



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

No.506/Spot/Exams/KU/2023

Date: 21-APR-2023

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA.I- Semester Exams 2023 -FEBRUARY  
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1522** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

**Date &Time of commencement of Valuation: 21-APR-2023, 02.00 pm to 06.00pm**  
**Venue:Examination Branch, Kakatiya University, Warangal.**

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

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



To  
**Mr/Mrs DR LEELAVATHI**  
Lecturer in HINDI  
K.D.C,HANMAKONDA HANMAKONDA

Aadhar No:

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1524** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
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6. The examiner 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 H RAMADEVI**  
Lecturer in HINDI  
UASC,HANMAKONDA HANMAKONDA

Aadhar No:

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1525** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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

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

To  
**Mr/Mrs DR FARHA FATIMA**  
Lecturer in HINDI  
UASC,HANMAKONDA WARANGAL

Aadhar No:

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1501** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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To  
**Mr/Mrs DR G RAMESH**  
Lecturer in HINDI  
C K M ,WARANGAL WARANGAL

Aadhar No: XXXX XXXX XXXX 1979

*H. M. Reddy*

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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**Address**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1502** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

**Date &Time of commencement of Valuation: 21-APR-2023, 02.00 pm to 06.00pm**  
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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**

To  
**Mr/Mrs DR S SUNITHA**  
Lecturer in HINDI  
C K M ,WARANGAL WARANGAL

Aadhar No:

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1506** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

**Date &Time of commencement of Valuation: 21-APR-2023, 02.00 pm to 06.00pm**  
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To  
**Mr/Mrs Y ASHAJYOTHI**  
Lecturer in HINDI  
JMJ,KARUNAPURAM,HNK HANMAKONDA  
Aadhar No: XXXX XXXX XXXX 2164

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1505** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

**Date &Time of commencement of Valuation: 21-APR-2023, 02.00 pm to 06.00pm**  
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To  
**Mr/Mrs P SUDHAKAR**  
Lecturer in HINDI  
PADMAVATHI DEGREE COLLEGE,WGL  
WARANGAL

Aadhar No: XXXX XXXX XXXX 9210

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1527** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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To  
**Mr/Mrs MD AFZAL**  
Lecturer in HINDI  
L B COLLEGE,WGL WARANGAL

Aadhar No: XXXX XXXX XXXX 8354

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**





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Appointment of Examiner - Reg..

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(**Examiner No.1523** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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



To  
**Mr/Mrs SD TAJAMUL**  
Lecturer in HINDI  
KAKATIYA MAHILA DEGREE COLLEGE,HNK  
HANMAKONDA

Aadhar No:

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1528** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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To  
**Mr/Mrs CHKALAVATHI**  
Lecturer in HINDI  
MASTERJI DEGREE & PG COLLEGE  
HANMAKONDA

Aadhar No: XXXX XXXX XXXX 2753

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **HINDI**  
(**Examiner No.1529** ) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA. I- Semester. -  
Semester Examinations, held in FEB- 2023.

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To  
**Mr/Mrs DR JAYANTHI**  
Lecturer in HINDI  
VAAGDEVI DEGREE COLLEGE HANMAKONDA  
Aadhar No: XXXX XXXX XXXX 2591

*H. M. Neddya*

**CONTROLLER OF EXAMINATIONS**

**DECLARATION**

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

**Address**

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**Signature**