



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary
Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45001)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree Colleges should submit a proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs B Thirupathiah
Lecturer in Commerce
Prathiba Degree College
Cherial

Declaration

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

Address



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No.281/E2/UG/ KU/2016/Spot

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ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45002)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Radhika Uppala
Lecturer in Commerce
S R K Degree College
Cherial Wgl

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45003)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Gajji Ashok
Lecturer in Commerce
Gouthami Degree College
Cherla

Declaration

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

Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45004)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Bangari Shankar
Lecturer in Commerce
S S Degree College
Dharmaram

Declaration

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

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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45005)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs G Kiran Kumar
Lecturer in Commerce
R D Women`S Degree College
Hanamkonda

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45006)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs N.JYOTHSNA
Lecturer in Commerce
University Post Graduate College
Hanamkonda

Declaration

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

Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45007)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs T Padma
Lecturer in Commerce
R D Women`S Degree College
Hanamkonda

Declaration

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

Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45008)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs M.Kumaraswamy
Lecturer in Commerce
Masterji Deg.&P.G.Coll.
Hunter Road

Declaration

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

Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45009)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Maram Sammi Reddy
Lecturer in Commerce
Maharshi Degree College
Kesamudram

Declaration

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

Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45010)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Divya Boppa
Lecturer in Commerce
Shaarvani Degree College
Kishanpura

Declaration

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

Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45011)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs T.Rajeshwar
Lecturer in Commerce
Vaagdevi Degree College
Kishanpura

Declaration

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Address



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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45012)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs M.Ramesh
Lecturer in Commerce
Ganapathi Degree College
Mahadevpur Road

Declaration

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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45013)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs T Ravinder
Lecturer in Commerce
A V V Degree College
Mattewada

Declaration

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

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I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45014)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

1. Lecturers working on contract basis in Government/ Aided/ un-Aided/ Private Degree Colleges should submit a proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Tiwari Neetha
Lecturer in Commerce
A V V Degree College
Mattewada

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45015)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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5. A copy of the orders is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Sowjanya S
Lecturer in Commerce
Sri Gayathri Deg.College
Mulugu X Road

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45016)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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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 is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs G Sujatha
Lecturer in Commerce
Govt. Degree College
Narsampet

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45017)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs G.Ramyasri
Lecturer in Commerce
Lal Bahadur College
Near Mulugu Road

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45018)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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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 is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs K.Suchitra
Lecturer in Commerce
Lal Bahadur College
Near Mulugu Road

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45019)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Lalitha Sangineni
Lecturer in Commerce
Lal Bahadur College
Near Mulugu Road

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45020)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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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 is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Jangili Rajender Rao
Lecturer in Commerce
S V Degree College
Parkal

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45021)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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

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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 is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Kalakotla Laxamaiah
Lecturer in Commerce
Devi Degree College
Pasara

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45022)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
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6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs D.Madhu Babu
Lecturer in Commerce
Vidya Jyothi Deg.&P.G.College
Stn. Ghanpur

Declaration

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

Address



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

No.281/E2/UG/ KU/2016/Spot

Date: 19-12-2016

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ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/BBM/B.Com/B.Sc– Supplementary Examinations 2016 - Appointment of Examiner – Reg.

* * *

I am pleased to inform you that you are appointed as **Examiner** in **Cost & Management Accounting (Examiner No. 45023)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/November- 2016.

Date & Time of commencement of Valuation: 19-12-2016, 02.00 pm to 06.00 pm

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

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9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Gade Raveendar
Lecturer in Commerce
Sairam Degree College
Thorrur

Declaration

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

Address