



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18171**) for the 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: 19-Dec-2024, 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 GAMPA SOUJANYA
Lecturer in MATHS
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



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(**Examiner No.18172**) for the 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. NAGA RAJU
Lecturer in MATHS
C K M ARTS & SCIENCE COLLEGE, DESAIPET,
WARANGAL

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(**Examiner No.18173**) 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.HYMA
Lecturer in MATHS
VIDYA JYOTHI DEG.&P.G.COLLEGE, STN.
GHANPUR

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To
Mr/Mrs DR. R. MANJULA
Lecturer in MATHS
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,
HANAMKONDA

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To
Mr/Mrs DR.T. NAGAI AH
Lecturer in MATHS
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,
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To
Mr/Mrs DR BONALA MADHAVI
Lecturer in MATHS
GOVT. PINGLE COLL. FOR WOMEN,
WADDEPALLY

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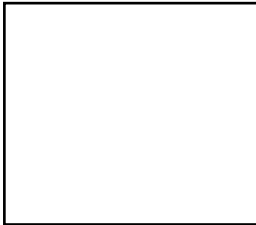
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To
Mr/Mrs DR.B.PRABHAKAR
Lecturer in MATHS
KAKATIYA GOVT. COLLEGE, HANAMKONDA

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To
Mr/Mrs DR.D.VENKATESH
Lecturer in MATHS
KAKATIYA GOVT. COLLEGE, HANAMKONDA

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To
Mr/Mrs M.RADHIKA
Lecturer in MATHS
KAKATIYA GOVT. COLLEGE, HANAMKONDA

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To
Mr/Mrs B.RAJINI
Lecturer in MATHS
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,
WARANGAL

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To
Mr/Mrs SATHISH KUMAR S
Lecturer in MATHS
LAL BAHADUR COLLEGE, NEAR MULUG ROAD,
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To
Mr/Mrs T NARAHARI
Lecturer in MATHS
GOVT. DEGREE COLLEGE, MAHABUBABAD

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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.SREELATHA
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18011**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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To
Mr/Mrs PALLA SRINIVAS
Lecturer in MATHS
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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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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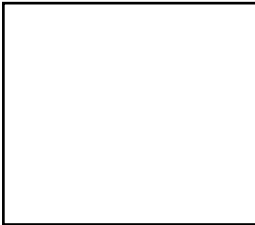
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18012**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs KATTA RAMESH
Lecturer in MATHS
GOVT. DEGREE COLLEGE, 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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18013**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs M.GNANESHWER
Lecturer in MATHS
GOVT. DEGREE COLLEGE, ADILABAD

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18014**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs SWAPNA NOOLLA
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18015**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs CH.SRINIVAS
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18016**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs B KALPANA
Lecturer in MATHS
G R P GOVT. DEGREE COLLEGE, BHAINSA

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18017**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs B NARESH
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18018**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs MULKALA RAMESH
Lecturer in MATHS
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



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I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18019**) for the 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 BOINI RAMBABU
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18020**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs K.SUNITHA
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18021**) for the 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 NAGAVELLI RUCHITHA
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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

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I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18022**) for the 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 LAXMI NARASIMHA RAO
Lecturer in MATHS
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

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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 **MATHS**
(**Examiner No.18023**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact
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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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 SRAVANTHI VAJRA
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

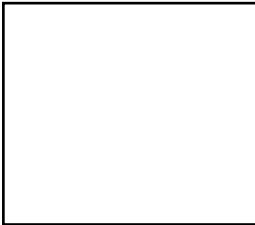
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18024**) for the 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: 19-Dec-2024, 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 B.SANDHYA RANI
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18025**) for the 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: 19-Dec-2024, 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.RAMA
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18162**) for the 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: 19-Dec-2024, 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. T. SREE LAKSHMI
Lecturer in MATHS
UNIV. ARTS & SCIENCE 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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18026**) for the 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: 19-Dec-2024, 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 MD. YAKOOB PASHA
Lecturer in MATHS
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: 19-Dec-2024

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ORDERS

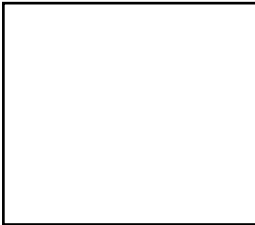
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18027**) for the 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: 19-Dec-2024, 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 THATIKONDA VENKATESH
Lecturer in MATHS
S V S DEG. & P.G.COLLEGE, VIDYARANYAPURI,
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

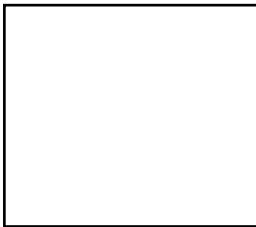
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18028**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs P. THIRUPATHAIAH
Lecturer in MATHS
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

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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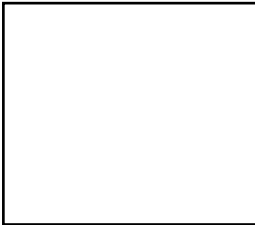
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18029**) for the 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 ANUMULA SAHITHI
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18030**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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To
Mr/Mrs B SURESH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18031**) for the 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: 19-Dec-2024, 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 P.SRINIVASA RAO
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18032**) for the 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 SAYYED NASEEMA
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18033**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs GORAPADU SHANTHA KUMAR
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18034**) for the 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: 19-Dec-2024, 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 KANDULA RAMESH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

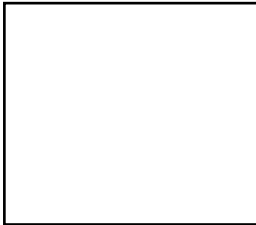
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18035**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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To
Mr/Mrs K.CHAKRAVARTHI
Lecturer in MATHS
NATIONAL DEGRE COLLEGE, PALONCHA

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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

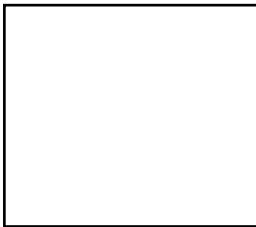
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18036**) for the 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: 19-Dec-2024, 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 SOYAM RAMBABU
Lecturer in MATHS
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



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18037**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs NADAKUDURU JAYALAKSHMI
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18038**) for the 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 P RADHA SHIREESHA
Lecturer in MATHS
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,
WARANGAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18039**) for the 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 B. MAHENDAR
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18040**) for the 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 B NAGARAJU
Lecturer in MATHS
D R S DEGREE & P.G.COLLEGE, MAMILLAGUDEM,
KHAMMAM

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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 **MATHS**
(**Examiner No.18041**) for the 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 JYOTHI ANIKA
Lecturer in MATHS
D R S DEGREE & P.G.COLLEGE, MAMILLAGUDEM,
KHAMMAM

CONTROLLER OF EXAMINATIONS

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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 **MATHS**
(**Examiner No.18042**) for the 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 NAGESWAR RAO
Lecturer in MATHS
D R S DEGREE & P.G.COLLEGE, MAMILLAGUDEM,
KHAMMAM

CONTROLLER OF EXAMINATIONS

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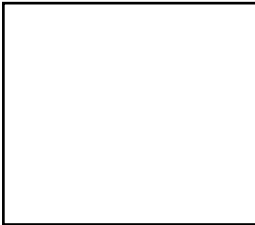
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18043**) for the 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 KUMARA SWAMY
Lecturer in MATHS
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



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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 **MATHS**
(**Examiner No.18044**) for the 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 MADHURI
Lecturer in MATHS
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



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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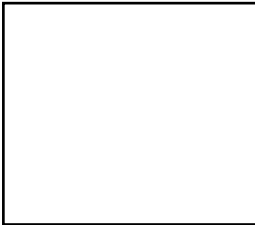
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18045**) for the 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 SK MAHMOODA
Lecturer in MATHS
PRIYADARSHINI DEGREE COLLEGE,
KOTHAGUDEM

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18046**) for the 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 PRAGATHI
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18047**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs KUMMARIKUNTLA VEERABABU
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18048**) for the 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 SAMBARU VENKATESWARA RAO
Lecturer in MATHS
NAVA BHARAT DEGREE COLLEGE, SATHUPALLY

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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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 **MATHS**
(**Examiner No.18049**) for the 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 SRINIVAS DUMPATI
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18050**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs K PRASHANTH
Lecturer in MATHS
NALANDA DEGREE COLLEGE, OPP.BUS STAND
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

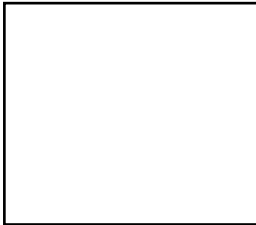
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18051**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs R BHANU CHANDER
Lecturer in MATHS
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



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

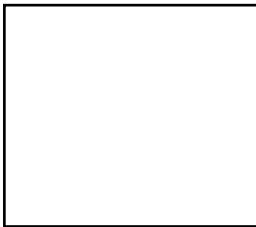
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18052**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs T.SWAPNA
Lecturer in MATHS
S V G DEGREE COLLEGE, LAXMAN CHANDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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ORDERS

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Appointment of Examiner - Reg..

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(**Examiner No.18053**) for the 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 NALAJALA RAVINDRA
Lecturer in MATHS
VKDVS DEGREE COLLEGE, ASWARAOPET

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

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 **MATHS**
(**Examiner No.18054**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs B. BALAJI SINGH
Lecturer in MATHS
SRI SAI DEGREE COLLEGE, BHADRACHALAM

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18055**) for the 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 SHASHIDHAR
Lecturer in MATHS
VASHISHTA DEGREE COLLEGE, MANJULAPUR(V),
NIRMAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18056**) for the 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 SRINIVAS
Lecturer in MATHS
VIVEKAVARDHINI DEGREE COLLEGE,
MANCHERIAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18057**) for the 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 SHAIK KARIMULLA BABA
Lecturer in MATHS
SRI VIDYA DEGREE COLLEGE, MANUGURU

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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Appointment of Examiner - Reg..

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(**Examiner No.18058**) for the 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 SYED ISMAIL ALI
Lecturer in MATHS
GOUTHAMI DEGREE COLLEGE, SHANTHI NAGAR,
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18059**) for the 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: 19-Dec-2024, 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 PREMENDAR.A
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18060**) for the 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: 19-Dec-2024, 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 RAVIKUMAR.N
Lecturer in MATHS
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

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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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 **MATHS**
(**Examiner No.18061**) for the 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: 19-Dec-2024, 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 VENKAT RAM REDDY.C
Lecturer in MATHS
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

Signature



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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 **MATHS**
(**Examiner No.18062**) for the 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
Lecturer in MATHS
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: 19-Dec-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 **MATHS**
(**Examiner No.18063**) for the 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 OLLALA ODELU
Lecturer in MATHS
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



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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.18064**) 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 THATIPAMULA SAMMAIAH
Lecturer in MATHS
MANCHERIAL INST. OF MATHEMATICAL
SCIENCES, MANCHER

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18065**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs CH MALLESHWARI
Lecturer in MATHS
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



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No.1264/Spot/Exams/KU/2024

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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 **MATHS**
(**Examiner No.18066**) for the 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 VIJAYKANTH
Lecturer in MATHS
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

Signature



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18067**) for the 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 KATTAGONI RAJESH
Lecturer in MATHS
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



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18068**) for the 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 MERUGU UGENDHAR
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18069**) for the 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 SRINIVAS YERRAM
Lecturer in MATHS
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.

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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 **MATHS**
(**Examiner No.18070**) for the 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 THIPPANI RAMESH
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18071**) 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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5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs NAREDLA SANJAY KUMAR
Lecturer in MATHS
MAHARSHI DEGREE COLLEGE, MULUGU

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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18072**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs SUVARNA BUDATI
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18073**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs BANOTHU BHASKAR
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18074**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs BANOTHU BHASKAR
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18075**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs S RAJASHEKAR
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18076**) for the 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: 19-Dec-2024, 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 NARADASU LAVANYA
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18077**) for the 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: 19-Dec-2024, 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 M.BHANU KUMARI
Lecturer in MATHS
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: 19-Dec-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 **MATHS**
(**Examiner No.18078**) for the 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: 19-Dec-2024, 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 CHERUKURI RAMESH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18079**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs B. NAGALAXMI
Lecturer in MATHS
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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18080**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs KUNA SRIKANTH
Lecturer in MATHS
GNANA SARASWATHI 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



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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 **MATHS**
(**Examiner No.18081**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs DYAVARASHETTY NAVEEN KUMAR
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18082**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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To
Mr/Mrs D UMA RANI
Lecturer in MATHS
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

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ORDERS

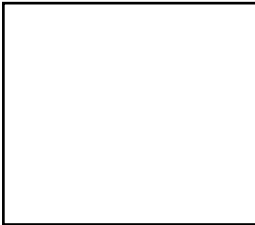
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18083**) for the 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 PRAVEEN PATIL
Lecturer in MATHS
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

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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 **MATHS**
(**Examiner No.18084**) for the 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: 19-Dec-2024, 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 JADAV AKASH
Lecturer in MATHS
GOKULDAS PURUSHOTHAMDAS LADDA DEGREE
COLLEGE, BHAI

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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18085**) for the 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.DAYAKAR
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18086**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs KEERTHI DAYAKER
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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..

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(**Examiner No.18087**) for the 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 SATHYANARAYANA REDDY
Lecturer in MATHS
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: 19-Dec-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 **MATHS**
(**Examiner No.18088**) for the 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 NARESH SUDHI
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18089**) for the 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 GANGARAJA GOUD
Lecturer in MATHS
VIKAS DEGREE COLLEGE, PONKAL, JANNARAM

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: 19-Dec-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 **MATHS**
(**Examiner No.18090**) for the 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 DUMPALA RAMESH
Lecturer in MATHS
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



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

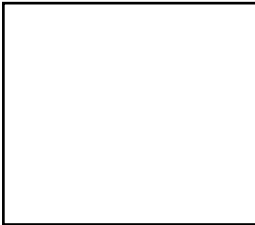
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18091**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs RAPARTHI RAJKUMAR
Lecturer in MATHS
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: 19-Dec-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 **MATHS**
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Examinations, held in NOV- 2024.

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To
Mr/Mrs B RAMESH
Lecturer in MATHS
VASUNDHARA DEGREE COLLEGE, SIRPUR
KAGHAZNAGAR

CONTROLLER OF EXAMINATIONS

DECLARATION

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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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ORDERS

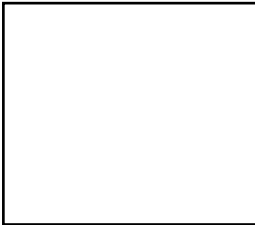
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18093**) for the 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 RAJENDRA R.NIRATKAR
Lecturer in MATHS
VASUNDHARA DEGREE COLLEGE, SIRPUR
KAGHAZNAGAR

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18094**) for the 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 JONGONI MOUNIKA
Lecturer in MATHS
KNR 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

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 **MATHS**
(**Examiner No.18095**) for the 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 ALLAGADAPA NARESH
Lecturer in MATHS
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

Signature



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

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ORDERS

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Appointment of Examiner - Reg..

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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 GANDERLA NAGESWARA RAO
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18097**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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To
Mr/Mrs A GANGADHAR
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18098**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs P VINAYAK REDDY
Lecturer in MATHS
SRI PULAJI BABA DEGREE COLLEGE, IB CHOWK,
UTNOOR

CONTROLLER OF EXAMINATIONS

DECLARATION

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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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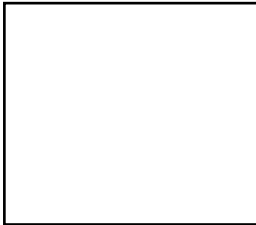
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18099**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs M SRINIVAS
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18100**) for the 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.P.JYOTHI
Lecturer in MATHS
GOVT. DEGREE COLLEGE, ETURUNAGARAM,
WGL

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

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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 **MATHS**
(**Examiner No.18101**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs DR P SRINIVASA REDDY
Lecturer in MATHS
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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18102**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs KODAPARTHI RAJITHA
Lecturer in MATHS
GOVT. DEGREE COLLEGE, THORRUR,
WARANGAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

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 **MATHS**
(**Examiner No.18103**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs BODDU NARESH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18104**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs DR.T.GANGAIAH
Lecturer in MATHS
GOVT. DEGREEE COLLEGE, LUXETTIPET,
ADILABAD

CONTROLLER OF EXAMINATIONS

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(**Examiner No.18105**) for the 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 R RUDRANI
Lecturer in MATHS
GOVT. DEGREE COLLEGE, RANGSHAIPET,
WARANGAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18106**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs AMBATI ANANTH KUMAR
Lecturer in MATHS
BALAJI MAHILA DEGREE COLLEGE, NARSAMPET

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18107**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs KELLAPU VISHNU MURTHY
Lecturer in MATHS
BALAJI MAHILA DEGREE COLLEGE, NARSAMPET

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18108**) for the 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.RAVINDHER
Lecturer in MATHS
VEDHANIDHI DEGREE COLLEGE,
LOKESHWARAM, ADILABAD

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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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 **MATHS**
(**Examiner No.18109**) for the 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: 19-Dec-2024, 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 KOSARI VENKATESH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18110**) for the 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 PEDDULU
Lecturer in MATHS
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

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

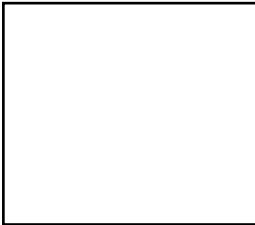
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18111**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs AZEEM PASHA
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18112**) for the 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 CHALLA NARSAIAH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18113**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs G SRIKANTH
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

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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 **MATHS**
(**Examiner No.18114**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs PASULA THIRUPATHAIAH
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18115**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs A. JYOTHI
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

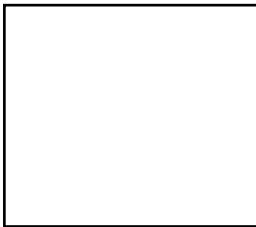
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18116**) for the 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 CHUNARKAR MAHESHWARI
Lecturer in MATHS
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



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

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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 **MATHS**
(**Examiner No.18117**) for the 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 CHEEMALADARI UPENDRAIAH
Lecturer in MATHS
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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No.1264/Spot/Exams/KU/2024

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(**Examiner No.18118**) 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 P.SRIDHAR
Lecturer in MATHS
VAAGESHWARI DEGREE COLLEGE, UTHKOOR

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18119**) for the 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 VUSIKELA KARTHEEK
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18120**) for the 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 BODAKUNTI RAJESHWAR
Lecturer in MATHS
EKALAVYA DEGREE COLLEGE

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18121**) for the 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 KASTURI SATHISH KUMAR
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18122**) for the 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: 19-Dec-2024, 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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VALUATION CAMP.**



To
Mr/Mrs PILLALA MALLIKHARJUNRAO
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18123**) for the 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: 19-Dec-2024, 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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VALUATION CAMP.**



To
Mr/Mrs CHILUVERU SRIDHAR
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18124**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs RUDROJU PAVANKUMAR
Lecturer in MATHS
KAKATIYA DEGREE COLLEGE

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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

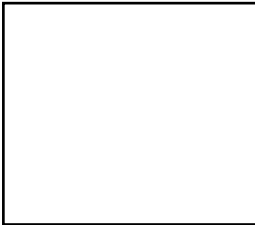
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18125**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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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 MALYALA KAVITHA
Lecturer in MATHS
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



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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 **MATHS**
(**Examiner No.18126**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs G SARASWATHI
Lecturer in MATHS
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



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

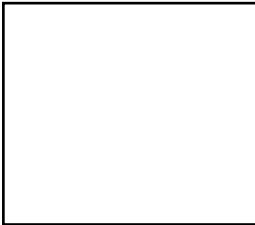
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18127**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs SRI RAMULA LAXMI NARAYANA
Lecturer in MATHS
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

Signature



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No.1264/Spot/Exams/KU/2024

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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 **MATHS**
(**Examiner No.18128**) for the 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 SAI KUMAR
Lecturer in MATHS
Matrusri Degree College,Asifabad,Adilabad

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

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ORDERS

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Appointment of Examiner - Reg..

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(**Examiner No.18129**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs UTLA MADHUSUDHAN
Lecturer in MATHS
Kakatiya Degree
College,myaderipet,Dandepally,Adilabad

CONTROLLER OF EXAMINATIONS

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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18130**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs V D RAMARAO
Lecturer in MATHS
Keerthana Degree College,Bela,Adilabad

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18131**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs C PALLAVI
Lecturer in MATHS
Sai Samath Degree College,Echoda,Adilabad

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18132**) for the 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 S RAVI KUMAR
Lecturer in MATHS
Sai Samath Degree College,Echoda,Adilabad

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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Appointment of Examiner - Reg..

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(**Examiner No.18133**) 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 KAMAL KISHORE B
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18134**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

You are requested to accept the assignment and report to the Controller of Examinations, KU and contact
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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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 VELISHALA DINESH
Lecturer in MATHS
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



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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.18135**) for the 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 LINGALA PURNACHANDAR
Lecturer in MATHS
Mathrusri Degree College,Duggondi ,Warangal

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

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(**Examiner No.18136**) for the 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 DANTRALA RAVI
Lecturer in MATHS
Azmeera Rekha Syam(ARS) Degree
College,Khanapur,Adilabad

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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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 **MATHS**
(**Examiner No.18137**) for the 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 RAJINIKANTH
Lecturer in MATHS
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

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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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 **MATHS**
(**Examiner No.18138**) for the 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 KRISHNA
Lecturer in MATHS
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

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.1264/Spot/Exams/KU/2024

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ORDERS

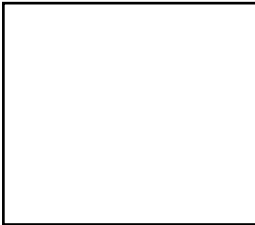
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18139**) for the 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 DONTHULA MAMATHA
Lecturer in MATHS
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

Signature



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18140**) for the 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. RAJYA LAXMI
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,WARANGAL(EAST)

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18141**) for the 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.HARIKA
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,WARANGAL(WEST)

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18142**) for the 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.SANDHYA KHAMMAM
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,WARANGAL(WEST)

CONTROLLER OF EXAMINATIONS

DECLARATION

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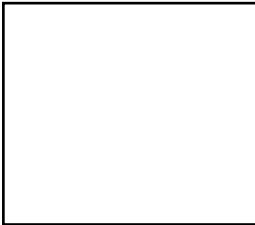
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Appointment of Examiner - Reg..

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(**Examiner No.18143**) 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 A. SAMATHA
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,BHUPALPALLI

CONTROLLER OF EXAMINATIONS

DECLARATION

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I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18144**) for the 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. T. PRADEEPA
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,BHUPALPALLI

CONTROLLER OF EXAMINATIONS

DECLARATION

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I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18145**) for the 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 JINUKALA PRIYANKA
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,BHUPALPALLI

CONTROLLER OF EXAMINATIONS

DECLARATION

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

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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.
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. J. MANJULA
Lecturer in MATHS
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: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18147**) for the 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: 19-Dec-2024, 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 KESABOINA SUJATHA
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18148**) for the 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: 19-Dec-2024, 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 THUDUM MANI
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-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 **MATHS**
(**Examiner No.18149**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs A. PALLAVI
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18150**) for the 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: 19-Dec-2024, 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 D ANJALI
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

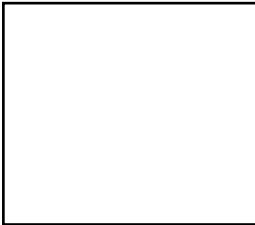
Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA I,III,V-Semester Exams 2024 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18151**) for the 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: 19-Dec-2024, 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 KOTHAKONDA DIVYA
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18152**) for the 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: 19-Dec-2024, 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 CHINTALA VASANTHA
Lecturer in MATHS
TELANGANA TRIBAL WELFARE R D C(GIRLS),
ASIFABAD, KOMURAMBHEEM ASIFABAD
DISTRICT

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

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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 **MATHS**
(**Examiner No.18153**) for the 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 SNEHA DEEPA
Lecturer in MATHS
TELANGANA TRIBAL WELFARE R D C(GIRLS),
ASIFABAD, KOMURAMBHEEM ASIFABAD
DISTRICT

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

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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 **MATHS**
(**Examiner No.18154**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs ALETI RAJANI
Lecturer in MATHS
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

Signature



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

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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 **MATHS**
(**Examiner No.18155**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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VALUATION CAMP.**



To
Mr/Mrs S.LAVANYA
Lecturer in MATHS
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

Signature



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

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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 **MATHS**
(**Examiner No.18156**) for the 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: 19-Dec-2024, 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 GADDE LAVANYA
Lecturer in MATHS
TELANGANA TRIBAL WELFARE R D C(GIRLS),
KHAMMAM 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

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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 **MATHS**
(**Examiner No.18157**) for the 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: 19-Dec-2024, 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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VALUATION CAMP.**



To
Mr/Mrs M.SIRISHA
Lecturer in MATHS
TELANGANA TRIBAL WELFARE R D C(GIRLS),
KHAMMAM 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

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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 **MATHS**
(**Examiner No.18158**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs VARIKUTI SPANDANA
Lecturer in MATHS
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

Signature



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

No.1264/Spot/Exams/KU/2024

Date: 19-Dec-2024

STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18159**) for the 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: 19-Dec-2024, 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 NALIMELLA SATHISHKUMAR
Lecturer in MATHS
TELANGANA TRIBAL WELFARE R D C(BOYS),
MANUGURU, BHADRADRI KOTHAGUDEM
DISTRICT

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18160**) for the 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: 19-Dec-2024, 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 MULKALA RAMESH
Lecturer in MATHS
SHIVANI DEGREE COLLEGE,BHEEMARAM,WGL

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18161**) for the 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 G.UMA
Lecturer in MATHS
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

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 **MATHS**
(**Examiner No.18163**) for the 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: 19-Dec-2024, 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 G.MAHENDER REDDY
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE,

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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18164**) for the 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: 19-Dec-2024, 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 T.RATHNA
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE,

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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18165**) for the 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: 19-Dec-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs SAMEENA AFREEN
Lecturer in MATHS
VAAGDEVI DEGREE & PG COLLEGE

CONTROLLER OF EXAMINATIONS

DECLARATION

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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 **MATHS**
(**Examiner No.18166**) for the 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 THAUTAM RAJU
Lecturer in MATHS
GOVT DEGREE COLLEGE

CONTROLLER OF EXAMINATIONS

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18167**) for the 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. MOUNIKA
Lecturer in MATHS
JAAGRUTHI DEGREE COLLEGE FOR WOMENS,

CONTROLLER OF EXAMINATIONS

DECLARATION

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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18168**) for the 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. ANANYA SREE RATHNA
Lecturer in MATHS
A V V DEGREE & PG COLLEGE,

CONTROLLER OF EXAMINATIONS

DECLARATION

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18169**) 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 A. SRINIVAS
Lecturer in MATHS
VAAGDEVI DEGREE & PG COLLEGE

CONTROLLER OF EXAMINATIONS

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.18170**) 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 MERUGU KAVITHA
Lecturer in MATHS
MASTERJI DEGREE.&P.G.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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