



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21247**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the
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proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service
and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo
Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs DR. R. MANJULA
Lecturer in MATHS
UNIV. ARTS & SCIENCE 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



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21003**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs A. Srinivas
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.

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21006**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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



To
Mr/Mrs Anagandula Anitha
Lecturer in MATHS
Thushara Degree College Rampur

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.21009**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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



To
Mr/Mrs B. Mahender
Lecturer in MATHS
Kakatiya Mahila Degree College Hanamkonda

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Appointment of Examiner - Reg..

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(**Examiner No.21010**) 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 B. Radhakrishna Rao
Lecturer in MATHS
Masterji Deg.& P.G.Coll. Hunter Road

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(Examiner No.21013) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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To
Mr/Mrs B.Naresh
Lecturer in MATHS
New Science Degree College Hunter Road

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21017**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
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To
Mr/Mrs Banna Sandhya Rani
Lecturer in MATHS
New Science Degree College. Hanamkonda

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21020**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs Bochu Krishna
Lecturer in MATHS
Bharathi Degree College Wsardhannapet

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.21021**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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To
Mr/Mrs Boini Rambabu
Lecturer in MATHS
Vaagdevi Degree College Kishanpura

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.21027**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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VALUATION CAMP.**



To
Mr/Mrs Ch. Sridhar
Lecturer in MATHS
KESHAVA 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



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21028**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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To
Mr/Mrs Ch. Swapna
Lecturer in MATHS
Padmavathi Mahila College Kothawada

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.21037**) 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 Dasi Sushrutha
Lecturer in MATHS
A S C D M College for Women Fort Road

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.21039**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
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VALUATION CAMP.**



To
Mr/Mrs Dr. Nagaiah
Lecturer in MATHS
Univ. Arts & Science College Hanamkonda

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



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21040**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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2. Each examiner should value 30 scripts per session.
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4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs Dr. Sreelaxmi
Lecturer in MATHS
Univ. Arts & Science 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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Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21049**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs G. Mahender Reddy
Lecturer in MATHS
Vaagdevi Degree College Kishanpura

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.21050**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs G. Rajkumar
Lecturer in MATHS
Vaagdevi Degree College Kishanpura

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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No.506/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.21071**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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VALUATION CAMP.**



To
Mr/Mrs K.Yakaiah
Lecturer in MATHS
Vidya Jyothi Deg.&P.G.College Stn. Ghanpur

CONTROLLER OF EXAMINATIONS

DECLARATION

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

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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.21087**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 Mandapuri Haribabu
Lecturer in MATHS
Vishwas Degree College Rajeev Chowrastra

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.506/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.21090**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 Md.Yakoobpasha
Lecturer in MATHS
New Science Degree College Hunter Road

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.21130**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs Sameena Afreen
Lecturer in MATHS
Vaagdevi Degree College Kishanpura

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.21132**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 Sateesh Kumar.S
Lecturer in MATHS
Lal Bahadur College Nearmulug Road

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.21140**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 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 Sri. A. Koteswar
Lecturer in MATHS
C K M Arts & Science College Desaipet

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.21156**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 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



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21160**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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To
Mr/Mrs Uma Rani Nalamachu
Lecturer in MATHS
A V V Degree College Matewada

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.21164**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 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 Vajra Sravanthi
Lecturer in MATHS
MASTERJI DEG & PG COLLEGE,HANMAKONDA
HANMAKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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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.21171**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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



To
Mr/Mrs Gampa Srikanth
Lecturer in MATHS
Kanishka Women's Degree College Bheemaram

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

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STRICTLY CONFIDENTIAL

ORDERS

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21172**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the
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proof of having, faced the Selection Committee. They must also submit a copy of Qualifying Examination, Service
and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo
Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs V. Srinivas
Lecturer in MATHS
Samtha Degree College Thorrur

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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21174**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs M. Rama
Lecturer in MATHS
New Science 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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21176**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs Ch. Venkateshwarlu
Lecturer in MATHS
Keshava Degree College 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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21180**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs Thautam Raju
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21181**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs B. Rajeshwara Chary
Lecturer in MATHS
Samatha Degree College Thorrur

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21184**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 S. Sandhya
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21189**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the
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and Salary Certificates to the Chairman, Board of Studies for joining spot valuation camp.
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4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo
Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on
regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs 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



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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.21192**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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. Mounika
Lecturer in MATHS
New Science 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.506/Spot/Exams/KU/2024

Date: 16-Jan-2024

STRICTLY CONFIDENTIAL

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21193**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs G. Amulya
Lecturer in MATHS
Vaagdvi 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



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No.506/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.21194**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 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. Rajesh
Lecturer in MATHS
Vaagdevi 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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21195**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 T. Rathna
Lecturer in MATHS
Vaagdevi 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.506/Spot/Exams/KU/2024

Date: 16-Jan-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.21198**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on
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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
Sri Arunodaya Degree College 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.506/Spot/Exams/KU/2024

Date: 16-Jan-2024

STRICTLY CONFIDENTIAL

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

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21199**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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VALUATION CAMP.**



To
Mr/Mrs Dr. B. Madhavi
Lecturer in MATHS
Pingle Govt Degree College for Women Waddepally

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.506/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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21201**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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
the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the
following:

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



To
Mr/Mrs I. Mangamma
Lecturer in MATHS
Pingle Govt Degree College Women Waddepally

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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21210**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs MARTHA PRATHYUSHA
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



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21211**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs ALETI MOUNIKA
Lecturer in MATHS
MATHRU SRI DEGREE COLLEGE FOR WOMEN,
BHEEMARAM

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21212**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 N.RUCHITHA
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21213**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs BODDUNA SWAPNA
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



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21214**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs M.KALYANI
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21215**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs G. Swetha
Lecturer in MATHS
A S C D M COLLEGE FOR WOMEN, FORT ROAD,
WARANGAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21216**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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2. Each examiner should value 30 scripts per session.
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5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs A. Navyasri
Lecturer in MATHS
A S C D M COLLEGE FOR WOMEN, FORT ROAD,
WARANGAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21217**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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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 RITA BHAGWAT PANDIT
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21218**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs Thatikonda venkatesh
Lecturer in MATHS
S V S DEG. & P.G.COLLEGE, VIDYARANYAPURI,
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21219**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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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 MD SUMIYA
Lecturer in MATHS
EKASILA DEGREE COLLEGE, JANGAON

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21220**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs N ANITHA
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



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21221**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 NARSING BHAVANA
Lecturer in MATHS
EKASILA DEGREE COLLEGE, JANGAON

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21222**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 the Chief Examiner. Remuneration and other allowances will be paid as per University Norms. Kindly note the following:

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2. Each examiner should value 30 scripts per session.
3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs G. Soumya
Lecturer in MATHS
JESUS MARY JOSEPH COLLEGE FOR WOMEN,
KARUNAPURAM

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21223**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 DULAM SANDEEP
Lecturer in MATHS
S V DEGREE COLLEGE, PARKAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21224**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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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 V.Supriya
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR WOMEN
,WARANGAL(WEST)

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21225**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs M.LAXMI NARASIMHA RAO
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21226**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 KATLA RAJESH KUMAR
Lecturer in MATHS
KAKATIYA DEGREE COLLEGE Pasra

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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21227**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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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 UGENDHAR MERUGU
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21228**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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



To
Mr/Mrs Nagapuri Radhika
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,
WARANGAL(WEST)

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

No.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21229**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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Identity Card to the CE's before joining the spot valuation camp.
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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN
VALUATION CAMP.**



To
Mr/Mrs LENKALAPALLY RAJESH
Lecturer in MATHS
AURORA DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21230**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 RAVULA ANUSHA
Lecturer in MATHS
K S R MAHILA DEGREE COLLEGE, NARSAMPET

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21231**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 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.506/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.21232**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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.
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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 Koneti Yakaiah
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature



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

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21233**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs J VINOD
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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.21234**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 Vemula swetha
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21235**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
Venue:Examination Branch, Kakatiya University, Warangal.

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2. Each examiner should value 30 scripts per session.
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4. The examiner must submit original appointment order, relieving orders with salary particulars and Photo Identity Card to the CE's before joining the spot valuation camp.
5. A copy of the orders are sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**



To
Mr/Mrs CHADA SATYANARAYANA
Lecturer in MATHS
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,
HANAMKONDA

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.21236**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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
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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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.506/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.21237**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 Dr. Sandhya Khammam
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGE FOR
WOMEN,WARANGAL(WEST) WARANGAL

CONTROLLER OF EXAMINATIONS

DECLARATION

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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.506/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.21238**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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VALUATION CAMP.**



To
Mr/Mrs MERUGU KAVITHA
Lecturer in MATHS
MASTERJI DEG.&P.G.COLL., HUNTER ROAD,
HANAMKONDA hanmakonda

CONTROLLER OF EXAMINATIONS

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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.21239**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 DHADI PRAVALIKA
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA HANMAKONDA

CONTROLLER OF EXAMINATIONS

DECLARATION

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Address

Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.506/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.21240**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 SUNITHA KUMMARI
Lecturer in MATHS
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA HANMAKONDA

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21241**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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 Dr. T. PRADEEPA
Lecturer in MATHS
RESIDENTIAL DEGREE COLLEGES FOR
WOMEN,MAHABUBABAD MAHABUBABAD

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.21242**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-2024, 02.00 pm to 06.00pm
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regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
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VALUATION CAMP.**



To
Mr/Mrs KODUMURI KALPANA
Lecturer in MATHS
TELANGANA SOCIAL WELFARE RESIDENTIAL
DEGREE COLLEGE FOR WOMEN KHAMMAM

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.21243**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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To
Mr/Mrs DR. J. MANJULA
Lecturer in MATHS
TELANGANA SOCIAL WELFARE RESIDENTIAL
DEGREE COLLEGE FOR WOMEN KHAMMAM

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.21244**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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VALUATION CAMP.**



To
Mr/Mrs K PRIYANKA
Lecturer in MATHS
S.R.DEGREE & P.G.COLLEGE, BALASAMUDRAM,
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.21245**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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To
Mr/Mrs YAGGADI SAI KUMAR
Lecturer in MATHS
NEW SCIENCE DEGREE COLLEGE, HUNTER
ROAD, HNK

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.21246**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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VALUATION CAMP.**



To
Mr/Mrs Thokala Narahari
Lecturer in MATHS
GOVT. DEGREE COLLEGE, MAHABUBABAD

CONTROLLER OF EXAMINATIONS

DECLARATION

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Signature



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KAKATIYA UNIVERSITY, WARANGAL - 506 009

No.506/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.21248**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

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



To
Mr/Mrs M. ANANYA SREE RATHNA
Lecturer in MATHS
A V V DEGREE & PG COLLEGE, MATWADA,
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.506/Spot/Exams/KU/2024

Date: 16-Jan-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 -JANUARY
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MATHS**
(**Examiner No.21249**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA.I,III,V-Semester
Examinations, held in JAN- 2024.

Date &Time of commencement of Valuation: 16-Jan-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
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.
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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