

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: 070 SAP Arts & Science College, Vikarabad

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	0701742803						
2	0701830104						
3	0701830187						
4	0701830213						
5	0701830264						
6	0701830290						
7	0701892664						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830141						
2	0701830142						

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: 070 SAP Arts & Science College, Vikarabad

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	0701892657						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830271						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830169						
2	0701830235						
3	0701830286						
4	0701892694						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830259						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830265						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830282						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830176						
2	0701892651						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830237						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742716			20	0701830244		
2	0701742871			21	0701830247		
3	0701830123			22	0701830252		
4	0701830125			23	0701830256		
5	0701830132			24	0701830266		
6	0701830145			25	0701830273		
7	0701830146			26	0701830274		
8	0701830159			27	0701830277		
9	0701830160			28	0701892654		
10	0701830164			29	0701892658		
11	0701830165			30	0701892659		
12	0701830166			31	0701892675		
13	0701830181			32	0701892685		
14	0701830190						
15	0701830209						
16	0701830212						
17	0701830218						
18	0701830227						
19	0701830241						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830109			20	0701830288		
2	0701830113			21	0701830292		
3	0701830115			22	0701892671		
4	0701830119			23	0701892674		
5	0701830128			24	0701892687		
6	0701830134			25	0701892689		
7	0701830135			26	0701892691		
8	0701830136						
9	0701830138						
10	0701830170						
11	0701830184						
12	0701830194						
13	0701830195						
14	0701830201						
15	0701830202						
16	0701830222						
17	0701830240						
18	0701830263						
19	0701830269						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830107			20	0701892661		
2	0701830111			21	0701892678		
3	0701830114			22	0701892682		
4	0701830129			23	0701892690		
5	0701830137			24	0701892692		
6	0701830144			25	0701892693		
7	0701830155						
8	0701830180						
9	0701830183						
10	0701830211						
11	0701830232						
12	0701830234						
13	0701830254						
14	0701830257						
15	0701830260						
16	0701830275						
17	0701830280						
18	0701830285						
19	0701830298						

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

CENTRE: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830105						
2	0701830189						
3	0701830192						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830106						
2	0701830122						
3	0701830172						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742803						
2	0701830104						
3	0701830187						
4	0701830213						
5	0701830264						
6	0701830290						
7	0701892664						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830141						
2	0701830142						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742765						
2	0701742777						
3	0701742809						

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: 070 SAP Arts & Science College, Vikarabad

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	0701892657						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830271						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830169						
2	0701830235						
3	0701830286						
4	0701892694						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742731						
2	0701830259						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830265						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830282						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830176						
2	0701892651						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830237						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 2 **SCORE:** 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	0701742716			20	0701830241		
2	0701742822			21	0701830244		
3	0701742871			22	0701830247		
4	0701830123			23	0701830252		
5	0701830125			24	0701830256		
6	0701830132			25	0701830266		
7	0701830145			26	0701830273		
8	0701830146			27	0701830274		
9	0701830159			28	0701830277		
10	0701830160			29	0701892654		
11	0701830164			30	0701892658		
12	0701830165			31	0701892659		
13	0701830166			32	0701892675		
14	0701830181			33	0701892685		
15	0701830190						
16	0701830209						
17	0701830212						
18	0701830218						
19	0701830227						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742859			20	0701830269		
2	0701830109			21	0701830288		
3	0701830113			22	0701830292		
4	0701830115			23	0701892671		
5	0701830119			24	0701892674		
6	0701830128			25	0701892687		
7	0701830134			26	0701892689		
8	0701830135			27	0701892691		
9	0701830136						
10	0701830138						
11	0701830170						
12	0701830184						
13	0701830194						
14	0701830195						
15	0701830201						
16	0701830202						
17	0701830222						
18	0701830240						
19	0701830263						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742709			20	0701830285		
2	0701742837			21	0701830298		
3	0701830107			22	0701892661		
4	0701830111			23	0701892678		
5	0701830114			24	0701892682		
6	0701830129			25	0701892690		
7	0701830137			26	0701892692		
8	0701830144			27	0701892693		
9	0701830155						
10	0701830180						
11	0701830183						
12	0701830211						
13	0701830232						
14	0701830234						
15	0701830254						
16	0701830257						
17	0701830260						
18	0701830275						
19	0701830280						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830105						
2	0701830189						
3	0701830192						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830106						
2	0701830122						
3	0701830172						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742709			20	0701830122		
2	0701742716			21	0701830123		
3	0701742729			22	0701830125		
4	0701742765			23	0701830128		
5	0701742772			24	0701830129		
6	0701742803			25	0701830132		
7	0701742837			26	0701830134		
8	0701742845			27	0701830135		
9	0701742871			28	0701830136		
10	0701830104			29	0701830137		
11	0701830105			30	0701830138		
12	0701830106			31	0701830141		
13	0701830107			32	0701830142		
14	0701830109			33	0701830143		
15	0701830111			34	0701830144		
16	0701830113			35	0701830145		
17	0701830114			36	0701830146		
18	0701830115			37	0701830155		
19	0701830119			38	0701830156		

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: 070 SAP Arts & Science College, Vikarabad

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	0701830159			58	0701830201		
40	0701830160			59	0701830202		
41	0701830164			60	0701830209		
42	0701830165			61	0701830211		
43	0701830166			62	0701830212		
44	0701830169			63	0701830213		
45	0701830170			64	0701830218		
46	0701830172			65	0701830222		
47	0701830176			66	0701830227		
48	0701830180			67	0701830232		
49	0701830181			68	0701830234		
50	0701830183			69	0701830235		
51	0701830184			70	0701830237		
52	0701830187			71	0701830240		
53	0701830189			72	0701830241		
54	0701830190			73	0701830244		
55	0701830192			74	0701830247		
56	0701830194			75	0701830252		
57	0701830195			76	0701830254		

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0701830256			96	0701830290		
78	0701830257			97	0701830292		
79	0701830259			98	0701830298		
80	0701830260			99	0701892651		
81	0701830263			100	0701892654		
82	0701830264			101	0701892657		
83	0701830265			102	0701892658		
84	0701830266			103	0701892659		
85	0701830269			104	0701892661		
86	0701830271			105	0701892664		
87	0701830273			106	0701892671		
88	0701830274			107	0701892673		
89	0701830275			108	0701892674		
90	0701830277			109	0701892675		
91	0701830280			110	0701892678		
92	0701830282			111	0701892680		
93	0701830285			112	0701892682		
94	0701830286			113	0701892685		
95	0701830288			114	0701892687		

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
115	0701892689						
116	0701892690						
117	0701892691						
118	0701892692						
119	0701892693						
120	0701892694						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742765			20	0701830125		
2	0701742772			21	0701830129		
3	0701742803			22	0701830132		
4	0701742805			23	0701830135		
5	0701742809			24	0701830136		
6	0701742822			25	0701830137		
7	0701742845			26	0701830138		
8	0701742871			27	0701830144		
9	0701830104			28	0701830145		
10	0701830105			29	0701830146		
11	0701830106			30	0701830159		
12	0701830107			31	0701830160		
13	0701830109			32	0701830164		
14	0701830111			33	0701830165		
15	0701830113			34	0701830166		
16	0701830114			35	0701830169		
17	0701830119			36	0701830170		
18	0701830122			37	0701830172		
19	0701830123			38	0701830176		

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: 070 SAP Arts & Science College, Vikarabad

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	0701830180			58	0701830235		
40	0701830181			59	0701830237		
41	0701830183			60	0701830240		
42	0701830184			61	0701830252		
43	0701830187			62	0701830254		
44	0701830190			63	0701830256		
45	0701830194			64	0701830257		
46	0701830195			65	0701830259		
47	0701830201			66	0701830260		
48	0701830202			67	0701830263		
49	0701830209			68	0701830264		
50	0701830211			69	0701830265		
51	0701830212			70	0701830266		
52	0701830213			71	0701830269		
53	0701830218			72	0701830271		
54	0701830222			73	0701830273		
55	0701830227			74	0701830274		
56	0701830232			75	0701830275		
57	0701830234			76	0701830277		

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: 070 SAP Arts & Science College, Vikarabad

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.
77	0701830282			96	0701892687		
78	0701830285			97	0701892689		
79	0701830288			98	0701892690		
80	0701830290			99	0701892691		
81	0701830292			100	0701892692		
82	0701830298			101	0701892693		
83	0701892651			102	0701892694		
84	0701892654						
85	0701892657						
86	0701892658						
87	0701892659						
88	0701892661						
89	0701892664						
90	0701892671						
91	0701892674						
92	0701892675						
93	0701892678						
94	0701892682						
95	0701892685						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830134						
2	0701830155						
3	0701830241						
4	0701830244						
5	0701830247						
6	0701830280						
7	0701830286						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742729						
2	0701830141						
3	0701830143						
4	0701830156						
5	0701892673						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742716						
2	0701830115						
3	0701830128						
4	0701830142						
5	0701830189						
6	0701830192						
7	0701892680						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830115						
2	0701830122						
3	0701830155						
4	0701892690						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742803						
2	0701830104						
3	0701830187						
4	0701830194						
5	0701830213						
6	0701830222						
7	0701830264						
8	0701830275						
9	0701830290						
10	0701830292						
11	0701892664						
12	0701892678						
13	0701892692						
14	0701892693						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830141						
2	0701830142						
3	0701830143						
4	0701830156						
5	0701892673						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742704						
2	0701742761						
3	0701742762						
4	0701742765						
5	0701742777						
6	0701742805						
7	0701742809						
8	0701742826						
9	0701830202						
10	0701830209						
11	0701830265						
12	0701830271						
13	0701892657						
14	0701892658						
15	0701892659						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742812						
2	0701830169						
3	0701830235						
4	0701830237						
5	0701830286						
6	0701892694						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830176						
2	0701830259						
3	0701892651						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 5 **SCODE:** 417 **SUBJECT :**MATHEMATICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830282						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742716			20	0701830145		
2	0701742741			21	0701830146		
3	0701742822			22	0701830159		
4	0701742838			23	0701830160		
5	0701742871			24	0701830164		
6	0701830105			25	0701830165		
7	0701830111			26	0701830166		
8	0701830119			27	0701830170		
9	0701830123			28	0701830180		
10	0701830125			29	0701830181		
11	0701830128			30	0701830190		
12	0701830129			31	0701830195		
13	0701830132			32	0701830211		
14	0701830134			33	0701830212		
15	0701830135			34	0701830218		
16	0701830136			35	0701830227		
17	0701830137			36	0701830232		
18	0701830138			37	0701830234		
19	0701830144			38	0701830240		

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: 070 SAP Arts & Science College, Vikarabad

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.
39	0701830241			58	0701892674		
40	0701830244			59	0701892675		
41	0701830247			60	0701892682		
42	0701830252			61	0701892685		
43	0701830254			62	0701892687		
44	0701830256						
45	0701830257						
46	0701830260						
47	0701830263						
48	0701830266						
49	0701830273						
50	0701830274						
51	0701830277						
52	0701830285						
53	0701830288						
54	0701830298						
55	0701892654						
56	0701892661						
57	0701892671						

Total No.of Absentees :

Total No.of Mal Practice Cases :

Total No.of Present :

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

Signature of the Invigilator

Signature of Chief Superintendent

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

D - FORM CUM ROOM WISE STATEMENT

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

CENTRE: 070 SAP Arts & Science College, Vikarabad

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	0701742746						
2	0701830106						
3	0701830107						
4	0701830109						
5	0701830113						
6	0701830114						
7	0701830172						
8	0701830183						
9	0701830184						
10	0701830201						
11	0701830269						
12	0701830280						
13	0701892689						
14	0701892691						

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701742843						
2	0701830189						
3	0701830192						

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701742704						
2	0701742761						
3	0701742762						
4	0701742765						
5	0701742777						
6	0701742805						
7	0701742809						
8	0701742826						
9	0701830202						
10	0701830209						
11	0701830265						
12	0701830271						
13	0701892657						
14	0701892658						
15	0701892659						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830213						
2	0701892664						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742812						
2	0701742848						
3	0701830104						
4	0701830169						
5	0701830286						
6	0701892694						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830176						
2	0701830259						
3	0701892651						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 6 **SCODE:** 418 **SUBJECT :**PHYSICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830235						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 6 **SCODE:** 419 **SUBJECT :**ZOOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830237						

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830194						
2	0701830264						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742715			20	0701830137		
2	0701742716			21	0701830138		
3	0701742772			22	0701830144		
4	0701742803			23	0701830145		
5	0701742822			24	0701830146		
6	0701742837			25	0701830159		
7	0701742845			26	0701830160		
8	0701742871			27	0701830164		
9	0701830111			28	0701830165		
10	0701830115			29	0701830166		
11	0701830119			30	0701830170		
12	0701830123			31	0701830180		
13	0701830125			32	0701830181		
14	0701830128			33	0701830187		
15	0701830129			34	0701830190		
16	0701830132			35	0701830195		
17	0701830134			36	0701830211		
18	0701830135			37	0701830212		
19	0701830136			38	0701830218		

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0701830222			58	0701892671		
40	0701830227			59	0701892674		
41	0701830232			60	0701892675		
42	0701830234			61	0701892682		
43	0701830240			62	0701892685		
44	0701830241			63	0701892687		
45	0701830252						
46	0701830254						
47	0701830256						
48	0701830260						
49	0701830263						
50	0701830266						
51	0701830273						
52	0701830274						
53	0701830285						
54	0701830288						
55	0701830292						
56	0701830298						
57	0701892661						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830105			20	0701892654		
2	0701830106			21	0701892678		
3	0701830107			22	0701892689		
4	0701830109			23	0701892690		
5	0701830113			24	0701892691		
6	0701830114			25	0701892692		
7	0701830155			26	0701892693		
8	0701830172						
9	0701830183						
10	0701830184						
11	0701830201						
12	0701830244						
13	0701830247						
14	0701830257						
15	0701830269						
16	0701830275						
17	0701830277						
18	0701830280						
19	0701830290						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 6 SCORE: 424 SUBJECT :PSYCHOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830282						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742843						
2	0701830122						
3	0701830189						
4	0701830192						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742765						
2	0701742809						
3	0701830271						
4	0701892657						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830265						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 7 **SCODE:** 417 **SUBJECT :**MATHEMATICS

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830104						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742789						
2	0701742825						
3	0701742839						
4	0701830176						
5	0701830259						
6	0701892651						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742848						
2	0701830169						
3	0701830213						
4	0701830235						
5	0701830286						
6	0701892664						
7	0701892694						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830209						
2	0701892658						
3	0701892659						

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: 070 SAP Arts & Science College, Vikarabad

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	0701830194						
2	0701830202						
3	0701830264						

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: 070 SAP Arts & Science College, Vikarabad

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	0701742709			20	0701830134		
2	0701742715			21	0701830135		
3	0701742716			22	0701830136		
4	0701742741			23	0701830137		
5	0701742777			24	0701830138		
6	0701742803			25	0701830144		
7	0701742805			26	0701830145		
8	0701742822			27	0701830146		
9	0701742837			28	0701830159		
10	0701742847			29	0701830160		
11	0701742871			30	0701830164		
12	0701830111			31	0701830165		
13	0701830115			32	0701830166		
14	0701830119			33	0701830170		
15	0701830123			34	0701830180		
16	0701830125			35	0701830181		
17	0701830128			36	0701830190		
18	0701830129			37	0701830211		
19	0701830132			38	0701830212		

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: 070 SAP Arts & Science College, Vikarabad

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.
39	0701830218			58	0701892661		
40	0701830222			59	0701892671		
41	0701830227			60	0701892674		
42	0701830232			61	0701892675		
43	0701830234			62	0701892682		
44	0701830240			63	0701892685		
45	0701830241			64	0701892687		
46	0701830252						
47	0701830254						
48	0701830256						
49	0701830260						
50	0701830263						
51	0701830266						
52	0701830273						
53	0701830274						
54	0701830285						
55	0701830288						
56	0701830292						
57	0701830298						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 7 **SCODE:** 424 **SUBJECT :**PSYCHOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830237						

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: 070 SAP Arts & Science College, Vikarabad

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701742774			20	0701892691		
2	0701830105			21	0701892692		
3	0701830109			22	0701892693		
4	0701830113						
5	0701830114						
6	0701830183						
7	0701830184						
8	0701830201						
9	0701830244						
10	0701830247						
11	0701830257						
12	0701830269						
13	0701830277						
14	0701830280						
15	0701830290						
16	0701892654						
17	0701892678						
18	0701892689						
19	0701892690						

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: 070 SAP Arts & Science College, Vikarabad

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.
1	0701830106						
2	0701830107						
3	0701830122						
4	0701830155						
5	0701830172						
6	0701830187						
7	0701830189						
8	0701830192						
9	0701830195						
10	0701830275						

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: 070 SAP Arts & Science College, Vikarabad

DAY OF THE EXAM : 7 **SCODE:** 427 **SUBJECT :**Statistics

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0701830282						

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