

**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:** 065 Govt. Degree College, Kuppam

**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	0651846043						
2	0651846081						

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846098						

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**DAY OF THE EXAM :** 1 **SCORE:** 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	0651761499						
2	0651761515						
3	0651761564						
4	0651846002						
5	0651846010						
6	0651846012						
7	0651846023						
8	0651846024						
9	0651846027						
10	0651846071						
11	0651846082						
12	0651846086						
13	0651846096						
14	0651846105						
15	0651846106						
16	0651846123						
17	0651846125						
18	0651846126						
19	0651846135						

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 Chief Superintendent

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846111						

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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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846089						

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846093						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846051						

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

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846067						
2	0651846110						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent



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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651761453						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

**Signature of the Invigilator**

**Signature of Chief Superintendent**

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846019			20	0651846121		
2	0651846022			21	0651846129		
3	0651846031			22	0651846134		
4	0651846037			23	0651846137		
5	0651846048						
6	0651846050						
7	0651846056						
8	0651846057						
9	0651846064						
10	0651846073						
11	0651846075						
12	0651846104						
13	0651846108						
14	0651846109						
15	0651846113						
16	0651846116						
17	0651846117						
18	0651846118						
19	0651846119						

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

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**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651761554						
2	0651846020						
3	0651846039						

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:** 065 Govt. Degree College, Kuppam

**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	0651846122						

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

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**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846043						
2	0651846081						

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:** 065 Govt. Degree College, Kuppam

**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	0651846098						

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:** 065 Govt. Degree College, Kuppam

**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	0651761480			20	0651846135		
2	0651761499						
3	0651761502						
4	0651761564						
5	0651846002						
6	0651846010						
7	0651846012						
8	0651846023						
9	0651846024						
10	0651846027						
11	0651846071						
12	0651846082						
13	0651846086						
14	0651846096						
15	0651846105						
16	0651846106						
17	0651846123						
18	0651846125						
19	0651846126						

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:** 065 Govt. Degree College, Kuppam

**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	0651846111						

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 Chief Superintendent



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**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846089						

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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Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
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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:** 065 Govt. Degree College, Kuppam

**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	0651846093						

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:** 065 Govt. Degree College, Kuppam

**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	0651846051						

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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Signature of Chief Superintendent

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846067						
2	0651846110						

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651846019			20	0651846121		
2	0651846022			21	0651846129		
3	0651846031			22	0651846134		
4	0651846037			23	0651846137		
5	0651846048						
6	0651846050						
7	0651846056						
8	0651846057						
9	0651846064						
10	0651846073						
11	0651846075						
12	0651846104						
13	0651846108						
14	0651846109						
15	0651846113						
16	0651846116						
17	0651846117						
18	0651846118						
19	0651846119						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of the Invigilator**

**Signature of Chief Superintendent**

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

**CENTRE:** 065 Govt. Degree College, Kuppam

**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	0651761554						
2	0651846020						
3	0651846039						

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:** 065 Govt. Degree College, Kuppam

**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	0651846122							

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: 065 Govt. Degree College, Kuppam**

**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	0651761499			20	0651846051		
2	0651761515			21	0651846056		
3	0651761554			22	0651846057		
4	0651761564			23	0651846064		
5	0651846002			24	0651846067		
6	0651846010			25	0651846071		
7	0651846012			26	0651846073		
8	0651846019			27	0651846075		
9	0651846020			28	0651846081		
10	0651846022			29	0651846082		
11	0651846023			30	0651846086		
12	0651846024			31	0651846089		
13	0651846027			32	0651846093		
14	0651846031			33	0651846096		
15	0651846037			34	0651846098		
16	0651846039			35	0651846104		
17	0651846043			36	0651846105		
18	0651846048			37	0651846106		
19	0651846050			38	0651846108		

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: 065 Govt. Degree College, Kuppam**

**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	0651846109						
40	0651846110						
41	0651846111						
42	0651846113						
43	0651846116						
44	0651846117						
45	0651846118						
46	0651846119						
47	0651846121						
48	0651846122						
49	0651846123						
50	0651846125						
51	0651846126						
52	0651846129						
53	0651846134						
54	0651846135						
55	0651846137						

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:** 065 Govt. Degree College, Kuppam

**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	0651761499			20	0651846057		
2	0651761554			21	0651846064		
3	0651761564			22	0651846067		
4	0651846002			23	0651846071		
5	0651846010			24	0651846075		
6	0651846012			25	0651846082		
7	0651846019			26	0651846086		
8	0651846020			27	0651846093		
9	0651846022			28	0651846096		
10	0651846023			29	0651846098		
11	0651846024			30	0651846104		
12	0651846027			31	0651846105		
13	0651846031			32	0651846106		
14	0651846037			33	0651846109		
15	0651846039			34	0651846110		
16	0651846048			35	0651846111		
17	0651846050			36	0651846113		
18	0651846051			37	0651846116		
19	0651846056			38	0651846117		

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: 065 Govt. Degree College, Kuppam**

**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	0651846118						
40	0651846119						
41	0651846121						
42	0651846123						
43	0651846125						
44	0651846126						
45	0651846134						
46	0651846135						
47	0651846137						

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: 065 Govt. Degree College, Kuppam**

**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	0651846043						
2	0651846129						

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:** 065 Govt. Degree College, Kuppam

**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	0651846073						
2	0651846081						
3	0651846089						
4	0651846108						
5	0651846122						

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:** 065 Govt. Degree College, Kuppam

**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	0651761554						
2	0651846037						
3	0651846043						
4	0651846081						
5	0651846121						

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: 065 Govt. Degree College, Kuppam**

**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	0651846129						

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: 065 Govt. Degree College, Kuppam**

**DAY OF THE EXAM : 5**

**SCODE: 408**

**SUBJECT :TELUGU Literature**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0651846098						
2	0651846134						
3	0651846137						

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

**CENTRE: 065 Govt. Degree College, Kuppam**

**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	0651761407			20	0651846105		
2	0651761414			21	0651846106		
3	0651761445			22	0651846111		
4	0651761457			23	0651846123		
5	0651761499			24	0651846125		
6	0651761502			25	0651846126		
7	0651761515			26	0651846135		
8	0651761564						
9	0651846002						
10	0651846010						
11	0651846012						
12	0651846023						
13	0651846024						
14	0651846027						
15	0651846071						
16	0651846082						
17	0651846086						
18	0651846089						
19	0651846096						

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: 065 Govt. Degree College, Kuppam**

**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	0651846051						
2	0651846093						

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: 065 Govt. Degree College, Kuppam**

**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	0651846067						
2	0651846110						

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: 065 Govt. Degree College, Kuppam**

**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	0651846019						
2	0651846020						

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: 065 Govt. Degree College, Kuppam**

**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	0651761432						
2	0651846022						
3	0651846031						
4	0651846048						
5	0651846050						
6	0651846056						
7	0651846057						
8	0651846064						
9	0651846073						
10	0651846075						
11	0651846108						
12	0651846109						
13	0651846113						
14	0651846116						
15	0651846117						
16	0651846118						
17	0651846119						
18	0651846122						

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: 065 Govt. Degree College, Kuppam**

**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	0651846039						
2	0651846104						

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: 065 Govt. Degree College, Kuppam**

**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	0651761407			20	0651846106		
2	0651761457			21	0651846111		
3	0651761499			22	0651846123		
4	0651761502			23	0651846125		
5	0651761515			24	0651846126		
6	0651761561			25	0651846135		
7	0651761564						
8	0651846002						
9	0651846010						
10	0651846012						
11	0651846023						
12	0651846024						
13	0651846027						
14	0651846071						
15	0651846082						
16	0651846086						
17	0651846089						
18	0651846096						
19	0651846105						

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: 065 Govt. Degree College, Kuppam**

**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	0651846043						

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: 065 Govt. Degree College, Kuppam**

**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	0651761507						
2	0651846051						
3	0651846093						

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: 065 Govt. Degree College, Kuppam**

**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	0651846067						
2	0651846098						
3	0651846110						

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:** 065 Govt. Degree College, Kuppam

**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	0651846137						

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: 065 Govt. Degree College, Kuppam**

**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	0651761426			20	0651846118		
2	0651761432			21	0651846119		
3	0651846019			22	0651846121		
4	0651846020			23	0651846122		
5	0651846022			24	0651846129		
6	0651846031			25	0651846134		
7	0651846037						
8	0651846048						
9	0651846050						
10	0651846056						
11	0651846057						
12	0651846064						
13	0651846073						
14	0651846075						
15	0651846108						
16	0651846109						
17	0651846113						
18	0651846116						
19	0651846117						

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:** 065 Govt. Degree College, Kuppam

**DAY OF THE EXAM :** 6 **SCODE:** 423 **SUBJECT :** POLITICAL SCIENCE

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0651761554						
2	0651846039						
3	0651846081						

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:** 065 Govt. Degree College, Kuppam

**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	0651846104						

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: 065 Govt. Degree College, Kuppam**

**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.
1	0651761499			20	0651846125		
2	0651761502			21	0651846126		
3	0651761515			22	0651846135		
4	0651761564						
5	0651846002						
6	0651846010						
7	0651846012						
8	0651846023						
9	0651846024						
10	0651846027						
11	0651846071						
12	0651846082						
13	0651846086						
14	0651846089						
15	0651846096						
16	0651846105						
17	0651846106						
18	0651846111						
19	0651846123						

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: 065 Govt. Degree College, Kuppam**

**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	0651846067						
2	0651846098						
3	0651846110						

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: 065 Govt. Degree College, Kuppam**

**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	0651846043						
2	0651846051						
3	0651846093						

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: 065 Govt. Degree College, Kuppam**

**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	0651761468						
2	0651846137						

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:** 065 Govt. Degree College, Kuppam

**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	0651846019			20	0651846129		
2	0651846020			21	0651846134		
3	0651846022						
4	0651846031						
5	0651846037						
6	0651846048						
7	0651846050						
8	0651846056						
9	0651846057						
10	0651846064						
11	0651846073						
12	0651846075						
13	0651846108						
14	0651846109						
15	0651846113						
16	0651846117						
17	0651846118						
18	0651846119						
19	0651846121						

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: 065 Govt. Degree College, Kuppam**

**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	0651846122						

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:** 065 Govt. Degree College, Kuppam

**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	0651846039						
2	0651846081						
3	0651846116						

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: 065 Govt. Degree College, Kuppam**

**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	0651761554						
2	0651846104						

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