



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:

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 B.Ramanadevi**  
Lecturer in Commerce  
New Science Degree College  
Hunter Road

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**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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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 Chirra Harikrishna**  
Lecturer in Commerce  
Dr M R Reddy Degree College  
Parkal

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**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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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 Dr. A. Sunitha**  
Lecturer in Commerce  
Univ. Arts & Science College  
Hanamkonda

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**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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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.
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9. Only Local Conveyance will be paid

CONTROLLER OF EXAMINATIONS

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

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**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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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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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 Dr. V. Sumalatha**  
Lecturer in Commerce  
C K M Arts & Science College  
Desaipet

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**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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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 E.Shailaja**  
Lecturer in Commerce  
A B V Degree College  
Jangaon

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**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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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 G.Vijaya Laxmi**  
Lecturer in Commerce  
A S C D M College For Women  
Fort Road

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**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**

**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 Gone Venkatreddy**  
Lecturer in Commerce  
Samatha Degree College  
Thorrur

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**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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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 Gvbhaskar Reddy**  
Lecturer in Commerce  
Bhadradri Degre College  
Cherla

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**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

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**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

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**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

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**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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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 Konda Srinivas**  
Lecturer in Commerce  
Samatha Degree College  
Thorrur

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**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. 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:

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 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:

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 Nidigonda Sridhar**  
Lecturer in Commerce  
Jaya Women`S Degree College  
Hanamkonda

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**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. 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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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 Pasikanti Kotilingam**  
Lecturer in Commerce  
S V Degree College  
Parkal

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**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.

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 Raju Arelli**  
Lecturer in Commerce  
Sri Chaitanya Degree College  
Narsampet

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**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. 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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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 Ramesh Shyamakuri**  
Lecturer in Commerce  
R J R M Degree College  
Marripeda

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**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. 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.

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 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

**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. 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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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 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.
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 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

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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. 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:

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 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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**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. 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.

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 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

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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. 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.

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 V Venkateshwar Rao**  
Lecturer in Commerce  
A V V Degree College  
Mattewada

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**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.

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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.

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 V. Katya**  
Lecturer in Commerce  
C K M Arts & Science College  
Desaipet

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**Declaration**

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

**Address**  
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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. 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

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**Declaration**

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

**Address**  
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