



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

No.1500/Spot/Exams/KU/2021

Date: 28-Dec-2021

STRICTLY CONFIDENTIAL

ORDERS

Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - II&IV Semester Exams 2021 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**
(**Examiner No.6515**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA II&IV Semester. -
Semester Examinations, held in NOV 2021.

Date &Time of commencement of Valuation: 28-Dec-2021, 02.00 pm to 06.00pm
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:

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. V. Swetha
Lecturer in MICROBIOLOGY
T T W R D C (W), Khammam

Aadhar No:

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.1500/Spot/Exams/KU/2021

Date: 20-Dec-2021

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Sub: - K.U. Examination Branch (UG) - B.A/B.Com/B.Sc/B.B.A/BCA. - II&IV Semester Exams 2021 -NOV
Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**
(**Examiner No.6504**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA II&IV Semester. -
Semester Examinations, held in NOV 2021.

Date &Time of commencement of Valuation: 20-Dec-2021, 02.00 pm to 06.00pm
Venue: Valuation Hall, Examination Branch, Kakatiya University, Warangal.

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6. The examiner should bring one stamp size photograph.
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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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DECLARATION

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I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**
(**Examiner No.6510**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA II&IV Semester. -
Semester Examinations, held in NOV 2021.

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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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I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**
(**Examiner No.6512**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA II&IV Semester. -
Semester Examinations, held in NOV 2021.

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

Aadhar No: XXXX XXXX XXXX 0782

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Appointment of Examiner - Reg..

I am pleased to inform you that you are appointed as Examiner in **MICROBIOLOGY**
(**Examiner No.6514**) for the valuation of Answer scripts of B.A/B.Com/B.Sc/B.B.A/BCA II&IV Semester. -
Semester Examinations, held in NOV 2021.

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To
Mr/Mrs Dr. B. Sridevi
Lecturer in MICROBIOLOGY
Social Welfare Resenntial Degree College for Women
Warangal (East)

Aadhar No:

CONTROLLER OF EXAMINATIONS

DECLARATION

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

Address

Signature