



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23603)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs B.Ramanadevi
Lecturer in Commerce
New Science Degree College
Hunter Road

Declaration

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

Address



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ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23606)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Chirra Harikrishna
Lecturer in Commerce
Dr M R Reddy Degree College
Parkal

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23610)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. A. Sunitha
Lecturer in Commerce
Univ. Arts & Science College
Hanamkonda

Declaration

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

Address



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I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23611)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. G.K. Kumar
Lecturer in Commerce
C K M Arts & Science College
Desaipet

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23612)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Dr. V. Sumalatha
Lecturer in Commerce
C K M Arts & Science College
Desaipet

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23614)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs E.Shailaja
Lecturer in Commerce
A B V Degree College
Jangaon

Declaration

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

Address



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I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23616)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs G.Vijaya Laxmi
Lecturer in Commerce
A S C D M College For Women
Fort Road

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23618)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Gone Venkatreddy
Lecturer in Commerce
Samatha Degree College
Thorrur

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23621)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Gvbhaskar Reddy
Lecturer in Commerce
Bhadradri Degre College
Cherla

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23623)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs J. Thirupathi
Lecturer in Commerce
Univ. Arts & Science College
Hanamkonda

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23624)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Jaggaiah Jannu
Lecturer in Commerce
Thushara Degree College
Rampur

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23629)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs K. Ashok
Lecturer in Commerce
Aurora Degree College
Kishanpura

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23630)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Konda Srinivas
Lecturer in Commerce
Samatha Degree College
Thorrur

Declaration

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

Address



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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23633)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs M.Uppalaiah
Lecturer in Commerce
Ekasila Degree College
Jangaon

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23634)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Madhu Babu D
Lecturer in Commerce
Sri Gayathri Deg.College
Mulugu X Road

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23638)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Nidigonda Sridhar
Lecturer in Commerce
Jaya Women`S Degree College
Hanamkonda

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23642)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Pasikanti Kotilingam
Lecturer in Commerce
S V Degree College
Parkal

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23646)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Raju Arelli
Lecturer in Commerce
Sri Chaitanya Degree College
Narsampet

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23647)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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3. The examiner should sign and write the number of his/her examiner number on all the scripts valued by him/her.
4. The examiner must submit original appointment order, relieving orders with salary particulars and **Photo Identity Card** to the CE's before joining the spot valuation camp.
5. A copy of the orders is sent to the Principal concerned with a request to relieve only those who are appointed on regular/contract basis through a selection committee
6. The examiner should bring one stamp size photograph.
7. The following declaration may be communicated to the Addl. Controller of Examinations (UG).
8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Ramesh Shyamakuri
Lecturer in Commerce
R J R M Degree College
Marripeda

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

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ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23648)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Ravula Suresh
Lecturer in Commerce
Sri Arunodaya Degree & P.G.College
Hanamkonda

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23649)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Rizwana Begum
Lecturer in Commerce
Islamia Arts & Science College
M G Road

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23650)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs S. Manjula
Lecturer in Commerce
A S C D M College For Women
Fort Road

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23655)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Srinivas Pulla
Lecturer in Commerce
Thushara Degree College
Rampur

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23657)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs T Narender
Lecturer in Commerce
New Science Degree College
Hunter Road

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23658)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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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8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs V Venkateshwar Rao
Lecturer in Commerce
A V V Degree College
Mattewada

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

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

* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23659)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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8. **THE EXAMINER SHOULD WEAR IDENTITY CARD SUPPLIED BY EXAM BRANCH EVERYDAY IN VALUATION CAMP.**
9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs V. Katya
Lecturer in Commerce
C K M Arts & Science College
Desaipet

Declaration

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

Address



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

No. 226/E2/UG/ KU/2016/Spot

Date: 19-11-2016

STRICTLY CONFIDENTIAL

ORDERS

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* * *

I am pleased to inform you that you are appointed as Examiner in **Corporate Accounting (Examiner No. CRA23661)** for the valuation of III year Answer scripts of B.Com Supplementary Examinations, held in October/ November- 2016.

Date & Time of commencement of Valuation: 20-11-2016, 02.00 pm to 06.00 pm

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

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

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

CONTROLLER OF EXAMINATIONS

To
Mr/Mrs Vinukonda Naveen
Lecturer in Commerce
Bhadruka Degree College
Hanamkonda

Declaration

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

Address
