

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION:** 21-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 022 GOVT CITY COLLEGE, HYDERABAD

**URDU MEDIUM**

**DAY OF THE EXAM :** 1 **SCODE:** 4051901 **SUBJECT :**ZOOLOGY (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833358						
2	0221833428						
3	0221833437						
4	0221834469						
5	0221835817						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

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**DATE OF EXAMINATION:** 21-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 022 GOVT CITY COLLEGE, HYDERABAD

**URDU MEDIUM**

**DAY OF THE EXAM :** 1 **SCODE:** 4052101 **SUBJECT :** HISTORY: STRESS MANAGEMENT (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833216						
2	0221833530						
3	0221833979						
4	0221834021						
5	0221834036						

Total No. of Absentees :  
in this Sheet

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Total No. of Mal Practice Cases :  
in this Sheet

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Total No. of Present :  
in this Sheet

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**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

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**DATE OF EXAMINATION:** 21-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 022 GOVT CITY COLLEGE, HYDERABAD

**URDU MEDIUM**

**DAY OF THE EXAM :** 1 **SCODE:** 4052301 **SUBJECT :** POLITICAL SCIENCE: STRESS MANAGEMENT  
(SEEC 1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833481						
2	0221833528						
3	0221833549						
4	0221833550						
5	0221833593						
6	0221833793						
7	0221833904						
8	0221833965						
9	0221834033						
10	0221834078						
11	0221834579						

Total No. of Absentees :    
in this Sheet

Total No. of Mal Practice Cases :    
in this Sheet

Total No. of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION:** 21-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 022 GOVT CITY COLLEGE, HYDERABAD

**URDU MEDIUM**

**DAY OF THE EXAM :** 1 **SCODE:** 4052501 **SUBJECT :** PUBLIC ADMINISTRATION: STRESS  
MANAGEMENT (SEEC 1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.		S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221834215							

Total No. of Absentees :  
in this Sheet

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Total No. of Mal Practice Cases :  
in this Sheet

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Total No. of Present :  
in this Sheet

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**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 22-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 2      SCORE: 4051902      SUBJECT :ZOOLOGY (SEEC-2)**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833358						
2	0221833428						
3	0221833437						
4	0221834469						
5	0221835817						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 22-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 2**

**SCODE: 4052102**

**SUBJECT : HISTORY: DIGITAL GOVERNANCE (SEEC-2)**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221747282						
2	0221833216						
3	0221833530						
4	0221833979						
5	0221834021						
6	0221834036						

Total No. of Absentees :  
in this Sheet

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Total No. of Mal Practice Cases :  
in this Sheet

--	--

Total No. of Present :  
in this Sheet

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**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 22-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 2      SCORE: 4052302      SUBJECT :POLITICAL SCIENCE:DIGITAL GOVERNANCE  
(SEEC 2)**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833481						
2	0221833528						
3	0221833549						
4	0221833550						
5	0221833593						
6	0221833793						
7	0221833904						
8	0221833965						
9	0221834033						
10	0221834078						
11	0221834579						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION:** 22-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 022 GOVT CITY COLLEGE, HYDERABAD

**URDU MEDIUM**

**DAY OF THE EXAM :** 2

**SCODE:** 4052502

**SUBJECT :** PUBLIC ADMINISTRATION : DIGITAL  
GOVERNANCE (SEEC 2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.		S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221834215							

Total No. of Absentees :  
in this Sheet

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Total No. of Mal Practice Cases :  
in this Sheet

--	--

Total No. of Present :  
in this Sheet

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**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent



**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 25-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 5      SCORE: 413      SUBJECT : BOTANY**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833358						
2	0221833428						
3	0221833437						
4	0221834469						
5	0221835817						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 25-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 5      SCORE: 421      SUBJECT : HISTORY**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833216						
2	0221833904						
3	0221833965						
4	0221834033						
5	0221834078						
6	0221834215						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 26-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 6      SCORE: 414      SUBJECT :CHEMISTRY**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221748210						
2	0221833358						
3	0221833428						
4	0221833437						
5	0221834469						
6	0221835817						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION: 26-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 6**

**SCODE: 421**

**SUBJECT : HISTORY**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221747470						
2	0221833241						
3	0221833436						
4	0221833481						
5	0221833493						
6	0221833528						
7	0221833530						
8	0221833593						
9	0221833793						
10	0221833979						
11	0221834021						
12	0221834036						
13	0221834052						
14	0221834195						
15	0221834204						
16	0221834542						

Total No.of Absentees :

Total No.of Mal Practice Cases :

Total No.of Present :

**Note :** Please write **Absent** or **Mal Practice** against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 6**

**SCODE: 423**

**SUBJECT :POLITICAL SCIENCE**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221746700						
2	0221833216						
3	0221833222						
4	0221833549						
5	0221833550						
6	0221833586						
7	0221833904						
8	0221833965						
9	0221834033						
10	0221834078						
11	0221834202						
12	0221834215						
13	0221834253						
14	0221834473						
15	0221834579						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
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**DATE OF EXAMINATION: 27-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 022 GOVT CITY COLLEGE, HYDERABAD**

**URDU MEDIUM**

**DAY OF THE EXAM : 7      SCORE: 419      SUBJECT : ZOOLOGY**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221833358						
2	0221833428						
3	0221833437						
4	0221834469						
5	0221835817						

Total No. of Absentees :    
in this Sheet

Total No. of Mal Practice Cases :    
in this Sheet

Total No. of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent

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**DATE OF EXAMINATION:** 27-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 022 GOVT CITY COLLEGE, HYDERABAD

**URDU MEDIUM**

**DAY OF THE EXAM :** 7

**SCODE:** 423

**SUBJECT :** POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221747470						
2	0221833436						
3	0221833481						
4	0221833493						
5	0221833528						
6	0221833593						
7	0221833793						
8	0221833979						
9	0221834021						
10	0221834036						
11	0221834052						
12	0221834195						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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Signature of Chief Superintendent

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**URDU MEDIUM**

**DAY OF THE EXAM : 7**

**SCODE: 425**

**SUBJECT :PUBLIC ADMINISTRATION**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0221746700						
2	0221833216						
3	0221833222						
4	0221833241						
5	0221833530						
6	0221833549						
7	0221833550						
8	0221833586						
9	0221833904						
10	0221833965						
11	0221834033						
12	0221834078						
13	0221834202						
14	0221834204						
15	0221834215						
16	0221834253						
17	0221834473						
18	0221834542						
19	0221834579						

Total No.of Absentees :

Total No.of Mal Practice Cases :

Total No.of Present :

**Note :** Please write **Absent** or **Mal Practice** against hall ticket number if any

Signature of the Invigilator

Signature of Chief Superintendent