



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

No.1500/Spot/Exams/KU/2021

Date: 17-Aug-2021

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - III,V Semester Exams 2021 -JUL
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**
(**Examiner No.6501**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA III,V Semester. -
Semester Examinations, held in JUL 2021.

Date &Time of commencement of Valuation: 17-Aug-2021, 10.00 am to 02.00pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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

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



To
Mr/Mrs DR B VENKATA GOPINATH
Lecturer in MICROBIOLOGY
UNIVERSITY COLLEGE KAKATIYA UNIVERSITY,
HNK.

Aadhar No: XXXX XXXX XXXX 3010

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 **MICROBIOLOGY**
(**Examiner No.6502**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA III,V Semester. -
Semester Examinations, held in JUL 2021.

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To
Mr/Mrs RAMADUGU JYOTHI
Lecturer in MICROBIOLOGY
NEW SCIENCE DEGREE COLLEGE, HUNTER
ROAD, HNK

Aadhar No: XXXX XXXX XXXX 5044

CONTROLLER OF EXAMINATIONS

DECLARATION

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

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(**Examiner No.6503**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA III,V Semester. -
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To
Mr/Mrs N.SHOBHA RANI
Lecturer in MICROBIOLOGY
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 0175

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To
Mr/Mrs G CHANDFRAKALA
Lecturer in MICROBIOLOGY
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 4494

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To
Mr/Mrs K Srilaxmi
Lecturer in MICROBIOLOGY
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,
WARANGAL(WEST)

Aadhar No: XXXX XXXX XXXX 0376

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Signature



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To
Mr/Mrs JULURI PRATHIBHA
Lecturer in MICROBIOLOGY
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,
WARANGAL

Aadhar No: XXXX XXXX XXXX 1889

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

Address

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To
Mr/Mrs P.Nagalohitha
Lecturer in MICROBIOLOGY
RESIDENTIAL DEGREE COLLEGES FOR WOMEN,
BHUPALPALLI

Aadhar No: XXXX XXXX XXXX 4234

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To
Mr/Mrs Aruri Suryam
Lecturer in MICROBIOLOGY
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 6187

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To
Mr/Mrs PONNOJU VEDASREE
Lecturer in MICROBIOLOGY
PADMAVATHI MAHILA COLLEGE, KOTHAWADA,
WARANGAL

Aadhar No: XXXX XXXX XXXX 1756

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(**Examiner No.6513**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA III,V Semester. -
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To
Mr/Mrs DR. A. SURYAM
Lecturer in MICROBIOLOGY
UNIV. ARTS & SCIENCE COLLEGE, SUBEDARI,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 6187

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To
Mr/Mrs K. SINDHURA
Lecturer in MICROBIOLOGY
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 5321

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To
Mr/Mrs K. SINDHURA
Lecturer in MICROBIOLOGY
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 5321

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



To
Mr/Mrs SYEDA ISHRATH FARHEEN
Lecturer in MICROBIOLOGY
VAAGDEVI DEGREE COLLEGE, KISHANPURA,
HANAMKONDA

Aadhar No: XXXX XXXX XXXX 0782

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature