

**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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839173						
2	0351839269						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839176						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
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Total No.of Present :  
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**Signature of Chief Superintendent**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 1 **SCODE:** 4050901 **SUBJECT :**Urdu Literature (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753186						
2	0351753316						
3	0351753402						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753152			20	0351839186		
2	0351753223			21	0351839195		
3	0351753302			22	0351839234		
4	0351753341			23	0351839250		
5	0351753460			24	0351839267		
6	0351839012			25	0351839268		
7	0351839022						
8	0351839027						
9	0351839031						
10	0351839032						
11	0351839046						
12	0351839049						
13	0351839071						
14	0351839104						
15	0351839129						
16	0351839141						
17	0351839142						
18	0351839145						
19	0351839172						

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

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839035						
2	0351839290						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839105						

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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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839144						
2	0351839244						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839051						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839042						
2	0351839073						
3	0351839098						
4	0351839109						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 1 **SCODE:** 4051601 **SUBJECT :** GEOLOGY (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839160						
2	0351839212						

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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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839106						

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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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753330						
2	0351839052						
3	0351839125						
4	0351839284						
5	0351839288						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753464						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839154						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839019						
2	0351839056						
3	0351839057						
4	0351839077						
5	0351839079						
6	0351839083						
7	0351839169						
8	0351839231						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839108						
2	0351839199						
3	0351839205						
4	0351839258						
5	0351839271						
6	0351839292						
7	0351839297						
8	0351839305						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753198			20	0351839283		
2	0351753205						
3	0351753206						
4	0351839005						
5	0351839037						
6	0351839038						
7	0351839043						
8	0351839081						
9	0351839085						
10	0351839086						
11	0351839093						
12	0351839095						
13	0351839107						
14	0351839130						
15	0351839131						
16	0351839146						
17	0351839170						
18	0351839248						
19	0351839251						

Total No.of Absentees :    
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753192						
2	0351753351						
3	0351839008						
4	0351839011						
5	0351839023						
6	0351839024						
7	0351839041						
8	0351839059						
9	0351839060						
10	0351839061						
11	0351839140						
12	0351839159						
13	0351839168						
14	0351839178						
15	0351839197						
16	0351839204						
17	0351839215						
18	0351839216						
19	0351839266						

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 Chief Superintendent

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753253						
2	0351753260						
3	0351753422						
4	0351839044						
5	0351839089						
6	0351839135						
7	0351839152						
8	0351839213						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839173						
2	0351839269						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 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	0351839176						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 4050902 **SUBJECT :**Urdu Literature (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753186						
2	0351753316						
3	0351753402						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 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	0351753152			20	0351839145		
2	0351753168			21	0351839172		
3	0351753189			22	0351839186		
4	0351753223			23	0351839195		
5	0351753298			24	0351839234		
6	0351753310			25	0351839250		
7	0351753341			26	0351839267		
8	0351839012			27	0351839268		
9	0351839022						
10	0351839027						
11	0351839031						
12	0351839032						
13	0351839046						
14	0351839049						
15	0351839071						
16	0351839104						
17	0351839129						
18	0351839141						
19	0351839142						

Total No.of Absentees :    
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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839035						
2	0351839290						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839105						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839144						
2	0351839244						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839051						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839042						
2	0351839073						
3	0351839098						
4	0351839109						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 4051602 **SUBJECT :** GEOLOGY (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839160						
2	0351839212						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839106						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753177						
2	0351753330						
3	0351753339						
4	0351839052						
5	0351839125						
6	0351839284						
7	0351839288						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753464						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839154						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 4052102 **SUBJECT :**HISTORY:DIGITAL GOVERNANCE (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839019						
2	0351839056						
3	0351839057						
4	0351839077						
5	0351839079						
6	0351839083						
7	0351839169						
8	0351839231						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839108						
2	0351839199						
3	0351839205						
4	0351839258						
5	0351839271						
6	0351839292						
7	0351839297						
8	0351839305						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753205			20	0351839251		
2	0351753206			21	0351839283		
3	0351753300						
4	0351753333						
5	0351839005						
6	0351839037						
7	0351839038						
8	0351839043						
9	0351839081						
10	0351839085						
11	0351839086						
12	0351839093						
13	0351839095						
14	0351839107						
15	0351839130						
16	0351839131						
17	0351839146						
18	0351839170						
19	0351839248						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 4052502 **SUBJECT :PUBLIC ADMINISTRATION :DIGITAL GOVERNANCE (SEEC 2)**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753161			20	0351839266		
2	0351753192						
3	0351753351						
4	0351839008						
5	0351839011						
6	0351839023						
7	0351839024						
8	0351839041						
9	0351839059						
10	0351839060						
11	0351839061						
12	0351839140						
13	0351839159						
14	0351839168						
15	0351839178						
16	0351839197						
17	0351839204						
18	0351839215						
19	0351839216						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 2 **SCODE:** 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	0351753253						
2	0351753260						
3	0351753361						
4	0351753470						
5	0351839044						
6	0351839089						
7	0351839135						
8	0351839152						
9	0351839213						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753152			20	0351839019		
2	0351753186			21	0351839022		
3	0351753192			22	0351839023		
4	0351753205			23	0351839024		
5	0351753206			24	0351839027		
6	0351753223			25	0351839031		
7	0351753253			26	0351839032		
8	0351753278			27	0351839035		
9	0351753316			28	0351839037		
10	0351753330			29	0351839038		
11	0351753341			30	0351839041		
12	0351753351			31	0351839042		
13	0351753402			32	0351839043		
14	0351753470			33	0351839044		
15	0351753499			34	0351839046		
16	0351839005			35	0351839049		
17	0351839008			36	0351839051		
18	0351839011			37	0351839052		
19	0351839012			38	0351839056		

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0351839057			58	0351839106		
40	0351839059			59	0351839107		
41	0351839060			60	0351839108		
42	0351839061			61	0351839109		
43	0351839064			62	0351839125		
44	0351839071			63	0351839129		
45	0351839073			64	0351839130		
46	0351839077			65	0351839131		
47	0351839079			66	0351839135		
48	0351839081			67	0351839140		
49	0351839083			68	0351839141		
50	0351839085			69	0351839142		
51	0351839086			70	0351839144		
52	0351839089			71	0351839145		
53	0351839093			72	0351839146		
54	0351839095			73	0351839152		
55	0351839098			74	0351839154		
56	0351839104			75	0351839159		
57	0351839105			76	0351839160		

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0351839168			96	0351839234		
78	0351839169			97	0351839244		
79	0351839170			98	0351839248		
80	0351839172			99	0351839250		
81	0351839173			100	0351839251		
82	0351839176			101	0351839258		
83	0351839178			102	0351839266		
84	0351839185			103	0351839267		
85	0351839186			104	0351839268		
86	0351839195			105	0351839269		
87	0351839197			106	0351839271		
88	0351839199			107	0351839283		
89	0351839204			108	0351839284		
90	0351839205			109	0351839288		
91	0351839212			110	0351839290		
92	0351839213			111	0351839292		
93	0351839215			112	0351839297		
94	0351839216			113	0351839305		
95	0351839231						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753152			20	0351839060		
2	0351753177			21	0351839079		
3	0351753205			22	0351839085		
4	0351753206			23	0351839086		
5	0351753278			24	0351839089		
6	0351753341			25	0351839104		
7	0351753351			26	0351839105		
8	0351753464			27	0351839130		
9	0351753470			28	0351839135		
10	0351839008			29	0351839144		
11	0351839011			30	0351839145		
12	0351839022			31	0351839146		
13	0351839023			32	0351839152		
14	0351839024			33	0351839159		
15	0351839037			34	0351839160		
16	0351839038			35	0351839169		
17	0351839041			36	0351839170		
18	0351839043			37	0351839172		
19	0351839052			38	0351839178		

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0351839186						
40	0351839195						
41	0351839197						
42	0351839199						
43	0351839204						
44	0351839212						
45	0351839213						
46	0351839244						
47	0351839248						
48	0351839251						
49	0351839258						
50	0351839266						
51	0351839292						
52	0351839297						
53	0351839305						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 4 **SCODE:** 4042 **SUBJECT :**MIL-Hindi

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753223						
2	0351753330						
3	0351839027						
4	0351839051						
5	0351839098						
6	0351839108						
7	0351839109						
8	0351839131						
9	0351839140						
10	0351839176						
11	0351839205						
12	0351839284						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 4 **SCODE:** 4043 **SUBJECT :**MIL-Urdu

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753186						
2	0351753316						
3	0351753402						
4	0351753451						
5	0351839032						
6	0351839064						
7	0351839093						
8	0351839106						
9	0351839141						
10	0351839142						
11	0351839185						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753192			20	0351839081		
2	0351753248			21	0351839083		
3	0351753260			22	0351839095		
4	0351839005			23	0351839107		
5	0351839012			24	0351839125		
6	0351839019			25	0351839129		
7	0351839031			26	0351839154		
8	0351839035			27	0351839168		
9	0351839042			28	0351839173		
10	0351839044			29	0351839215		
11	0351839046			30	0351839216		
12	0351839049			31	0351839231		
13	0351839056			32	0351839234		
14	0351839057			33	0351839250		
15	0351839059			34	0351839267		
16	0351839061			35	0351839268		
17	0351839071			36	0351839269		
18	0351839073			37	0351839271		
19	0351839077			38	0351839283		

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0351839288						
40	0351839290						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 406 **SUBJECT :**English Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753476						
2	0351839071						
3	0351839173						
4	0351839269						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 407 **SUBJECT :**Hindi Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839108						

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**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	0351839176						
2	0351839197						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 409 **SUBJECT :**Urdu Literature

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753186						
2	0351753316						
3	0351753402						
4	0351839106						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5

**SCODE:** 410

**SUBJECT :**COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753152			20	0351839049		
2	0351753168			21	0351839056		
3	0351753179			22	0351839057		
4	0351753189			23	0351839073		
5	0351753223			24	0351839077		
6	0351753302			25	0351839098		
7	0351753310			26	0351839104		
8	0351753341			27	0351839105		
9	0351753445			28	0351839109		
10	0351753451			29	0351839129		
11	0351753460			30	0351839135		
12	0351753479			31	0351839141		
13	0351839012			32	0351839142		
14	0351839022			33	0351839145		
15	0351839027			34	0351839172		
16	0351839031			35	0351839186		
17	0351839032			36	0351839195		
18	0351839035			37	0351839234		
19	0351839046			38	0351839250		

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 410 **SUBJECT :**COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0351839267						
40	0351839268						
41	0351839290						
42	0351839292						
43	0351839297						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753464						
2	0351839144						
3	0351839244						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 414 **SUBJECT :**CHEMISTRY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753177						
2	0351753243						
3	0351753263						
4	0351753330						
5	0351753331						
6	0351753339						
7	0351839051						
8	0351839052						
9	0351839125						
10	0351839284						
11	0351839288						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839042						
2	0351839212						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 416 **SUBJECT :** GEOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839160						

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**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	0351753453							

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 420 **SUBJECT :**ECONOMICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753205						
2	0351753206						
3	0351753300						
4	0351753470						
5	0351839154						
6	0351839169						

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**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	0351753278						
2	0351839019						
3	0351839037						
4	0351839038						
5	0351839079						
6	0351839083						
7	0351839146						
8	0351839152						
9	0351839168						
10	0351839231						
11	0351839283						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 422 **SUBJECT :**JOURNALISM

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839085						
2	0351839199						
3	0351839205						
4	0351839215						
5	0351839216						
6	0351839258						
7	0351839271						
8	0351839305						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 5 **SCODE:** 423 **SUBJECT :** POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753192			20	0351839093		
2	0351753253			21	0351839095		
3	0351753260			22	0351839107		
4	0351753351			23	0351839130		
5	0351753422			24	0351839131		
6	0351839005			25	0351839140		
7	0351839008			26	0351839159		
8	0351839011			27	0351839170		
9	0351839023			28	0351839178		
10	0351839024			29	0351839204		
11	0351839041			30	0351839213		
12	0351839043			31	0351839248		
13	0351839044			32	0351839251		
14	0351839059			33	0351839266		
15	0351839060						
16	0351839061						
17	0351839081						
18	0351839086						
19	0351839089						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6 **SCODE:** 410 **SUBJECT :**COMMERCE-10

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753186						
2	0351753329						
3	0351753476						
4	0351839071						

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**  
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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6

**SCODE:** 411

**SUBJECT :**COMMERCE-11

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753152			20	0351839098		
2	0351753168			21	0351839104		
3	0351753189			22	0351839105		
4	0351753223			23	0351839109		
5	0351753341			24	0351839129		
6	0351753451			25	0351839135		
7	0351753479			26	0351839141		
8	0351839012			27	0351839142		
9	0351839022			28	0351839145		
10	0351839027			29	0351839172		
11	0351839031			30	0351839186		
12	0351839032			31	0351839195		
13	0351839035			32	0351839234		
14	0351839046			33	0351839250		
15	0351839049			34	0351839267		
16	0351839056			35	0351839268		
17	0351839057			36	0351839290		
18	0351839073			37	0351839292		
19	0351839077			38	0351839297		

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**DAY OF THE EXAM : 6      SCORE: 413      SUBJECT :BOTANY**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753246						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753464						
2	0351839144						
3	0351839244						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6 **SCODE:** 416 **SUBJECT :** GEOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839212						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6 **SCODE:** 417 **SUBJECT :** MATHEMATICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753177						
2	0351753243						
3	0351753263						
4	0351753330						
5	0351753331						
6	0351753339						
7	0351839042						
8	0351839051						
9	0351839052						
10	0351839106						
11	0351839125						
12	0351839160						
13	0351839284						
14	0351839288						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6 **SCODE:** 420 **SUBJECT :**ECONOMICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839176						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6 **SCODE:** 421 **SUBJECT :** HISTORY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753161						
2	0351753205						
3	0351753206						
4	0351753300						
5	0351839169						
6	0351839173						
7	0351839197						
8	0351839269						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6 **SCODE:** 422 **SUBJECT :**JOURNALISM

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839083						
2	0351839108						
3	0351839154						

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**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	0351753179			20	0351839305		
2	0351753198						
3	0351753316						
4	0351753402						
5	0351839019						
6	0351839037						
7	0351839038						
8	0351839079						
9	0351839085						
10	0351839146						
11	0351839168						
12	0351839199						
13	0351839205						
14	0351839215						
15	0351839216						
16	0351839231						
17	0351839258						
18	0351839271						
19	0351839283						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 6

**SCODE:** 425

**SUBJECT :**PUBLIC ADMINISTRATION

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753192			20	0351839095		
2	0351753260			21	0351839107		
3	0351753351			22	0351839130		
4	0351753422			23	0351839131		
5	0351839005			24	0351839140		
6	0351839008			25	0351839152		
7	0351839011			26	0351839159		
8	0351839023			27	0351839170		
9	0351839024			28	0351839178		
10	0351839041			29	0351839204		
11	0351839043			30	0351839213		
12	0351839044			31	0351839248		
13	0351839059			32	0351839251		
14	0351839060			33	0351839266		
15	0351839061						
16	0351839081						
17	0351839086						
18	0351839089						
19	0351839093						

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**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	0351753186						
2	0351753329						
3	0351753476						
4	0351839071						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351753152			20	0351839142		
2	0351753189			21	0351839145		
3	0351753223			22	0351839172		
4	0351753298			23	0351839186		
5	0351753302			24	0351839195		
6	0351753341			25	0351839250		
7	0351753445			26	0351839267		
8	0351753451			27	0351839268		
9	0351839012			28	0351839290		
10	0351839022						
11	0351839027						
12	0351839031						
13	0351839032						
14	0351839035						
15	0351839046						
16	0351839104						
17	0351839105						
18	0351839129						
19	0351839141						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**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	0351839073						
2	0351839098						
3	0351839109						
4	0351839234						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 418 **SUBJECT :**PHYSICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753177						
2	0351753243						
3	0351753263						
4	0351753322						
5	0351753330						
6	0351753331						
7	0351753342						
8	0351839042						
9	0351839051						
10	0351839052						
11	0351839125						
12	0351839160						
13	0351839284						
14	0351839288						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753246						
2	0351753464						
3	0351839144						
4	0351839244						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 420 **SUBJECT :**ECONOMICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753460						
2	0351839049						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 421 **SUBJECT :**HISTORY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839056						
2	0351839057						
3	0351839077						
4	0351839176						

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**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 422 **SUBJECT :**JOURNALISM

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351839292						
2	0351839297						

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 423 **SUBJECT :** POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753205						
2	0351753206						
3	0351753300						
4	0351839154						
5	0351839269						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
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Signature of the Invigilator

Signature of Chief Superintendent

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

**D - FORM CUM ROOM WISE STATEMENT**

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**CENTRE:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 425 **SUBJECT :** PUBLIC ADMINISTRATION

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0351753179			20	0351839283		
2	0351753316			21	0351839305		
3	0351753402						
4	0351839019						
5	0351839037						
6	0351839038						
7	0351839079						
8	0351839085						
9	0351839106						
10	0351839108						
11	0351839146						
12	0351839168						
13	0351839169						
14	0351839197						
15	0351839215						
16	0351839216						
17	0351839231						
18	0351839258						
19	0351839271						

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: 035 Govt. Jr. College, Kachiguda, Hyderabad.**

**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	0351753192			20	0351839086		
2	0351753253			21	0351839089		
3	0351753260			22	0351839093		
4	0351753351			23	0351839095		
5	0351753361			24	0351839107		
6	0351753470			25	0351839130		
7	0351839005			26	0351839131		
8	0351839008			27	0351839135		
9	0351839011			28	0351839140		
10	0351839023			29	0351839152		
11	0351839024			30	0351839159		
12	0351839041			31	0351839170		
13	0351839043			32	0351839173		
14	0351839044			33	0351839178		
15	0351839059			34	0351839199		
16	0351839060			35	0351839204		
17	0351839061			36	0351839205		
18	0351839081			37	0351839212		
19	0351839083			38	0351839213		

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:** 035 Govt. Jr. College, Kachiguda, Hyderabad.

**DAY OF THE EXAM :** 7 **SCODE:** 426 **SUBJECT :** SOCIOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0351839248						
40	0351839251						
41	0351839266						

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