** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 MANDA RAVI KUMAR**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24409** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 DR. VIKRAM VALMIKAM**  
Lecturer in COMMERCE  
S V S DEGREE & P.G.COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24410** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 T. AMITHA**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE COLLEGE,  
BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24411** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 GURRAM MALLAIAH**  
Lecturer in COMMERCE  
R R M DEGREE COLLEGE JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24412** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 KODIMALA SUDHEER**  
Lecturer in COMMERCE  
MATHRU SRI DEGREE COLLEGE FOR WOMEN,  
BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24413** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs MANCHINEELLA RAJENDER**  
Lecturer in COMMERCE  
SRI AUROBINDO DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24001** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.J.RAJEERU**  
Lecturer in COMMERCE  
KAKATIYA GOVT. COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24002** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.PAVANI GUDURU**  
Lecturer in COMMERCE  
KAKATIYA GOVT. COLLEGE, HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24003** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SARALA JHANSI RANI**  
Lecturer in COMMERCE  
KAKATIYA GOVT. COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24004** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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. LINGA REDDY**  
Lecturer in COMMERCE  
KAKATIYA GOVT. COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

\_\_\_\_\_  
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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24005** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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.
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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 DR.S.VINODAR RAO**  
Lecturer in COMMERCE  
KAKATIYA GOVT. COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24006** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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 SUJATHA GANGIDI**  
Lecturer in COMMERCE  
KAKATIYA GOVT. COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24007** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.SUCHITRA**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24008** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs G.SUNITHA**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24009** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs J.SUJATHA**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**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 **COMMERCE**  
(**Examiner No.24010** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs B.SHRUTHI**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24011** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs HINGE RAJESHWAR RAO**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

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(**Examiner No.24012** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs P.V.HARINI**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,  
WARANGAL

**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 **COMMERCE**  
(**Examiner No.24013** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs T ANURADHA**  
Lecturer in COMMERCE  
A S C D M COLLEGE FOR WOMEN, FORT ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24014** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs A VANISREE**  
Lecturer in COMMERCE  
A S C D M COLLEGE FOR WOMEN, FORT ROAD,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24015** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs GUDELLI THIRUMALES**  
Lecturer in COMMERCE  
A B V DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24016** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs NALLA ASHOK**  
Lecturer in COMMERCE  
A B V DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24017** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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 DR. VISHNU KUMAR BALOUVA**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24018** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DR. I. SHIVANAGASREENU**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24019** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DR SHEIK KAASIMSHAH**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24020** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 RAVITEJA**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, MAHABUBABAD

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24021** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DR.P.RAJIREDDY**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE FOR WOMEN,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24022** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DR. BOJJA SRIDEVI**  
Lecturer in COMMERCE  
SR ARTS & SCIENCE COLLEGE, KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24023** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DR.A.VENKATESWARLU**  
Lecturer in COMMERCE  
SR ARTS & SCIENCE COLLEGE, KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24024** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DR. T.KRISHNA RAO**  
Lecturer in COMMERCE  
J V R GOVT. COLLEGE, SATHUPALLY

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24025** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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.O CHENNARAO**  
Lecturer in COMMERCE  
J V R GOVT. COLLEGE, SATHUPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24026** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 DR.A.SARANGAPANI**  
Lecturer in COMMERCE  
J V R GOVT. COLLEGE, SATHUPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24027** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 NARENDER REDDY**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, BHADRACHALAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24028** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 CHANDRAKANTH**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE FOR WOMEN,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24029** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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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 G.MUKUND**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, CHENNUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24030** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 DR.M.SANTHOSH**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE., MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24031** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs J.SHANKARAI AH**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE., MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24032** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs RAFIQMOHMAD MOHD**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, BELLAMPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24033** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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. KAMPALLY SHANKER**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, BELLAMPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24034** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 M THIRUPATHI**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, BELLAMPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24035** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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VALUATION CAMP.**



To  
**Mr/Mrs P SARALADEVI**  
Lecturer in COMMERCE  
CITY MAHILA DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24036** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs PULYALA KUMARASWAMY**  
Lecturer in COMMERCE  
CITY MAHILA DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24037** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs NAYAKAPU CHAITANYA**  
Lecturer in COMMERCE  
CITY MAHILA DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24038** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs GODDETI KALYANI**  
Lecturer in COMMERCE  
A V V DEGREE COLLEGE, MATEWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24039** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
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VALUATION CAMP.**



To  
**Mr/Mrs BHAVANI KANKANALA**  
Lecturer in COMMERCE  
A V V DEGREE COLLEGE, MATEWADA,  
WARANGAL

**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.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24040** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.NAGINENI SRAVANTHI**  
Lecturer in COMMERCE  
A V V DEGREE COLLEGE, MATEWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24041** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact 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 Y.ARCHANA**  
Lecturer in COMMERCE  
A V V DEGREE COLLEGE, MATEWADA,  
WARANGAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24042** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 THOTA RAVINDER**  
Lecturer in COMMERCE  
A V V DEGREE COLLEGE, MATEWADA,  
WARANGAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24043** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR.J.VENUGOPAL**  
Lecturer in COMMERCE  
A V V DEGREE COLLEGE, MATEWADA,  
WARANGAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24044** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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.
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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 SURENDRA KUMAR**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, YELLANDU

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24045** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 RAMBABU KOTAGIRI**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, PALONCHA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24046** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs PARELLI SREENIVAS**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, PALONCHA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24047** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR. V. VANITHA KUMARI**  
Lecturer in COMMERCE  
SRI ARUNODAYA DEGREE & P.G.COLLEGE,  
HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24048** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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. LINGALA SUDHAKAR**  
Lecturer in COMMERCE  
SRI ARUNODAYA DEGREE & P.G.COLLEGE,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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---

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24049** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 M.SANTHOSHA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24050** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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. GOUTHAMI REDDY**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24051** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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.KALPANA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24052** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 RAJA VEMULA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24053** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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Identity Card to the CE's before joining the spot valuation camp.
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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.P.SANDYA RANI**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24054** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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.RAJESHWAR**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24055** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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Identity Card to the CE's before joining the spot valuation camp.
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs G.HARIKRISHNA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24056** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs M.VENUGOPAL**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24057** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs C DATTATREYULU**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24058** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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.SURYA CHANDRA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24059** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SARATHA VASUKULA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24060** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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6. The examiner should bring one stamp size photograph.
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To  
**Mr/Mrs K.UMA RANI**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24061** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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To  
**Mr/Mrs GUGULOTH LAXMAN**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24062** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs K NARENDER**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24063** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
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VALUATION CAMP.**



To  
**Mr/Mrs B GAYATRI**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

\_\_\_\_\_  
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**Signature**



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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24064** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 K SUPRIYA**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24065** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 CHANDRAMOULI**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24066** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 NAGARAJU**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24067** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 RAKESH**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24068** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 NARENDER Y**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24069** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 BAIRI KRISHNAMURTHY**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24070** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs GUDIKANDULA SRINIVAS**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24071** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs RENUKUNTLA SRIKANTH**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24072** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs SANDHYA AGARWAL**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24073** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 VASUDEV**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24074** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
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VALUATION CAMP.**



To  
**Mr/Mrs T SRINIVAS**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24075** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs J ASHOK**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24076** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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 SANTHOSH KUMAR**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24077** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SRINIVAS**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24078** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 B ANURADHA**  
Lecturer in COMMERCE  
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

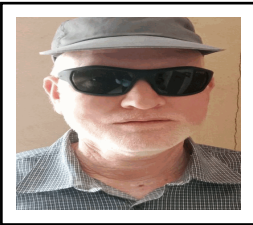
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24079** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SK YOUSUFUDDIN**  
Lecturer in COMMERCE  
VIGNANA BHARATHI DEGREE COLLEGE,  
MAHABUBABAD

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24080** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 JAGATI VENKATAMALLU**  
Lecturer in COMMERCE  
VIGNANA BHARATHI DEGREE COLLEGE,  
MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24081** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 RADHIKA**  
Lecturer in COMMERCE  
EKASILA DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24082** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs SENIGARAPU NARESH**  
Lecturer in COMMERCE  
EKASILA DEGREE COLLEGE, JANGAON

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24083** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs PAKALA VINOD KUMAR**  
Lecturer in COMMERCE  
EKASILA DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24084** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs K.S.B. PADMAVATHI**  
Lecturer in COMMERCE  
EKASILA DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24085** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs B.DIVYA**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24086** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.SATEESH KUMAR**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24087** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs GATLA NAGARAJU**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24088** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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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.
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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 BOLESHA.MOHD**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

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(**Examiner No.24089** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs M.NEELAKAR**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

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(**Examiner No.24090** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs K.RAJU**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**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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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24091** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs B.RAMANADEVI**  
Lecturer in COMMERCE  
NEW SCIENCE DEGREE COLLEGE, HUNTER  
ROAD, HNK

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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ORDERS

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Appointment of Examiner - Reg..

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(**Examiner No.24092** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs T.SUNITHA**  
Lecturer in COMMERCE  
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24093** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs R.PRATHYUSHA**  
Lecturer in COMMERCE  
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24094** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs B.LATHA**  
Lecturer in COMMERCE  
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24095** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs K.RAJU**  
Lecturer in COMMERCE  
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24096** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs D.MADHU BABU**  
Lecturer in COMMERCE  
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.  
GHANPUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24097** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs MOHAMMAD ABDUL SALMAN**  
Lecturer in COMMERCE  
DR M R REDDY DEGREE COLLEGE, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24098** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs GORRA ANITHA**  
Lecturer in COMMERCE  
DR M R REDDY DEGREE COLLEGE, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24099** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs RASHEED AHMED PASHA**  
Lecturer in COMMERCE  
DR M R REDDY DEGREE COLLEGE, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24100** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact 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 G VENKATA RAO**  
Lecturer in COMMERCE  
KAVITHA DEGREE & PG COLLEGE, NEAR RTA  
OFF. KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24101** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 PULLURU VENKANNA BABU**  
Lecturer in COMMERCE  
KAVITHA DEGREE & PG COLLEGE, NEAR RTA  
OFF. KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24102** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 A GAYATHRI**  
Lecturer in COMMERCE  
KAVITHA DEGREE & PG COLLEGE, NEAR RTA  
OFF. KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24103** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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Identity Card to the CE's before joining the spot valuation camp.
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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 PRAMEELA**  
Lecturer in COMMERCE  
KAVITHA DEGREE & PG COLLEGE, NEAR RTA  
OFF. KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24104** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 MEDARABOINA SURESH KUMAR**  
Lecturer in COMMERCE  
KAVITHA DEGREE & PG COLLEGE, NEAR RTA  
OFF. KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24105** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs KANDUKURI RAJESH**  
Lecturer in COMMERCE  
BBM VARI GAYATRI DEG. & P.G.COLLEGE,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24106** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
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VALUATION CAMP.**



To  
**Mr/Mrs YERADESHI RAMANJANEYULU**  
Lecturer in COMMERCE  
BBM VARI GAYATRI DEG. & P.G.COLLEGE,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24107** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs GANGARAPU VEERABHADRA RAO**  
Lecturer in COMMERCE  
BBM VARI GAYATRI DEG. & P.G.COLLEGE,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24108** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs KANDUKURI NAGENDER**  
Lecturer in COMMERCE  
VIKAS DEGREE COLLEGE, STATION ROAD,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24109** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 BANOTHU BHADRU**  
Lecturer in COMMERCE  
VIKAS DEGREE COLLEGE, STATION ROAD,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24110** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 THATTUKOLLA RAMESH**  
Lecturer in COMMERCE  
GEETAM S DEGREE & PG COLLEGE,  
SATHUPALLY

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24111** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs MADIRAJU VASUDEVARAO**  
Lecturer in COMMERCE  
GEETAM S DEGREE & PG COLLEGE,  
SATHUPALLY

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24112** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 SHAIK YUSUB VALI**  
Lecturer in COMMERCE  
KAKATIYA DEGREE COLEGE, SATHUPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24113** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 SRINIVASA CHARI**  
Lecturer in COMMERCE  
KAKATIYA DEGREE COLEGE, SATHUPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24114** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 GANGARAPU THIRUPATHI**  
Lecturer in COMMERCE  
MANCHERIAL VIDYANIKETAN DEGREE COLLEGE,  
MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24115** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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Identity Card to the CE's before joining the spot valuation camp.
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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. SATHEESH**  
Lecturer in COMMERCE  
AURORA DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24116** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 KANDIKONDA ASHOK**  
Lecturer in COMMERCE  
AURORA DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24117** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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. KAVITHA**  
Lecturer in COMMERCE  
AURORA DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24118** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SUNCHU SOUJANYA**  
Lecturer in COMMERCE  
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24119** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs M JANARDHAN**  
Lecturer in COMMERCE  
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24120** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs RAJINI SYAMALA**  
Lecturer in COMMERCE  
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24121** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs K. NAGARAJU**  
Lecturer in COMMERCE  
KAKATIYA MAHILA DEGREE COLLEGE,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24122** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SUMALATHA**  
Lecturer in COMMERCE  
MAHABOOBIA PANJETHAN DEG. COLLEGE,  
GORREKUNTA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24123** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SALEEM AKTAR SHAREEF**  
Lecturer in COMMERCE  
MAHABOOBIA PANJETHAN DEG. COLLEGE,  
GORREKUNTA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24124** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 FAHEEM AZHAR**  
Lecturer in COMMERCE  
MAHABOOBIA PANJETHAN DEG. COLLEGE,  
GORREKUNTA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24125** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
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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.
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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 MOHAMMED RABBANI**  
Lecturer in COMMERCE  
MAHABOOBIA PANJETHAN DEG. COLLEGE,  
GORREKUNTA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24126** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 MOHAMMAD KHADEER ALI**  
Lecturer in COMMERCE  
MAHABOOBIA PANJETHAN DEG. COLLEGE,  
GORREKUNTA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24127** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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.
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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 RAJAMOULI.GUDA**  
Lecturer in COMMERCE  
SAMATHA DEGREE COLLEGE, THORRUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24128** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 KONDA SRINIVAS**  
Lecturer in COMMERCE  
SAMATHA DEGREE COLLEGE, THORRUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24129** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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.SANTHOSH KUMAR**  
Lecturer in COMMERCE  
SAMATHA DEGREE COLLEGE, THORRUR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24130** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 NOOKALA SHIVAJI**  
Lecturer in COMMERCE  
D R S DEGREE & P.G.COLLEGE, MAMILLAGUDEM,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24131** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 COMMERCE  
D R S DEGREE & P.G.COLLEGE, MAMILLAGUDEM,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24132** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 S J CHANDRA SHEKHAR**  
Lecturer in COMMERCE  
D R S DEGREE & P.G.COLLEGE, MAMILLAGUDEM,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24133** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 RAMPALLI KAMESWARA SHARMA**  
Lecturer in COMMERCE  
PRIYADARSHINI DEG. & P.G.COLLEGE, NST  
ROAD, KHAMMA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24134** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 PARIGADUPU PRASAD**  
Lecturer in COMMERCE  
PRATHIBHA DEGREE COLLEGE, KALLURU

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24135** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 VENU GOPAL**  
Lecturer in COMMERCE  
PRIYADARSHINI DEGREE COLLEGE,  
KOTHAGUDEM

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24136** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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



To  
**Mr/Mrs K HYMAVATHI**  
Lecturer in COMMERCE  
PRIYADARSHINI DEGREE COLLEGE,  
KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24137** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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 SD RAFI**  
Lecturer in COMMERCE  
PRIYADARSHINI DEGREE COLLEGE,  
KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24138** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.ASHOK**  
Lecturer in COMMERCE  
JESUS MARY JOSEPH COLLEGE FOR WOMEN,  
KARUNAPURAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24139** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs RAJENDRAPRASAD MEKALA**  
Lecturer in COMMERCE  
JESUS MARY JOSEPH COLLEGE FOR WOMEN,  
KARUNAPURAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24140** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs RAMESH BHUKYA**  
Lecturer in COMMERCE  
DR.R J REDDY COLLEGE OF HIGHER EDN.,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24141** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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VALUATION CAMP.**



To  
**Mr/Mrs P VENKATA REDDY**  
Lecturer in COMMERCE  
DR.R J REDDY COLLEGE OF HIGHER EDN.,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24142** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs GOPINENI NARASIMHA RAO**  
Lecturer in COMMERCE  
NAVA BHARAT DEGREE COLLEGE, SATHUPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24143** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs RESHMA**  
Lecturer in COMMERCE  
C V RAMAN DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24144** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs BANDI RAVINDER**  
Lecturer in COMMERCE  
C V RAMAN DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24145** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 NANUVALA MALLESH**  
Lecturer in COMMERCE  
C V RAMAN DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24146** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 DEVARAKONDA MADUNAIAH**  
Lecturer in COMMERCE  
C V RAMAN DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24147** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SRIPALLY SUSHMA**  
Lecturer in COMMERCE  
SRI GAYATHRI DEG.COLLEGE,MULUGU X ROAD,  
HANAMKON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24148** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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VALUATION CAMP.**



To  
**Mr/Mrs MOHD ABDUL ALEEM**  
Lecturer in COMMERCE  
SRI GAYATHRI DEG.COLLEGE,MULUGU X ROAD,  
HANAMKON

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

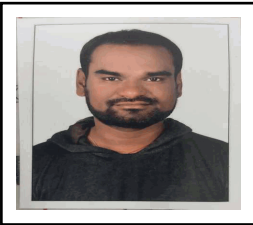
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24149** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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VALUATION CAMP.**



To  
**Mr/Mrs P.CHANDRASHEKAR**  
Lecturer in COMMERCE  
S V G DEGREE COLLEGE, LAXMAN CHANDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24150** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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VALUATION CAMP.**



To  
**Mr/Mrs MUDIGONDA LAKSHMIKANTHA**  
Lecturer in COMMERCE  
VKDVS DEGREE COLLEGE, ASWARAOPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24151** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 GORREPATI V SATYANARAYANA**  
Lecturer in COMMERCE  
VKDVS DEGREE COLLEGE, ASWARAOPET

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

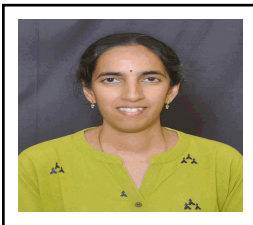
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24152** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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VALUATION CAMP.**



To  
**Mr/Mrs R DEEPTHI**  
Lecturer in COMMERCE  
SRI SAI DEGREE COLLEGE, BHADRACHALAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24153** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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VALUATION CAMP.**



To  
**Mr/Mrs PULUSU CHANDRA RAO**  
Lecturer in COMMERCE  
SRI SAI DEGREE COLLEGE, BHADRACHALAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24154** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs CH RAVI**  
Lecturer in COMMERCE  
VASHISHTA DEGREE COLLEGE, MANJULAPUR(V),  
NIRMAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24155** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs T KANTHA RAO**  
Lecturer in COMMERCE  
VASHISHTA DEGREE COLLEGE, MANJULAPUR(V),  
NIRMAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24156** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs B.CHIRANJEEVI**  
Lecturer in COMMERCE  
VIVEKAVARDHINI DEGREE COLLEGE,  
MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24157** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs MUDAM SANDHYA**  
Lecturer in COMMERCE  
VIVEKAVARDHINI DEGREE COLLEGE,  
MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24158** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs VANGALA VAMSHI KRISHNA**  
Lecturer in COMMERCE  
NALANDA DEGREE COLLEGE , MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24159** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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 JAGATI VIJAYKUMAR**  
Lecturer in COMMERCE  
NALANDA DEGREE COLLEGE , MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24160** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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 GOPALA PADMAJA**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24161** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 THANGELLA PALLI PADMA**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24162** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 P SATISH KUMAR**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE, KOTHAWADA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24163** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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.
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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 ALLADI MAHESHWER RAO**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE, KOTHAWADA,  
WARANGAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24164** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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.
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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 GADDAM PRASHANTH**  
Lecturer in COMMERCE  
SRI CHAITANYA DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24165** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 HARIKRISHNA CHIRRA**  
Lecturer in COMMERCE  
S V DEGREE COLLEGE, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24166** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 GOLLAPALLY SOUJANYA**  
Lecturer in COMMERCE  
VASAVI DEGREE COLLEGE, MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24167** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 KOLA THIRUPATHI**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE  
COLLEGE,BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24168** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 RACHA RAMESH**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE  
COLLEGE,BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24169** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 THOTA RADHIKA**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE  
COLLEGE,BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24170** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 VODELA RAJENDRAPRASAD**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE  
COLLEGE,BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24171** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 JAKKULA YAKANTHAM**  
Lecturer in COMMERCE  
SRI CHAITANYA WOMEN'S DEGREE  
COLLEGE,BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24172** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.SHRAVAN KUMAR**  
Lecturer in COMMERCE  
VIDYARTHI DEGREE COLLEGE,  
RAVINDRANAGAR, ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24173** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 BANDI PRASAD**  
Lecturer in COMMERCE  
MANCHERIAL INST. OF MATHEMATICAL  
SCIENCES, MANCHER

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24174** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 KUDIRE SUMALATHA**  
Lecturer in COMMERCE  
MANCHERIAL INST. OF MATHEMATICAL  
SCIENCES, MANCHER

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24175** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 SANDINAVENA DAMODHAR**  
Lecturer in COMMERCE  
MANCHERIAL INST. OF MATHEMATICAL  
SCIENCES, MANCHER

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24176** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 SURA SRINIVAS**  
Lecturer in COMMERCE  
MANCHERIAL INST. OF MATHEMATICAL  
SCIENCES, MANCHER

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24177** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs SK KAMAR PASHA**  
Lecturer in COMMERCE  
KRISHNAVENI SAAHITHI DEGREE COLLEGE,  
LAKSHMIDEVIPALLY, KOTH

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24178** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs D SRIDHAR**  
Lecturer in COMMERCE  
KRISHNAVENI SAAHITHI DEGREE COLLEGE,  
LAKSHMIDEVIPALLY, KOTH

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24179** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 KANNARAO**  
Lecturer in COMMERCE  
BHAVITHA DEGREE COLLEGE, BELLAMPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24180** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 RAJANIKANTH OLLALA**  
Lecturer in COMMERCE  
BHAVITHA DEGREE COLLEGE, BELLAMPALLY

**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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24181** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 GAJULA CHANDRASHEKAR**  
Lecturer in COMMERCE  
SRI CHAITANYA DEGREE COLLEGE, ASIFABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24182** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 VENNAM RAVINDER REDDY**  
Lecturer in COMMERCE  
SRI CHAITANYA DEGREE COLLEGE, ASIFABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24183** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 BOINAPALLY SUDHEER KUMAR**  
Lecturer in COMMERCE  
SHAARVANI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24184** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 BOPPA DIVYA**  
Lecturer in COMMERCE  
SHAARVANI DEGREE COLLEGE, KISHANPURA,  
HANAMKONDA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24185** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 MORRI SANTHOSH**  
Lecturer in COMMERCE  
BHADRUKA DEGREE COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24186** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 AFREEN SULTHANA**  
Lecturer in COMMERCE  
BHADRUKA DEGREE COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24187** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 AVANTHI.T**  
Lecturer in COMMERCE  
BHADRUKA DEGREE COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24188** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 AMBATI SANDEEP RAJU**  
Lecturer in COMMERCE  
BHADRUKA DEGREE COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24189** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 SIDDOJU NARSIMHA MANOJ**  
Lecturer in COMMERCE  
BHADRUKA DEGREE COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24190** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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 ASMA**  
Lecturer in COMMERCE  
BHADRUKA DEGREE COLLEGE, HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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---

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24191** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 V DHANUNJIAH**  
Lecturer in COMMERCE  
GANAPATHI DEGREE COLLEGE, MAHADEVPUR  
ROAD, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24192** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 J RAJENDER RAO**  
Lecturer in COMMERCE  
GANAPATHI DEGREE COLLEGE, MAHADEVPUR  
ROAD, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24193** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 PATHI BANOTH**  
Lecturer in COMMERCE  
R J R M DEGREE COLLEGE, MARIPEDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24194** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MD JAVID PASHA**  
Lecturer in COMMERCE  
ACHARYA DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24195** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 ARREM NAGARAJU**  
Lecturer in COMMERCE  
ACHARYA DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24196** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 SREERAMOJU ASHOK**  
Lecturer in COMMERCE  
ACHARYA DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24197** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 SHANKAPPELLY KANAKA CHARY**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE,  
WSARDHANNAPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24198** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SRINIVASULU MUNUKUNTLA**  
Lecturer in COMMERCE  
BHARATHI DEGREE COLLEGE,  
WSARDHANNAPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24199** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 LASANI SURESH**  
Lecturer in COMMERCE  
GEETHANJALI DEGREE COLLEGE FOR WOMEN,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24200** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 BLAXMIKANTHA RAO**  
Lecturer in COMMERCE  
GEETHANJALI DEGREE COLLEGE FOR WOMEN,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24201** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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Identity Card to the CE's before joining the spot valuation camp.
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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 VALURI RAMA RAO**  
Lecturer in COMMERCE  
GEETHANJALI DEGREE COLLEGE FOR WOMEN,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24202** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs THOTA SRINIVAS**  
Lecturer in COMMERCE  
GEETHANJALI DEGREE COLLEGE FOR WOMEN,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24203** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 GATLA SREEPAL REDDY**  
Lecturer in COMMERCE  
NALANDA DEGREE COLLEGE, MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24204** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MD GOUSE PASHA**  
Lecturer in COMMERCE  
NALANDA DEGREE COLLEGE, MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24205** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MERUGU RAMESH**  
Lecturer in COMMERCE  
NALANDA DEGREE COLLEGE, MAHABUBABAD

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24206** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 JYOTHI BOINI**  
Lecturer in COMMERCE  
R D WOMEN'S DEGREE COLLEGE,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24207** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 DR. V. NAVEEN**  
Lecturer in COMMERCE  
R D WOMEN'S DEGREE COLLEGE,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24208** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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 LAVIDYA SURENDER CHOWHAN**  
Lecturer in COMMERCE  
R D WOMEN'S DEGREE COLLEGE,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24209** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 NAGARAJU VEMULA**  
Lecturer in COMMERCE  
SAMAIKYA DEGREE COLLEGE, MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24210** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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 NAGAPURI PRAVEEN**  
Lecturer in COMMERCE  
SANGAMITRA DEGREE COLLEGE,  
BHUPALAPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24211** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 T ANAND KUMAR**  
Lecturer in COMMERCE  
SANGAMITRA DEGREE COLLEGE,  
BHUPALAPALLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24212** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 KADHIREM MAHESH**  
Lecturer in COMMERCE  
VIKAS DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24213** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 MUKKA VIJAY KUMAR**  
Lecturer in COMMERCE  
VIKAS DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24214** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 GADDAM MANOJ KUMAR**  
Lecturer in COMMERCE  
VIKAS DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24215** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 B.SATYANARAYANA**  
Lecturer in COMMERCE  
MOTHER TERESA DEGREE COLLEGE,  
BHADRACHALAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24216** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.S.VIJAYA KUMARI**  
Lecturer in COMMERCE  
MOTHER TERESA DEGREE COLLEGE,  
BHADRACHALAM

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24217** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 NARESH**  
Lecturer in COMMERCE  
SAHITHI DEGREE COLLEGE OF ARTS & SCIENCE,  
YELLANDU

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24218** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 CHERUKOORI VEERENDAR**  
Lecturer in COMMERCE  
SAHITHI DEGREE COLLEGE OF ARTS & SCIENCE,  
YELLANDU

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24219** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 K. VENKATESWARLU**  
Lecturer in COMMERCE  
SCARED HEART ARTS & SCIENCE COLLEGE,  
TALLAMPADU

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24220** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 E. SATYANARAYANA**  
Lecturer in COMMERCE  
SCARED HEART ARTS & SCIENCE COLLEGE,  
TALLAMPADU

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24221** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 G SHIRISHA**  
Lecturer in COMMERCE  
SNEHA DEGREE COLLEGE, YELLANDU

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24222** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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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Identity Card to the CE's before joining the spot valuation camp.
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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 NARESH**  
Lecturer in COMMERCE  
SNEHA DEGREE COLLEGE, YELLANDU

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24223** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 MUDHULKER SOMESHWER**  
Lecturer in COMMERCE  
CHANAKYA DEGREE COLLEGE, NIRMAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24224** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 SUMANMALA G**  
Lecturer in COMMERCE  
DEEKSHA DEGREE COLLEGE, NIRMAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24225** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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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.
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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 B SAI PRIYA SINGH**  
Lecturer in COMMERCE  
DEEKSHA DEGREE COLLEGE, NIRMAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24226** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 MAHESH KUMAR**  
Lecturer in COMMERCE  
DEEKSHA DEGREE COLLEGE, NIRMAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24227** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 KASAWAR SATISH**  
Lecturer in COMMERCE  
KRISHNAVENI DEGREE COLLEGE, VIDYANAGAR,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24228** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 PANDENA GOVARDHAN**  
Lecturer in COMMERCE  
VAAGDEVI ARTS & SCIENCE DEGREE COLLEGE,  
BHUKTAPUR,

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24229** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 A PRASAD**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, BOATH

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24230** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 J DEEPA**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, BOATH

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24231** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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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.
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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 DUGUTA CHANDRA SHEKAR**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

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(**Examiner No.24232** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs MARAM SANTHOSH KUMAR**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, MANCHERIAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

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(**Examiner No.24233** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs BANDI NARESH**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24234** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs BODA PRABHUDAYAL**  
Lecturer in COMMERCE  
VAAGDEVI DEGREE COLLEGE, MANCHERIAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24235** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs G.JYOTHI**  
Lecturer in COMMERCE  
VASUNDHARA DEGREE COLLEGE, SIRPUR  
KAGHAZNAGAR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24236** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 K RAMESH**  
Lecturer in COMMERCE  
VASUNDHARA DEGREE COLLEGE, SIRPUR  
KAGHAZNAGAR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24237** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs V SRINIVAS**  
Lecturer in COMMERCE  
VASUNDHARA DEGREE COLLEGE, SIRPUR  
KAGHAZNAGAR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24238** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs KATHULA VASANTHA**  
Lecturer in COMMERCE  
MAHARSHI DEGREE COLLEGE, PALAKURTHI

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24239** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs BASHAKARLA SURESH**  
Lecturer in COMMERCE  
MAHARSHI DEGREE COLLEGE, PALAKURTHI

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24240** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs THODENGALA RAJU**  
Lecturer in COMMERCE  
VISHWAS DEGREE COLLEGE, RAJEEV  
CHOWRASTHA, PALKURT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24241** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs BHOOKYA MANGULAL**  
Lecturer in COMMERCE  
JALAGAM VENGAL RAO PRAGATHI DEGREE  
COLLEGE, KUSUMA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

---

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24242** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 GUGULOTH ANIL**  
Lecturer in COMMERCE  
NIRMAL HRIDAY DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24243** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 RATAKULA SWAPANA RANI**  
Lecturer in COMMERCE  
NIRMAL HRIDAY DEGREE COLLEGE

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24244** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 K.SAI SAMATHA**  
Lecturer in COMMERCE  
NIRMAL HRIDAY DEGREE COLLEGE

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24245** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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.
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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 BASANI RAMESH**  
Lecturer in COMMERCE  
S R R V K R M DEGREE COLLEGE,  
VENKATAPURAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24246** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 DANDIGA RAMAKRISHNA**  
Lecturer in COMMERCE  
GEERVANI DEGREE COLLEGE, MUDHOL,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24247** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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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 G SHESHAIAH**  
Lecturer in COMMERCE  
SRI PULAJI BABA DEGREE COLLEGE, IB CHOWK,  
UTNOOR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24248** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 T GANESH SINGH**  
Lecturer in COMMERCE  
VASAVI DEGREE COLLEGE, (V)KALLUR, (M)  
KUNTALA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24249** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 SIRIMAN MAHENDHAR**  
Lecturer in COMMERCE  
VASAVI DEGREE COLLEGE, (V)KALLUR, (M)  
KUNTALA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24250** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 DR. J. CHINNA**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, ETURUNAGARAM,  
WGL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24251** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR.B.RENUKA**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, ETURUNAGARAM,  
WGL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24252** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 KANDURI NARESH**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, CHERIAL, WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24253** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 K SRINIVAS**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, CHERIAL, WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24254** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo  
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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. A. ANIL KUMAR**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, PARKAL, WARANGAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24255** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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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 DR R SUNIL**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, THORRUR,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24256** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 RADHIKA SINGARAPU**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, THORRUR,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24257** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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

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Identity Card to the CE's before joining the spot valuation camp.
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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 MAGULURU MADHAVI**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, NELAKONDAPALLY,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24258** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 NANNAKA MADHAVA RAO**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, NELAKONDAPALLY,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24259** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 BODDUPELLI RAVINDAR**  
Lecturer in COMMERCE  
GOVT. DEGREEE COLLEGE, LUXETTIPET,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24260** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 JADI MALLAIAH**  
Lecturer in COMMERCE  
GOVT. DEGREEE COLLEGE, LUXETTIPET,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24261** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 GOPU KAVITHA**  
Lecturer in COMMERCE  
GOVT. DEGREEE COLLEGE, LUXETTIPET,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24262** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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VALUATION CAMP.**



To  
**Mr/Mrs THALLAPALLY RAYALINGU**  
Lecturer in COMMERCE  
GOVT. DEGREEE COLLEGE, LUXETTIPET,  
ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24263** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 DR M. SOMAIAH**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, RANGSHAIPET,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24264** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 T SRINIVASULU**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, RANGSHAIPET,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24265** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 RAJAMOULI**  
Lecturer in COMMERCE  
S S DEGREE COLLEGE, DHARMARAM,  
GEESUGONDA(M) WARAN

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24266** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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.VENKATAREDDY**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, MARRIPEDA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24267** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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 MANIMIKANTI VEERANNA**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, MARRIPEDA,  
WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24268** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 KUNDE PRABHAKAR**  
Lecturer in COMMERCE  
BALAJI MAHILA DEGREE COLLEGE, NARSAMPET

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24269** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 KOPPULA SHESHU**  
Lecturer in COMMERCE  
BALAJI MAHILA DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24270** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 BOLLA RAVINDER**  
Lecturer in COMMERCE  
BALAJI MAHILA DEGREE COLLEGE, NARSAMPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

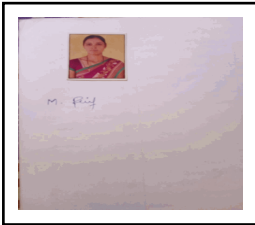
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24271** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MADDI RAJITHA**  
Lecturer in COMMERCE  
VIVEKAVARDHANI DEGREE COLLEGE, GUNDALA,  
KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24272** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs M.MADHU GOUD**  
Lecturer in COMMERCE  
VEDHANIDHI DEGREE COLLEGE,  
LOKESHWARAM, ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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---

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24273** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs GUNDA SINDUBAI**  
Lecturer in COMMERCE  
VIVEKANANDA DEGREE COLLEGE, SIRPUR  
KAGAZNAGAR, BORIGAON SHIVARU, ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24274** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 RAVULA VENKATALAXMI**  
Lecturer in COMMERCE  
VIVEKANANDA DEGREE COLLEGE, SIRPUR  
KAGAZNAGAR, BORIGAON SHIVARU, ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24275** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 CHATE RUKMAJI**  
Lecturer in COMMERCE  
CRESCENT DEGREE COLLEGE, INDRAVELLY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24276** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 BALAJI**  
Lecturer in COMMERCE  
CRESCENT DEGREE COLLEGE, INDRAVELLY

**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.1264/Spot/Exams/KU/2024

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24277** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs PALAGANI RAMESH**  
Lecturer in COMMERCE  
REBBENA ART & SCIENCE DEGREE COLLEGE,  
REBBENA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24278** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact 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.
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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. SIREESHA**  
Lecturer in COMMERCE  
MATHRU SRI DEGREE COLLEGE FOR WOMEN,  
BHEEMARAM

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24279** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs KODIMALA SUDHEER**  
Lecturer in COMMERCE  
MATHRU SRI DEGREE COLLEGE FOR WOMEN,  
BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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\_\_\_\_\_

**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24280** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs G BHAVANI**  
Lecturer in COMMERCE  
SRI SRI GAYATRI DEGREE COLLEGE, NELLUTLA,  
LINGALA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24281** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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



To  
**Mr/Mrs MACHARALA CHANDRAMOULI**  
Lecturer in COMMERCE  
SRI SRI GAYATRI DEGREE COLLEGE, NELLUTLA,  
LINGALA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24282** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 SHAGA ANJANEYULU**  
Lecturer in COMMERCE  
SRI SRI GAYATRI DEGREE COLLEGE, NELLUTLA,  
LINGALA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24283** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 PRAVEEN KUMAR**  
Lecturer in COMMERCE  
KANISHKA DEGREE COLLEGE FOR WOMEN,  
BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24284** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs K PAVAN KUMAR**  
Lecturer in COMMERCE  
KANISHKA DEGREE COLLEGE FOR WOMEN,  
BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24285** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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VALUATION CAMP.**



To  
**Mr/Mrs DR SURESH P**  
Lecturer in COMMERCE  
KANISHKA DEGREE COLLEGE FOR WOMEN,  
BHEEMARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24286** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs MOHAMMED SAMDHANPASHA**  
Lecturer in COMMERCE  
SUVIDYA DEGREE COLLEGE, CHITYAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24287** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs S UMA MAHESWARA RAO**  
Lecturer in COMMERCE  
SREENIDHI DEGREE COLLEGE, MADHIRA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24288** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs T. BHASKAR**  
Lecturer in COMMERCE  
SREENIDHI DEGREE COLLEGE, MADHIRA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24289** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs PIPRE VINESH KUMAR**  
Lecturer in COMMERCE  
SRI CHAITANYA DEGREE COLLEGE, 3-17 MAIN  
ROAD,KOWTA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24290** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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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 SANGA KIRAN KUMAR**  
Lecturer in COMMERCE  
SRI CHAITANYA DEGREE COLLEGE, 3-17 MAIN  
ROAD,KOWTA

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24291** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 PERUGU PRAVEEN**  
Lecturer in COMMERCE  
SRI CHAITANYA DEGREE COLLEGE, 3-17 MAIN  
ROAD,KOWTA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24292** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 AZMEERA BANDAR RAO**  
Lecturer in COMMERCE  
VIGNAN DEGREE COLLEGE, KAREPALLY, KMM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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---

**Signature**





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

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24293** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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 CHANDA VENKATARAMANA**  
Lecturer in COMMERCE  
VAAGESHWARI DEGREE COLLEGE, UTHKOOR

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24294** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 KANDULA KAMALAKAR**  
Lecturer in COMMERCE  
VAAGESHWARI DEGREE COLLEGE, UTHKOOR

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24295** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 ALLAM SAI RAM**  
Lecturer in COMMERCE  
SAI CHAITHANYA DEGREE  
COLLEGE-NERADIGONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24296** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 FAHEEMA KHANUM**  
Lecturer in COMMERCE  
SRI HARSHA DEGREE COLLEGE, BELLAMPALLI  
MANCHIRYAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24297** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 ODIPELLI THIRUPATHI**  
Lecturer in COMMERCE  
SRI HARSHA DEGREE COLLEGE,BELLAMPALLI  
MANCHIRYAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24298** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 N SATHANNA**  
Lecturer in COMMERCE  
SRI HARSHA DEGREE COLLEGE, BELLAMPALLI  
MANCHIRYAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24299** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 UYYALA SAMMAIAH**  
Lecturer in COMMERCE  
SRI HARSHA DEGREE COLLEGE, BELLAMPALLI  
MANCHIRYAL

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24300** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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 YATA RAMESH**  
Lecturer in COMMERCE  
SRI HARSHA DEGREE COLLEGE, BELLAMPALLI  
MANCHIRYAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24301** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 KAMERA RAJAM**  
Lecturer in COMMERCE  
AZMARA REKHA SHYAM DEGREE COLLEGE  
JANNARAM ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24302** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
following:

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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 ITHANABOINA SAHADEV**  
Lecturer in COMMERCE  
VASAVI DEGREE COLLEGE ,BHAYYARAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24303** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
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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 BANOTHU RAMESH**  
Lecturer in COMMERCE  
KESHAVA DEGREE COLLEGE FOR WOMEN

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24304** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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 ADLA THIRUPATHI**  
Lecturer in COMMERCE  
KESHAVA DEGREE COLLEGE FOR WOMEN

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24305** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 PELLAKURI SWARUPA RANI**  
Lecturer in COMMERCE  
PADISHALA VEERABHADRAIAH MEMORIAL  
COLLEGE FOR WOMENS

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24306** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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 PETLOJU VANI DEVI**  
Lecturer in COMMERCE  
PADISHALA VEERABHADRAIAH MEMORIAL  
COLLEGE FOR WOMENS

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
\_\_\_\_\_

**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24307** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
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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 KAMINDLA VEERABHADRA PRASAD**  
Lecturer in COMMERCE  
SRI SRI VEERABADRASWAMY DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24308** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 VANGURI SUDHAKUMAR**  
Lecturer in COMMERCE  
SRI SRI VEERABADRASWAMY DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24309** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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 CHITAYALA NARESH**  
Lecturer in COMMERCE  
JAGRUTHI WOMEN'S DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24310** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 H SRIKANTH**  
Lecturer in COMMERCE  
JAGRUTHI WOMEN'S DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24311** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 AKINAPALLY CHIRANJEEVI**  
Lecturer in COMMERCE  
JAGRUTHI WOMEN'S DEGREE COLLEGE

**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  
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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24312** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 KRISHNA MOHAN ITHA**  
Lecturer in COMMERCE  
KAKATIYA DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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---

**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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ORDERS

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24313** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs VALLALA SANDHYA RANI**  
Lecturer in COMMERCE  
KAKATIYA DEGREE COLLEGE

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24314** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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 KAPLAI SHRAVAN KUMAR**  
Lecturer in COMMERCE  
PADMAVATHI DEGREE COLLEGE

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24315** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 METKAR MARUTHI**  
Lecturer in COMMERCE  
PADMAVATHI DEGREE COLLEGE BAZAR  
HATHNOOR ADILABAD

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24316** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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.RAJASHEKHAR**  
Lecturer in COMMERCE  
Chaitanya Degree College,Mangapeta,Warangal

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24317** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 V.BHAVANI**  
Lecturer in COMMERCE  
Chaitanya Degree College,Mangapeta,Warangal

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24318** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 ARUGULA RAJESHWAR**  
Lecturer in COMMERCE  
Vedhatraya Degree College,Dilwarpur,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24319** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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.
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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 MANTHRI PRASAD**  
Lecturer in COMMERCE  
Matrusri Degree College,Asifabad,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

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Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24320** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 JANGIDI SAICHARAN**  
Lecturer in COMMERCE  
Matrusri Degree College,Asifabad,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24321** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs POTTA KRISHNA**  
Lecturer in COMMERCE  
Matrusri Degree College,Asifabad,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24322** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 KARNALA ANIL KUMAR**  
Lecturer in COMMERCE  
Kakatiya Degree  
College,myaderipet,Dandepally,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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\_\_\_\_\_

**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24323** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 ROKATI PARAMESHWAR**  
Lecturer in COMMERCE  
Sri Raja Rajeswari Degree College,jangaon,warangal

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24324** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MEKALA UPPALAI AH**  
Lecturer in COMMERCE  
Sri Raja Rajeswari Degree College,jangaon,warangal

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24325** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MAMIDALA RAJASHEKAR**  
Lecturer in COMMERCE  
Sri Raja Rajeswari Degree College,jangaon,warangal

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24326** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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 MANTHENA SOUNDARYA**  
Lecturer in COMMERCE  
Keerthana Degree College,Bela,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

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VALUATION CAMP.**



To  
**Mr/Mrs A SATISH REDDY**  
Lecturer in COMMERCE  
S.R Degree College, Khanapur, Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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VALUATION CAMP.**



To  
**Mr/Mrs M MEENA**  
Lecturer in COMMERCE  
Sai Samath Degree College,Echoda,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

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(**Examiner No.24329** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SANTENNA**  
Lecturer in COMMERCE  
Kakatiya Degree College, Echoda, Adilabad

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24330** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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 MAHENDAR**  
Lecturer in COMMERCE  
Mathrusri Degree College,Duggondi ,Warangal

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24331** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 THOTA PRASAD**  
Lecturer in COMMERCE  
Azmeera Rekha Syam(ARS) Degree  
College,Khanapur,Adilabad

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24332** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs MD ALIMPASHA**  
Lecturer in COMMERCE  
Sahithi Degree College,jangaon,Warangal

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24333** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs DR N SREENIVAS**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, WARDHANNAPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24334** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs BAIRI. SRINIVAS**  
Lecturer in COMMERCE  
GOVT. DEGREE COLLEGE, WARDHANNAPET

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24335** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs KONGARI ANDALU**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(EAST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24336** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs GOTTE ROOPA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(EAST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

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Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24337** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs SHABANA BEGUM**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(EAST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24338** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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 M ARCHANA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(WEST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24339** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 INUGALA RADHIKA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(WEST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24340** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR.N.SABITHA DEVI**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(WEST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24341** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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Identity Card to the CE's before joining the spot valuation camp.
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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.SHAILAJA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,WARANGAL(WEST)

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24342** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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VALUATION CAMP.**



To  
**Mr/Mrs GARINEPAALY JYOTHI**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,BHUPALPALLI

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24343** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs S.JALAJA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,BHUPALPALLI

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24344** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs T.ANUSHA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,BHUPALPALLI

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24345** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs DR. AMENA KHATOON**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24346** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 V.SURYALAXMI**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KHAMMAM

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24347** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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Identity Card to the CE's before joining the spot valuation camp.
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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.S.N.SANGEETHA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24348** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 SIGMA TEENA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24349** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.V.L.N.RATNAMALA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24350** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact 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 MOHAMMAD. BUSHRA AFREEN**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24351** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs DR D VIJAYASHANTHI**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,KOTHAGUDEM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24352** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 BOLLA PRIYANKA**  
Lecturer in COMMERCE  
RESIDENTIAL DEGREE COLLEGES FOR  
WOMEN,ADILABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24353** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 ANUSHA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(BOYS),  
BOATH, ADILABAD DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24354** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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 V GANESH**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
UTNOOR, ADILABAD DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24355** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 P.RAJITHA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
ASIFABAD, KOMURAMBHEEM ASIFABAD  
DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24356** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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.
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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 MOHAMMAD. AZRA SHAREEN**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
ASIFABAD, KOMURAMBHEEM ASIFABAD  
DISTRICT

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24357** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 MALYALA.VANAJA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
ASIFABAD, KOMURAMBHEEM ASIFABAD  
DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24358** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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.SRIDEVI**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
MAHABUBABAD DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24359** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.DIVYA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
MAHABUBABAD DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24360** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 PATHURI YAKUB**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(BOYS),  
MARIPEDA, MAHABUBABAD DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24361** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue: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 ORUGONDA RAJKUMAR**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(BOYS),  
MARIPEDA, MAHABUBABAD DISTRICT

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24362** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 GADDAMEEDHI DHANRAJ**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(BOYS),  
MARIPEDA, MAHABUBABAD DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24363** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 GOPU PRATHYUSHA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
JANGAON DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24364** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 G.VIJAYA LAXMI**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
MULUGU DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24365** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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.
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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 BHUKYA HIMABINDU**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
BHADRADRI KOTHAGUDEM DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24366** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 DASARI SUSMITHA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
BHADRADRI KOTHAGUDEM DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24367** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 MEKALA SHIVA NARMADA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
BHADRADRI KOTHAGUEM DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24368** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 PAKALAPATI NIKHITHA**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(GIRLS),  
BHADRADRI KOTHAGUEM DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24369** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MOHAMMAD SADHIK**  
Lecturer in COMMERCE  
TELANGANA TRIBAL WELFARE R D C(BOYS),  
MNGRU, BHADRADRI KOTHAGUDEM DISTRICT

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24370** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 MANTHRI ASHOK**  
Lecturer in COMMERCE  
SHIVANI DEGREE COLLEGE,BHEEMARAM,WGL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24371** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 N SANJEEV**  
Lecturer in COMMERCE  
SHIVANI DEGREE COLLEGE,BHEEMARAM,WGL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24372** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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.
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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.PRASHANTH**  
Lecturer in COMMERCE  
MJPTBCW, RESIDENTIAL DEGREE  
COLLEGE,PALAKURTHY

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24373** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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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 B.SRILAXMI**  
Lecturer in COMMERCE  
MJPTBCW, RESIDENTIAL DEGREE  
COLLEGE,KHAMMAM

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24374** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs Dr. S. Suresh**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24375** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs Dr. B. Prasad**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24376** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
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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. Swamy Shada**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
\_\_\_\_\_

**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24377** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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Identity Card to the CE's before joining the spot valuation camp.
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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. M. Kanakaiah**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24378** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs Dr. A. Sunitha**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24379** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 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 Dr. K. Sai Sharan**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24380** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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. Mayuri Srivatsava**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
\_\_\_\_\_

**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24381** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs Dr. B. Srinivas**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24382** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 Mrs. J. Rajini**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24383** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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. K. Somashekhar**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24384** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs Dr. A. Suresh**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24385** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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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.
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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs Dr. M. Giri Prasad**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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To  
**Mr/Mrs Dr. K. Phanindra Kumar**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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**Address**

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VALUATION CAMP.**



To  
**Mr/Mrs Dr. B. Pragathi**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24388** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs Dr. K. Niranjan Srinivas**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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**Address**

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**Signature**





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Date: 15-Jan-2025

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24389** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To  
**Mr/Mrs Dr. O. Ravinder**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24390** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To  
**Mr/Mrs Dr. E. Raju**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24391** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs Dr. B. Ramadevi**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24392** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs Dr. D. Narendra Naik**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24393** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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To  
**Mr/Mrs Dr. V. Saritha**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24394** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
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To  
**Mr/Mrs Dr. T. Gopi**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24395** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs Mrs. V. Iaxmiharitha**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24396** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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VALUATION CAMP.**



To  
**Mr/Mrs Mr. Verrana**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
\_\_\_\_\_

**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24397** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact 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 Dr. N. Ravi babu**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24398** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 AJMEERA RAMESH**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA HNK

**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.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24399** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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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 Dr. B. Narsimha Naik**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24400** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 Dr. K. Bhagyalaxmi**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
\_\_\_\_\_

**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24401** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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**Venue:Examination Branch, Kakatiya University, Warangal.**

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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
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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 Dr. K. Preethi**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

\_\_\_\_\_  
\_\_\_\_\_

**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24402** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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2. Each examiner should value 30 scripts per session.
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Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on  
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN  
VALUATION CAMP.**



To  
**Mr/Mrs Dr. Jyosthna**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24403** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 Mrs. B. Sumalatha**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24404** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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6. The examiner should bring one stamp size photograph.
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To  
**Mr/Mrs Dr. D. Veena**  
Lecturer in COMMERCE  
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,  
HANAMKONDA

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

---

---

**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

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**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24405** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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 SANKATALA VEERANNA**  
Lecturer in COMMERCE  
VIKAS DEGREE COLLEGE MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24406** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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Identity Card to the CE's before joining the spot valuation camp.
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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 Battu Uppalaiah**  
Lecturer in COMMERCE  
NALANDA DEGREE COLLEGE, MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24407** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
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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 JANGLI SREEDHAR**  
Lecturer in COMMERCE  
S V DEGREE COLLEGE, PARKAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24408** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

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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. SATHISH**  
Lecturer in COMMERCE  
VASAVI DEGREE COLLEGE MAHABUBABAD

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24414** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact  
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 CH. RAJU**  
Lecturer in COMMERCE  
LAL BAHADUR COLLEGE, WARANGAL

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24415** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 G. MAHENDAR**  
Lecturer in COMMERCE  
SRI AUROBINDO DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24416** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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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 T. KUMAR**  
Lecturer in COMMERCE  
R R M DEGREE COLLEGE JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24417** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 K. DEVA**  
Lecturer in COMMERCE  
R R M DEGREE COLLEGE JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**





OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

**STRICTLY CONFIDENTIAL**

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24418** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue: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 B. RAJESH**  
Lecturer in COMMERCE  
SRI AUROBINDO DEGREE COLLEGE, JANGAON

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

My relative is appearing/not appearing for this examination. I accept/do not accept the assignment.

**Address**

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**Signature**



OFFICE OF THE CONTROLLER OF EXAMINATIONS  
KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 15-Jan-2025

STRICTLY CONFIDENTIAL

**ORDERS**

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **COMMERCE**  
(**Examiner No.24419** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester  
Examinations, held in NOV- 2024.

**Date &Time of commencement of Valuation: 15-Jan-2025, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the  
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4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo  
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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 ARSHIYA SULTANA**  
Lecturer in COMMERCE  
ISLAMIA ARTS & SCIENCE COLLEGE WARANGAL

**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**