

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4050601 **SUBJECT :**ENGLISH Literature (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805296						
2	0061805430						
3	0061805525						
4	0061805544						
5	0061805702						
6	0061805703						

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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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4050701 **SUBJECT :**Hindi Literature (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805221						
2	0061805356						
3	0061805358						
4	0061805400						
5	0061805428						
6	0061805442						
7	0061805685						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4050801 **SUBJECT :**TELUGU Literature (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805197						
2	0061805206						
3	0061805245						
4	0061805270						
5	0061805271						
6	0061805331						
7	0061805337						
8	0061805361						
9	0061805385						
10	0061805481						
11	0061805488						
12	0061805519						
13	0061805591						
14	0061805625						
15	0061805712						
16	0061808454						
17	0061808464						
18	0061808521						
19	0061820823						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051001 **SUBJECT :**COMMERCE: MICRO FINANCE(SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707061			20	0061805347		
2	0061707465			21	0061805363		
3	0061707618			22	0061805375		
4	0061707656			23	0061805412		
5	0061707699			24	0061805434		
6	0061711214			25	0061805437		
7	0061805162			26	0061805450		
8	0061805180			27	0061805484		
9	0061805190			28	0061805567		
10	0061805203			29	0061805568		
11	0061805233			30	0061805573		
12	0061805259			31	0061805578		
13	0061805261			32	0061805584		
14	0061805281			33	0061805586		
15	0061805304			34	0061805631		
16	0061805310			35	0061805697		
17	0061805324			36	0061805709		
18	0061805338			37	0061805720		
19	0061805342			38	0061805786		

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DAY OF THE EXAM : 1 **SCODE:** 4051001 **SUBJECT :**COMMERCE: MICRO FINANCE(SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061808462						
40	0061808490						
41	0061808495						
42	0061808501						
43	0061808522						
44	0061808527						
45	0061808529						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051101 **SUBJECT :**COMMERCE: MICRO FINANCE(SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707698						
2	0061805166						
3	0061805272						
4	0061805648						

Total No.of Absentees :
in this Sheet

Total No.of Mal Practice Cases :
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Total No.of Present :
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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051201 **SUBJECT :**COMMERCE: MICRO FINANCE(SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707456						
2	0061805355						
3	0061805407						
4	0061805410						
5	0061805475						
6	0061805489						
7	0061805797						
8	0061805798						
9	0061808523						

Total No.of Absentees :
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Total No.of Mal Practice Cases :
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Total No.of Present :
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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051301 **SUBJECT :**BOTANY (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707693						
2	0061805170						
3	0061805220						
4	0061805346						
5	0061805528						
6	0061805634						
7	0061805722						
8	0061805755						
9	0061805767						
10	0061805785						
11	0061808468						
12	0061808470						
13	0061808539						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051401 **SUBJECT :**CHEMISTRY (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805188						
2	0061805196						
3	0061805425						
4	0061808528						

Total No.of Absentees :
in this Sheet

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051501 **SUBJECT :**COMPUTER APPLICATION (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805282						
2	0061805628						
3	0061805661						
4	0061808478						
5	0061808479						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051701 **SUBJECT :**MATHEMATICS (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707187						
2	0061707631						
3	0061805263						
4	0061805305						
5	0061805527						
6	0061808466						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4051801 **SUBJECT :**PHYSICS (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805163						
2	0061805229						
3	0061805295						
4	0061805306						
5	0061808514						

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Total No.of Mal Practice Cases :
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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061805387						
2	0061805605						

Total No.of Absentees :
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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4052001 **SUBJECT :**ECONOMICS:STRESS MANAGEMENT (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805248						
2	0061805491						
3	0061805622						
4	0061805735						

Total No.of Absentees :
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Total No.of Present :
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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061707179			20	0061808474		
2	0061707697			21	0061808481		
3	0061805301						
4	0061805309						
5	0061805335						
6	0061805340						
7	0061805394						
8	0061805401						
9	0061805408						
10	0061805418						
11	0061805466						
12	0061805476						
13	0061805509						
14	0061805520						
15	0061805552						
16	0061805571						
17	0061805585						
18	0061805595						
19	0061806165						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4052201 **SUBJECT :**JOURNALISM:STRESS MANAGEMENT

(SEEC 1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805717						
2	0061805746						

Total No.of Absentees :
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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061707068			20	0061805279		
2	0061707172			21	0061805316		
3	0061707218			22	0061805319		
4	0061707451			23	0061805323		
5	0061707657			24	0061805334		
6	0061711178			25	0061805341		
7	0061711183			26	0061805344		
8	0061711184			27	0061805352		
9	0061711204			28	0061805384		
10	0061711247			29	0061805390		
11	0061805153			30	0061805397		
12	0061805155			31	0061805409		
13	0061805160			32	0061805443		
14	0061805168			33	0061805479		
15	0061805198			34	0061805531		
16	0061805212			35	0061805548		
17	0061805230			36	0061805554		
18	0061805237			37	0061805561		
19	0061805266			38	0061805580		

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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.
39	0061805606						
40	0061805646						
41	0061805649						
42	0061805692						
43	0061805701						
44	0061805758						
45	0061805761						
46	0061805791						
47	0061808477						
48	0061808537						
49	0061841273						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCODE:** 4052401 **SUBJECT :**PSYCHOLOGY:STRESS MANAGEMENT

(SEEC 1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.		S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805780							

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in this Sheet

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 1 **SCORE:** 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	0061707267			20	0061805795		
2	0061707304			21	0061808465		
3	0061805189			22	0061808515		
4	0061805205						
5	0061805226						
6	0061805228						
7	0061805242						
8	0061805247						
9	0061805280						
10	0061805288						
11	0061805359						
12	0061805374						
13	0061805398						
14	0061805424						
15	0061805521						
16	0061805562						
17	0061805716						
18	0061805769						
19	0061805790						

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CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.
DAY OF THE EXAM : 1 **SCODE:** 4052601 **SUBJECT :**SOCIOLOGY:STRESS MANAGEMENT (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061805593		
2	0061707124			21	0061805600		
3	0061707144			22	0061805604		
4	0061707702			23	0061805645		
5	0061805175			24	0061805700		
6	0061805176			25	0061805754		
7	0061805191			26	0061805760		
8	0061805241			27	0061808486		
9	0061805244			28	0061808531		
10	0061805246						
11	0061805286						
12	0061805294						
13	0061805446						
14	0061805463						
15	0061805472						
16	0061805526						
17	0061805535						
18	0061805550						
19	0061805590						

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4050602 **SUBJECT :**ENGLISH Literature (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805296						
2	0061805430						
3	0061805525						
4	0061805544						
5	0061805702						
6	0061805703						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4050702 SUBJECT :Hindi Literature (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805221						
2	0061805356						
3	0061805358						
4	0061805400						
5	0061805428						
6	0061805442						
7	0061805685						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4050802 SUBJECT :TELUGU Literature (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805197						
2	0061805206						
3	0061805245						
4	0061805270						
5	0061805271						
6	0061805331						
7	0061805337						
8	0061805361						
9	0061805385						
10	0061805481						
11	0061805488						
12	0061805519						
13	0061805591						
14	0061805625						
15	0061805712						
16	0061808454						
17	0061808464						
18	0061808521						
19	0061820823						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4051002 SUBJECT :COMMERCE: RURAL MARKETING(SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707061			20	0061805338		
2	0061707465			21	0061805342		
3	0061707588			22	0061805347		
4	0061707618			23	0061805363		
5	0061707656			24	0061805375		
6	0061707699			25	0061805412		
7	0061707741			26	0061805434		
8	0061711214			27	0061805437		
9	0061805162			28	0061805450		
10	0061805180			29	0061805484		
11	0061805190			30	0061805567		
12	0061805203			31	0061805568		
13	0061805233			32	0061805573		
14	0061805259			33	0061805578		
15	0061805261			34	0061805584		
16	0061805281			35	0061805586		
17	0061805304			36	0061805631		
18	0061805310			37	0061805697		
19	0061805324			38	0061805709		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4051002 SUBJECT :COMMERCE: RURAL MARKETING(SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805720						
40	0061805786						
41	0061808462						
42	0061808490						
43	0061808495						
44	0061808501						
45	0061808522						
46	0061808527						
47	0061808529						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4051102 **SUBJECT :**COMMERCE: RURAL MARKETING(SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707698						
2	0061805166						
3	0061805272						
4	0061805648						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4051202 **SUBJECT :**COMMERCE: RURAL MARKETING(SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707345						
2	0061707456						
3	0061805355						
4	0061805407						
5	0061805410						
6	0061805475						
7	0061805489						
8	0061805797						
9	0061805798						
10	0061808523						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4051302 SUBJECT :BOTANY (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707693						
2	0061805170						
3	0061805220						
4	0061805346						
5	0061805528						
6	0061805634						
7	0061805722						
8	0061805755						
9	0061805767						
10	0061805785						
11	0061808468						
12	0061808470						
13	0061808539						

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4051402 SUBJECT :CHEMISTRY (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805188						
2	0061805196						
3	0061805425						
4	0061808528						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4051502 **SUBJECT :**COMPUTER APPLICATION (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805282						
2	0061805628						
3	0061805661						
4	0061808478						
5	0061808479						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4051702 SUBJECT :MATHEMATICS (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707187						
2	0061707631						
3	0061805263						
4	0061805305						
5	0061805527						
6	0061808466						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4051802 SUBJECT :PHYSICS (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805163						
2	0061805229						
3	0061805295						
4	0061805306						
5	0061808514						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805387						
2	0061805605						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4052002 **SUBJECT :**ECONOMICS:DIGITAL GOVERNANCE (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061711265						
2	0061805248						
3	0061805491						
4	0061805622						
5	0061805735						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 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	0061707179			20	0061806165		
2	0061707457			21	0061808474		
3	0061707697			22	0061808481		
4	0061805301						
5	0061805309						
6	0061805335						
7	0061805340						
8	0061805394						
9	0061805401						
10	0061805408						
11	0061805418						
12	0061805466						
13	0061805476						
14	0061805509						
15	0061805520						
16	0061805552						
17	0061805571						
18	0061805585						
19	0061805595						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4052202 **SUBJECT :**JOURNALISM :DIGITAL GOVERNANCE

(SEEC 2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805717						
2	0061805746						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 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	0061707068			20	0061805198		
2	0061707172			21	0061805212		
3	0061707218			22	0061805230		
4	0061707228			23	0061805237		
5	0061707355			24	0061805266		
6	0061707367			25	0061805279		
7	0061707451			26	0061805316		
8	0061707657			27	0061805319		
9	0061707700			28	0061805323		
10	0061711178			29	0061805334		
11	0061711183			30	0061805341		
12	0061711184			31	0061805344		
13	0061711204			32	0061805352		
14	0061711218			33	0061805384		
15	0061711247			34	0061805390		
16	0061805153			35	0061805397		
17	0061805155			36	0061805409		
18	0061805160			37	0061805443		
19	0061805168			38	0061805479		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 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.
39	0061805531						
40	0061805548						
41	0061805554						
42	0061805561						
43	0061805580						
44	0061805606						
45	0061805646						
46	0061805649						
47	0061805692						
48	0061805701						
49	0061805758						
50	0061805761						
51	0061805791						
52	0061808477						
53	0061808537						
54	0061841273						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 **SCODE:** 4052402 **SUBJECT :**PSYCHOLOGY :DIGITAL GOVERNANCE

(SEEC 2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.		S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805780							

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 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	0061707304			20	0061805790		
2	0061707613			21	0061805795		
3	0061711179			22	0061808465		
4	0061805189			23	0061808515		
5	0061805205						
6	0061805226						
7	0061805228						
8	0061805242						
9	0061805247						
10	0061805280						
11	0061805288						
12	0061805359						
13	0061805374						
14	0061805398						
15	0061805424						
16	0061805521						
17	0061805562						
18	0061805716						
19	0061805769						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 2 SCORE: 4052602 SUBJECT :SOCIOLOGY :DIGITAL GOVERNANCE
(SEEC 2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061805550		
2	0061707124			21	0061805590		
3	0061707519			22	0061805593		
4	0061707566			23	0061805600		
5	0061707702			24	0061805604		
6	0061711246			25	0061805645		
7	0061805175			26	0061805700		
8	0061805176			27	0061805754		
9	0061805191			28	0061805760		
10	0061805241			29	0061808486		
11	0061805244			30	0061808531		
12	0061805246						
13	0061805286						
14	0061805294						
15	0061805446						
16	0061805463						
17	0061805472						
18	0061805526						
19	0061805535						

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: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061707698		
2	0061707061			21	0061707699		
3	0061707068			22	0061707702		
4	0061707124			23	0061711168		
5	0061707144			24	0061711178		
6	0061707179			25	0061711183		
7	0061707187			26	0061711184		
8	0061707218			27	0061711204		
9	0061707267			28	0061711214		
10	0061707304			29	0061711216		
11	0061707305			30	0061711247		
12	0061707334			31	0061805153		
13	0061707355			32	0061805155		
14	0061707451			33	0061805160		
15	0061707465			34	0061805162		
16	0061707618			35	0061805163		
17	0061707656			36	0061805166		
18	0061707657			37	0061805168		
19	0061707697			38	0061805170		

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: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805175			58	0061805230		
40	0061805176			59	0061805233		
41	0061805180			60	0061805237		
42	0061805188			61	0061805241		
43	0061805189			62	0061805242		
44	0061805190			63	0061805244		
45	0061805191			64	0061805245		
46	0061805196			65	0061805246		
47	0061805197			66	0061805247		
48	0061805198			67	0061805248		
49	0061805203			68	0061805259		
50	0061805205			69	0061805261		
51	0061805206			70	0061805263		
52	0061805212			71	0061805266		
53	0061805220			72	0061805270		
54	0061805221			73	0061805271		
55	0061805226			74	0061805272		
56	0061805228			75	0061805279		
57	0061805229			76	0061805280		

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

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

D - FORM CUM ROOM WISE STATEMENT

DATE OF EXAMINATION: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0061805281			96	0061805335		
78	0061805282			97	0061805337		
79	0061805286			98	0061805338		
80	0061805288			99	0061805340		
81	0061805294			100	0061805341		
82	0061805295			101	0061805342		
83	0061805296			102	0061805344		
84	0061805301			103	0061805346		
85	0061805304			104	0061805347		
86	0061805305			105	0061805352		
87	0061805306			106	0061805355		
88	0061805309			107	0061805356		
89	0061805310			108	0061805358		
90	0061805316			109	0061805359		
91	0061805319			110	0061805361		
92	0061805323			111	0061805363		
93	0061805324			112	0061805374		
94	0061805331			113	0061805375		
95	0061805334			114	0061805384		

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

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

D - FORM CUM ROOM WISE STATEMENT

DATE OF EXAMINATION: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
115	0061805385			134	0061805434		
116	0061805387			135	0061805437		
117	0061805390			136	0061805442		
118	0061805394			137	0061805443		
119	0061805397			138	0061805446		
120	0061805398			139	0061805450		
121	0061805399			140	0061805463		
122	0061805400			141	0061805466		
123	0061805401			142	0061805472		
124	0061805407			143	0061805475		
125	0061805408			144	0061805476		
126	0061805409			145	0061805479		
127	0061805410			146	0061805481		
128	0061805412			147	0061805484		
129	0061805418			148	0061805488		
130	0061805424			149	0061805489		
131	0061805425			150	0061805491		
132	0061805428			151	0061805509		
133	0061805430			152	0061805519		

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: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
153	0061805520			172	0061805578		
154	0061805521			173	0061805580		
155	0061805525			174	0061805584		
156	0061805526			175	0061805585		
157	0061805527			176	0061805586		
158	0061805528			177	0061805590		
159	0061805531			178	0061805591		
160	0061805535			179	0061805593		
161	0061805544			180	0061805595		
162	0061805548			181	0061805600		
163	0061805550			182	0061805604		
164	0061805552			183	0061805605		
165	0061805554			184	0061805606		
166	0061805561			185	0061805622		
167	0061805562			186	0061805625		
168	0061805567			187	0061805628		
169	0061805568			188	0061805631		
170	0061805571			189	0061805634		
171	0061805573			190	0061805645		

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: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
191	0061805646			210	0061805754		
192	0061805648			211	0061805755		
193	0061805649			212	0061805758		
194	0061805661			213	0061805760		
195	0061805685			214	0061805761		
196	0061805692			215	0061805767		
197	0061805697			216	0061805769		
198	0061805700			217	0061805780		
199	0061805701			218	0061805785		
200	0061805702			219	0061805786		
201	0061805703			220	0061805790		
202	0061805709			221	0061805791		
203	0061805712			222	0061805795		
204	0061805716			223	0061805797		
205	0061805717			224	0061805798		
206	0061805720			225	0061806165		
207	0061805722			226	0061808454		
208	0061805735			227	0061808462		
209	0061805746			228	0061808464		

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: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 3 SCORE: 403 SUBJECT :English (LSC)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
229	0061808465			248	0061808528		
230	0061808466			249	0061808529		
231	0061808468			250	0061808531		
232	0061808470			251	0061808537		
233	0061808474			252	0061808539		
234	0061808477			253	0061820823		
235	0061808478			254	0061841273		
236	0061808479						
237	0061808481						
238	0061808486						
239	0061808490						
240	0061808495						
241	0061808501						
242	0061808514						
243	0061808515						
244	0061808521						
245	0061808522						
246	0061808523						
247	0061808527						

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

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

D - FORM CUM ROOM WISE STATEMENT

DATE OF EXAMINATION: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4041 SUBJECT :MIL-Telugu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061711204		
2	0061707066			21	0061711216		
3	0061707068			22	0061711247		
4	0061707124			23	0061805153		
5	0061707179			24	0061805162		
6	0061707187			25	0061805163		
7	0061707218			26	0061805166		
8	0061707235			27	0061805168		
9	0061707267			28	0061805170		
10	0061707304			29	0061805175		
11	0061707451			30	0061805180		
12	0061707537			31	0061805188		
13	0061707656			32	0061805190		
14	0061707697			33	0061805191		
15	0061707698			34	0061805197		
16	0061707702			35	0061805203		
17	0061711178			36	0061805205		
18	0061711183			37	0061805206		
19	0061711184			38	0061805212		

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: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4041 SUBJECT :MIL-Telugu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805228			58	0061805306		
40	0061805229			59	0061805309		
41	0061805233			60	0061805316		
42	0061805237			61	0061805319		
43	0061805244			62	0061805323		
44	0061805245			63	0061805324		
45	0061805246			64	0061805331		
46	0061805259			65	0061805334		
47	0061805261			66	0061805337		
48	0061805263			67	0061805340		
49	0061805266			68	0061805344		
50	0061805270			69	0061805346		
51	0061805271			70	0061805347		
52	0061805280			71	0061805356		
53	0061805286			72	0061805361		
54	0061805295			73	0061805363		
55	0061805301			74	0061805374		
56	0061805304			75	0061805375		
57	0061805305			76	0061805385		

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

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

D - FORM CUM ROOM WISE STATEMENT

DATE OF EXAMINATION: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4041 SUBJECT :MIL-Telugu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0061805387			96	0061805479		
78	0061805390			97	0061805481		
79	0061805397			98	0061805484		
80	0061805398			99	0061805488		
81	0061805401			100	0061805489		
82	0061805408			101	0061805491		
83	0061805409			102	0061805519		
84	0061805410			103	0061805520		
85	0061805418			104	0061805521		
86	0061805424			105	0061805525		
87	0061805425			106	0061805527		
88	0061805434			107	0061805528		
89	0061805446			108	0061805531		
90	0061805450			109	0061805535		
91	0061805463			110	0061805548		
92	0061805466			111	0061805552		
93	0061805472			112	0061805554		
94	0061805475			113	0061805571		
95	0061805476			114	0061805578		

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

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

D - FORM CUM ROOM WISE STATEMENT

DATE OF EXAMINATION: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4041 SUBJECT :MIL-Telugu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
115	0061805580			134	0061805754		
116	0061805590			135	0061805758		
117	0061805591			136	0061805760		
118	0061805595			137	0061805761		
119	0061805605			138	0061805769		
120	0061805625			139	0061805780		
121	0061805631			140	0061805785		
122	0061805634			141	0061805790		
123	0061805645			142	0061805791		
124	0061805648			143	0061805795		
125	0061805692			144	0061805797		
126	0061805697			145	0061806165		
127	0061805709			146	0061808454		
128	0061805712			147	0061808462		
129	0061805716			148	0061808464		
130	0061805720			149	0061808465		
131	0061805722			150	0061808466		
132	0061805735			151	0061808468		
133	0061805746			152	0061808470		

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: 24-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 **SCORE:** 4041 **SUBJECT :**MIL-Telugu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
153	0061808474						
154	0061808478						
155	0061808479						
156	0061808481						
157	0061808486						
158	0061808490						
159	0061808495						
160	0061808501						
161	0061808515						
162	0061808521						
163	0061808522						
164	0061808527						
165	0061808528						
166	0061808529						
167	0061808531						
168	0061808539						
169	0061820823						
170	0061841273						

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: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4042 SUBJECT :MIL-Hindi

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805221						
2	0061805279						
3	0061805281						
4	0061805335						
5	0061805358						
6	0061805394						
7	0061805400						
8	0061805428						
9	0061805442						
10	0061805443						
11	0061805649						
12	0061805685						
13	0061805703						
14	0061805755						

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: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4043 SUBJECT :MIL-Urdu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805288						
2	0061805399						
3	0061805702						

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: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4044 SUBJECT :MIL-F.Eng

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707061			20	0061805272		
2	0061707465			21	0061805282		
3	0061707618			22	0061805294		
4	0061707657			23	0061805296		
5	0061707699			24	0061805310		
6	0061711214			25	0061805338		
7	0061805155			26	0061805341		
8	0061805160			27	0061805342		
9	0061805176			28	0061805352		
10	0061805189			29	0061805355		
11	0061805196			30	0061805359		
12	0061805198			31	0061805384		
13	0061805220			32	0061805407		
14	0061805226			33	0061805412		
15	0061805230			34	0061805430		
16	0061805241			35	0061805437		
17	0061805242			36	0061805509		
18	0061805247			37	0061805526		
19	0061805248			38	0061805544		

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: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 4 SCORE: 4044 SUBJECT :MIL-F.Eng

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805550			58	0061805717		
40	0061805561			59	0061805767		
41	0061805562			60	0061805786		
42	0061805567			61	0061805798		
43	0061805568			62	0061808477		
44	0061805573			63	0061808514		
45	0061805584			64	0061808523		
46	0061805585			65	0061808537		
47	0061805586						
48	0061805593						
49	0061805600						
50	0061805604						
51	0061805606						
52	0061805622						
53	0061805628						
54	0061805646						
55	0061805661						
56	0061805700						
57	0061805701						

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 406 SUBJECT :English Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707128						
2	0061707460						
3	0061707559						
4	0061707618						
5	0061711157						
6	0061805280						
7	0061805296						
8	0061805428						
9	0061805430						
10	0061805466						
11	0061805525						
12	0061805544						
13	0061805702						
14	0061805703						
15	0061805769						
16	0061805780						
17	0061806165						
18	0061808490						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 407 SUBJECT :Hindi Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805221						
2	0061805279						
3	0061805335						
4	0061805356						
5	0061805358						
6	0061805400						
7	0061805442						
8	0061805685						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 408 SUBJECT :TELUGU Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707066			20	0061805385		
2	0061707068			21	0061805472		
3	0061707218			22	0061805481		
4	0061707697			23	0061805488		
5	0061707698			24	0061805519		
6	0061711178			25	0061805590		
7	0061711179			26	0061805591		
8	0061711204			27	0061805595		
9	0061711247			28	0061805625		
10	0061805197			29	0061805712		
11	0061805206			30	0061805760		
12	0061805245			31	0061808454		
13	0061805270			32	0061808464		
14	0061805271			33	0061808477		
15	0061805319			34	0061808521		
16	0061805323			35	0061820823		
17	0061805331						
18	0061805337						
19	0061805361						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 410 SUBJECT :COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707061			20	0061707588		
2	0061707100			21	0061707610		
3	0061707164			22	0061707656		
4	0061707194			23	0061707699		
5	0061707334			24	0061707741		
6	0061707340			25	0061711158		
7	0061707343			26	0061711214		
8	0061707345			27	0061711216		
9	0061707440			28	0061805155		
10	0061707456			29	0061805162		
11	0061707465			30	0061805166		
12	0061707480			31	0061805180		
13	0061707497			32	0061805190		
14	0061707499			33	0061805203		
15	0061707511			34	0061805233		
16	0061707536			35	0061805259		
17	0061707537			36	0061805261		
18	0061707558			37	0061805272		
19	0061707566			38	0061805281		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 410 SUBJECT :COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805282			58	0061805520		
40	0061805304			59	0061805567		
41	0061805310			60	0061805568		
42	0061805324			61	0061805573		
43	0061805338			62	0061805578		
44	0061805342			63	0061805584		
45	0061805347			64	0061805586		
46	0061805355			65	0061805622		
47	0061805363			66	0061805628		
48	0061805375			67	0061805631		
49	0061805407			68	0061805648		
50	0061805410			69	0061805661		
51	0061805412			70	0061805697		
52	0061805434			71	0061805709		
53	0061805437			72	0061805720		
54	0061805450			73	0061805786		
55	0061805475			74	0061805797		
56	0061805484			75	0061805798		
57	0061805489			76	0061808462		

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 410 SUBJECT :COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0061808481						
78	0061808495						
79	0061808501						
80	0061808522						
81	0061808523						
82	0061808527						
83	0061808529						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061805170						
2	0061805220						
3	0061805346						
4	0061805528						
5	0061805605						
6	0061805634						
7	0061805722						
8	0061805755						
9	0061805767						
10	0061805785						
11	0061808468						
12	0061808470						
13	0061808539						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 414 SUBJECT :CHEMISTRY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707187						
2	0061805163						
3	0061805188						
4	0061805196						
5	0061805229						
6	0061805263						
7	0061805295						
8	0061805305						
9	0061805306						
10	0061805387						
11	0061805425						
12	0061808466						
13	0061808514						
14	0061808528						

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 **SCODE:** 415 **SUBJECT :**Computer Applications

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061808478						
2	0061808479						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 416 SUBJECT :GEOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805527						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 417 SUBJECT :MATHEMATICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805316						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 420 SUBJECT :ECONOMICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707179			20	0061805795		
2	0061707228			21	0061808474		
3	0061707433						
4	0061707451						
5	0061707535						
6	0061707657						
7	0061711175						
8	0061805198						
9	0061805212						
10	0061805248						
11	0061805309						
12	0061805340						
13	0061805397						
14	0061805409						
15	0061805446						
16	0061805491						
17	0061805509						
18	0061805585						
19	0061805735						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061707173			20	0061805408		
2	0061707355			21	0061805418		
3	0061707394			22	0061805424		
4	0061707457			23	0061805463		
5	0061707519			24	0061805476		
6	0061707700			25	0061805521		
7	0061711183			26	0061805548		
8	0061711184			27	0061805552		
9	0061805175			28	0061805554		
10	0061805176			29	0061805561		
11	0061805228			30	0061805571		
12	0061805230			31	0061805717		
13	0061805301			32	0061805746		
14	0061805334			33	0061805791		
15	0061805341			34	0061808465		
16	0061805359			35	0061808515		
17	0061805390			36	0061808537		
18	0061805394			37	0061841273		
19	0061805401						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 423 SUBJECT :POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061805242		
2	0061707090			21	0061805244		
3	0061707124			22	0061805246		
4	0061707144			23	0061805247		
5	0061707267			24	0061805266		
6	0061707304			25	0061805286		
7	0061707571			26	0061805288		
8	0061707586			27	0061805294		
9	0061707613			28	0061805344		
10	0061707702			29	0061805352		
11	0061805153			30	0061805374		
12	0061805160			31	0061805384		
13	0061805168			32	0061805398		
14	0061805189			33	0061805443		
15	0061805191			34	0061805479		
16	0061805205			35	0061805526		
17	0061805226			36	0061805531		
18	0061805237			37	0061805535		
19	0061805241			38	0061805550		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 5 SCORE: 423 SUBJECT :POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805562						
40	0061805580						
41	0061805593						
42	0061805600						
43	0061805604						
44	0061805606						
45	0061805645						
46	0061805646						
47	0061805649						
48	0061805692						
49	0061805700						
50	0061805701						
51	0061805716						
52	0061805754						
53	0061805758						
54	0061805761						
55	0061805790						
56	0061808486						
57	0061808531						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 407 SUBJECT :Hindi Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805428						
2	0061805430						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 408 SUBJECT :TELUGU Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805335						
2	0061805356						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 410 SUBJECT :COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707559						
2	0061707618						
3	0061707698						
4	0061711168						
5	0061805296						
6	0061808490						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 411 SUBJECT :COMMERCE-11

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707061			20	0061707741		
2	0061707100			21	0061711158		
3	0061707163			22	0061711214		
4	0061707257			23	0061711216		
5	0061707276			24	0061711257		
6	0061707343			25	0061805155		
7	0061707344			26	0061805162		
8	0061707345			27	0061805166		
9	0061707417			28	0061805180		
10	0061707435			29	0061805190		
11	0061707465			30	0061805203		
12	0061707484			31	0061805233		
13	0061707499			32	0061805259		
14	0061707552			33	0061805261		
15	0061707566			34	0061805272		
16	0061707588			35	0061805281		
17	0061707610			36	0061805282		
18	0061707656			37	0061805304		
19	0061707699			38	0061805310		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 411 SUBJECT :COMMERCE-11

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805324			58	0061805573		
40	0061805338			59	0061805578		
41	0061805342			60	0061805584		
42	0061805347			61	0061805586		
43	0061805355			62	0061805622		
44	0061805363			63	0061805628		
45	0061805375			64	0061805631		
46	0061805407			65	0061805648		
47	0061805410			66	0061805661		
48	0061805412			67	0061805697		
49	0061805434			68	0061805709		
50	0061805437			69	0061805720		
51	0061805450			70	0061805786		
52	0061805475			71	0061805797		
53	0061805484			72	0061805798		
54	0061805489			73	0061808462		
55	0061805520			74	0061808481		
56	0061805567			75	0061808495		
57	0061805568			76	0061808501		

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 411 SUBJECT :COMMERCE-11

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0061808522						
78	0061808523						
79	0061808527						
80	0061808529						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061805170						
2	0061805220						
3	0061805346						
4	0061805605						
5	0061805634						
6	0061805722						
7	0061805755						
8	0061805767						
9	0061805785						
10	0061808468						
11	0061808470						
12	0061808539						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 416 SUBJECT :GEOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.		S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805528							

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 417 SUBJECT :MATHEMATICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707187						
2	0061805163						
3	0061805188						
4	0061805196						
5	0061805229						
6	0061805263						
7	0061805295						
8	0061805305						
9	0061805306						
10	0061805387						
11	0061805425						
12	0061805527						
13	0061808466						
14	0061808478						
15	0061808479						
16	0061808514						
17	0061808528						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 418 SUBJECT :PHYSICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707580						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 420 SUBJECT :ECONOMICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707697						
2	0061711178						
3	0061805279						
4	0061805519						
5	0061805712						
6	0061808454						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 421 SUBJECT :HISTORY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707179			20	0061805397		
2	0061707235			21	0061805409		
3	0061707451			22	0061805442		
4	0061707535			23	0061805446		
5	0061707542			24	0061805466		
6	0061711155			25	0061805481		
7	0061711175			26	0061805491		
8	0061805197			27	0061805509		
9	0061805198			28	0061805544		
10	0061805206			29	0061805585		
11	0061805212			30	0061805595		
12	0061805248			31	0061805702		
13	0061805270			32	0061805703		
14	0061805309			33	0061805735		
15	0061805316			34	0061805780		
16	0061805319			35	0061805795		
17	0061805340			36	0061806165		
18	0061805361			37	0061808474		
19	0061805385			38	0061808477		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 421 SUBJECT :HISTORY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061808521						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 422 SUBJECT :JOURNALISM

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805717						
2	0061805746						

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 423 SUBJECT :POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707059			20	0061805301		
2	0061707066			21	0061805323		
3	0061707068			22	0061805331		
4	0061707173			23	0061805334		
5	0061707184			24	0061805337		
6	0061707218			25	0061805341		
7	0061707355			26	0061805359		
8	0061707657			27	0061805390		
9	0061711179			28	0061805394		
10	0061711183			29	0061805400		
11	0061711184			30	0061805401		
12	0061711204			31	0061805408		
13	0061711247			32	0061805418		
14	0061805175			33	0061805424		
15	0061805176			34	0061805463		
16	0061805228			35	0061805472		
17	0061805230			36	0061805476		
18	0061805245			37	0061805488		
19	0061805271			38	0061805521		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 423 SUBJECT :POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805525						
40	0061805548						
41	0061805552						
42	0061805554						
43	0061805561						
44	0061805571						
45	0061805590						
46	0061805591						
47	0061805685						
48	0061805760						
49	0061805769						
50	0061805791						
51	0061808464						
52	0061808465						
53	0061808515						
54	0061808537						
55	0061841273						

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

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 425 SUBJECT :PUBLIC ADMINISTRATION

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061805246		
2	0061707124			21	0061805247		
3	0061707144			22	0061805266		
4	0061707267			23	0061805280		
5	0061707304			24	0061805286		
6	0061707586			25	0061805288		
7	0061707702			26	0061805294		
8	0061805153			27	0061805344		
9	0061805160			28	0061805352		
10	0061805168			29	0061805358		
11	0061805189			30	0061805374		
12	0061805191			31	0061805384		
13	0061805205			32	0061805398		
14	0061805221			33	0061805443		
15	0061805226			34	0061805479		
16	0061805237			35	0061805526		
17	0061805241			36	0061805531		
18	0061805242			37	0061805535		
19	0061805244			38	0061805550		

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: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 6 SCORE: 425 SUBJECT :PUBLIC ADMINISTRATION

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805562			58	0061808531		
40	0061805580			59	0061820823		
41	0061805593						
42	0061805600						
43	0061805604						
44	0061805606						
45	0061805625						
46	0061805645						
47	0061805646						
48	0061805649						
49	0061805692						
50	0061805700						
51	0061805701						
52	0061805716						
53	0061805754						
54	0061805758						
55	0061805761						
56	0061805790						
57	0061808486						

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 411 SUBJECT :COMMERCE-11

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707618						
2	0061707698						
3	0061711168						
4	0061805296						
5	0061808490						

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 **SCODE:** 412 **SUBJECT :**COMMERCE-12

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707061			20	0061711158		
2	0061707100			21	0061711214		
3	0061707276			22	0061711216		
4	0061707334			23	0061711257		
5	0061707340			24	0061805162		
6	0061707345			25	0061805166		
7	0061707417			26	0061805180		
8	0061707435			27	0061805190		
9	0061707465			28	0061805203		
10	0061707484			29	0061805233		
11	0061707497			30	0061805259		
12	0061707511			31	0061805261		
13	0061707537			32	0061805272		
14	0061707552			33	0061805281		
15	0061707558			34	0061805304		
16	0061707588			35	0061805310		
17	0061707610			36	0061805324		
18	0061707699			37	0061805338		
19	0061707741			38	0061805342		

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 412 SUBJECT :COMMERCE-12

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805355			58	0061805648		
40	0061805363			59	0061805709		
41	0061805375			60	0061805720		
42	0061805407			61	0061805786		
43	0061805410			62	0061805797		
44	0061805412			63	0061805798		
45	0061805434			64	0061808462		
46	0061805437			65	0061808495		
47	0061805450			66	0061808501		
48	0061805475			67	0061808522		
49	0061805484			68	0061808523		
50	0061805489			69	0061808527		
51	0061805567			70	0061808529		
52	0061805568						
53	0061805573						
54	0061805578						
55	0061805584						
56	0061805586						
57	0061805631						

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

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

D - FORM CUM ROOM WISE STATEMENT

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 **SCODE:** 415 **SUBJECT :**Computer Applications

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061805282						
2	0061805628						
3	0061805661						

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 418 SUBJECT :PHYSICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707187						
2	0061707389						
3	0061805163						
4	0061805188						
5	0061805196						
6	0061805229						
7	0061805263						
8	0061805295						
9	0061805305						
10	0061805306						
11	0061805425						
12	0061805527						
13	0061808466						
14	0061808514						
15	0061808528						

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

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	0061805170						
2	0061805220						
3	0061805346						
4	0061805387						
5	0061805528						
6	0061805605						
7	0061805634						
8	0061805722						
9	0061805755						
10	0061805767						
11	0061805785						
12	0061808468						
13	0061808470						
14	0061808539						

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 the Invigilator

Signature of Chief Superintendent

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

D - FORM CUM ROOM WISE STATEMENT

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 420 SUBJECT :ECONOMICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707656						
2	0061805347						
3	0061805622						
4	0061805697						

Total No.of Absentees :
in this Sheet

Total No.of Mal Practice Cases :
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Total No.of Present :
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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: 27-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 421 SUBJECT :HISTORY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707697						
2	0061805335						
3	0061805356						
4	0061805520						
5	0061808454						
6	0061808481						

Total No.of Absentees :
in this Sheet

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

D - FORM CUM ROOM WISE STATEMENT

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 422 SUBJECT :JOURNALISM

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061711175						

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 423 SUBJECT :POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707179			20	0061805544		
2	0061707235			21	0061805595		
3	0061707451			22	0061805717		
4	0061707535			23	0061805746		
5	0061711178			24	0061806165		
6	0061805155			25	0061808477		
7	0061805197			26	0061808521		
8	0061805198						
9	0061805212						
10	0061805270						
11	0061805279						
12	0061805316						
13	0061805319						
14	0061805340						
15	0061805385						
16	0061805397						
17	0061805409						
18	0061805442						
19	0061805509						

Total No.of Absentees :
in this Sheet

Total No.of Mal Practice Cases :
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Total No.of Present :
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Note : Please write **Absent** or **Mal Practice**
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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: 27-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 424 SUBJECT :PSYCHOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061711265						
2	0061805780						

Total No.of Absentees :
in this Sheet

Total No.of Mal Practice Cases :
in this Sheet

Total No.of Present :
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Note : Please write **Absent** or **Mal Practice**
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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: 27-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 425 SUBJECT :PUBLIC ADMINISTRATION

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707218			20	0061805394		
2	0061707464			21	0061805418		
3	0061707657			22	0061805424		
4	0061711179			23	0061805430		
5	0061711183			24	0061805476		
6	0061711184			25	0061805488		
7	0061711204			26	0061805521		
8	0061711247			27	0061805525		
9	0061805206			28	0061805548		
10	0061805228			29	0061805552		
11	0061805230			30	0061805554		
12	0061805245			31	0061805685		
13	0061805271			32	0061805702		
14	0061805309			33	0061805703		
15	0061805334			34	0061805735		
16	0061805337			35	0061805769		
17	0061805341			36	0061805795		
18	0061805359			37	0061808465		
19	0061805390			38	0061808515		

Total No.of Absentees :
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Total No.of Mal Practice Cases :
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Total No.of Present :
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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: 27-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 426 SUBJECT :SOCIOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061707058			20	0061805205		
2	0061707066			21	0061805221		
3	0061707068			22	0061805226		
4	0061707124			23	0061805237		
5	0061707128			24	0061805241		
6	0061707172			25	0061805242		
7	0061707267			26	0061805244		
8	0061707304			27	0061805246		
9	0061707549			28	0061805247		
10	0061707702			29	0061805248		
11	0061711246			30	0061805266		
12	0061711269			31	0061805280		
13	0061805153			32	0061805286		
14	0061805160			33	0061805288		
15	0061805168			34	0061805294		
16	0061805175			35	0061805301		
17	0061805176			36	0061805323		
18	0061805189			37	0061805331		
19	0061805191			38	0061805344		

Total No.of Absentees :
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Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD
EXAMINATION BRANCH

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 426 SUBJECT :SOCIOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0061805352			58	0061805526		
40	0061805358			59	0061805531		
41	0061805361			60	0061805535		
42	0061805374			61	0061805550		
43	0061805384			62	0061805561		
44	0061805398			63	0061805562		
45	0061805400			64	0061805571		
46	0061805401			65	0061805580		
47	0061805408			66	0061805585		
48	0061805428			67	0061805590		
49	0061805443			68	0061805591		
50	0061805446			69	0061805593		
51	0061805463			70	0061805600		
52	0061805466			71	0061805604		
53	0061805472			72	0061805606		
54	0061805479			73	0061805625		
55	0061805481			74	0061805645		
56	0061805491			75	0061805646		
57	0061805519			76	0061805649		

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

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

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 426 SUBJECT :SOCIOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0061805692						
78	0061805700						
79	0061805701						
80	0061805712						
81	0061805716						
82	0061805754						
83	0061805758						
84	0061805760						
85	0061805761						
86	0061805790						
87	0061805791						
88	0061808464						
89	0061808474						
90	0061808486						
91	0061808531						
92	0061808537						
93	0061820823						
94	0061841273						

Total No.of Absentees :
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EXAMINATION BRANCH

D - FORM CUM ROOM WISE STATEMENT

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

CENTRE: 006 SRR GOVT.DEG.COLLEGE,KARIMNAGAR,KARIMNAGAR DIST.

DAY OF THE EXAM : 7 SCORE: 427 SUBJECT :Statistics

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0061808478						
2	0061808479						

Total No.of Absentees :
in this Sheet

Total No.of Mal Practice Cases :
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Total No.of Present :
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