

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809829						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809775						
2	0871809840						
3	0871809862						
4	0871809906						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809752						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871712734						
2	0871809764						
3	0871809771						
4	0871809784						
5	0871809790						
6	0871809820						
7	0871809827						
8	0871809846						
9	0871809849						
10	0871809853						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809795						
2	0871809814						
3	0871809864						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809842						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809799						
2	0871809859						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809807						
2	0871809954						
3	0871809955						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809774						
2	0871809901						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809753						
2	0871809839						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809754						
2	0871809760						
3	0871809824						
4	0871809831						
5	0871809837						
6	0871809874						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712701						
2	0871809762						
3	0871809765						
4	0871809769						
5	0871809809						
6	0871809815						
7	0871809818						
8	0871809826						
9	0871809847						
10	0871809850						
11	0871809852						
12	0871809865						
13	0871809886						
14	0871809910						
15	0871809917						
16	0871809934						
17	0871809935						
18	0871809940						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809823						
2	0871809925						
3	0871809947						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809763						
2	0871809766						
3	0871809812						
4	0871809841						
5	0871809851						
6	0871809860						
7	0871809861						
8	0871809875						
9	0871809881						
10	0871809883						
11	0871809884						
12	0871809893						
13	0871809895						
14	0871809899						
15	0871809904						
16	0871809939						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809791						
2	0871809830						
3	0871809898						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712769						
2	0871712850						
3	0871809856						
4	0871809876						
5	0871809916						
6	0871809932						
7	0871809941						
8	0871809942						
9	0871820435						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809829						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809775						
2	0871809840						
3	0871809862						
4	0871809906						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809752						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712734						
2	0871809764						
3	0871809771						
4	0871809784						
5	0871809790						
6	0871809820						
7	0871809827						
8	0871809846						
9	0871809849						
10	0871809853						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809795						
2	0871809814						
3	0871809864						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809842						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809799						
2	0871809859						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809807						
2	0871809954						
3	0871809955						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809774						
2	0871809901						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712783						
2	0871712803						
3	0871712860						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809753						
2	0871809839						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809754						
2	0871809760						
3	0871809824						
4	0871809831						
5	0871809837						
6	0871809874						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712701						
2	0871712925						
3	0871809762						
4	0871809765						
5	0871809769						
6	0871809809						
7	0871809815						
8	0871809818						
9	0871809826						
10	0871809847						
11	0871809850						
12	0871809852						
13	0871809865						
14	0871809886						
15	0871809910						
16	0871809917						
17	0871809934						
18	0871809935						
19	0871809940						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809823						
2	0871809925						
3	0871809947						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809763						
2	0871809766						
3	0871809812						
4	0871809841						
5	0871809851						
6	0871809860						
7	0871809861						
8	0871809875						
9	0871809881						
10	0871809883						
11	0871809884						
12	0871809893						
13	0871809895						
14	0871809899						
15	0871809904						
16	0871809939						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809791						
2	0871809830						
3	0871809898						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712769						
2	0871712850						
3	0871712872						
4	0871809856						
5	0871809876						
6	0871809916						
7	0871809932						
8	0871809941						
9	0871809942						
10	0871820435						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712701			20	0871809784		
2	0871712716			21	0871809790		
3	0871712734			22	0871809791		
4	0871712769			23	0871809795		
5	0871712850			24	0871809799		
6	0871712925			25	0871809807		
7	0871809752			26	0871809809		
8	0871809753			27	0871809812		
9	0871809754			28	0871809814		
10	0871809760			29	0871809815		
11	0871809762			30	0871809818		
12	0871809763			31	0871809820		
13	0871809764			32	0871809823		
14	0871809765			33	0871809824		
15	0871809766			34	0871809826		
16	0871809769			35	0871809827		
17	0871809771			36	0871809829		
18	0871809774			37	0871809830		
19	0871809775			38	0871809831		

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: 087 ABV Govt. Degree College, Jangaon

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	0871809837			58	0871809874		
40	0871809839			59	0871809875		
41	0871809840			60	0871809876		
42	0871809841			61	0871809881		
43	0871809842			62	0871809883		
44	0871809846			63	0871809884		
45	0871809847			64	0871809886		
46	0871809849			65	0871809893		
47	0871809850			66	0871809895		
48	0871809851			67	0871809898		
49	0871809852			68	0871809899		
50	0871809853			69	0871809901		
51	0871809856			70	0871809904		
52	0871809859			71	0871809906		
53	0871809860			72	0871809910		
54	0871809861			73	0871809916		
55	0871809862			74	0871809917		
56	0871809864			75	0871809925		
57	0871809865			76	0871809932		

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
77	0871809934						
78	0871809935						
79	0871809939						
80	0871809940						
81	0871809941						
82	0871809942						
83	0871809947						
84	0871809954						
85	0871809955						
86	0871820435						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871712701			20	0871809823		
2	0871712734			21	0871809824		
3	0871712769			22	0871809830		
4	0871712850			23	0871809840		
5	0871712872			24	0871809841		
6	0871712886			25	0871809846		
7	0871712894			26	0871809847		
8	0871809754			27	0871809849		
9	0871809760			28	0871809850		
10	0871809762			29	0871809851		
11	0871809763			30	0871809852		
12	0871809764			31	0871809856		
13	0871809769			32	0871809859		
14	0871809771			33	0871809860		
15	0871809775			34	0871809862		
16	0871809790			35	0871809874		
17	0871809791			36	0871809875		
18	0871809809			37	0871809876		
19	0871809820			38	0871809883		

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0871809884						
40	0871809886						
41	0871809895						
42	0871809898						
43	0871809904						
44	0871809906						
45	0871809910						
46	0871809916						
47	0871809917						
48	0871809925						
49	0871809932						
50	0871809939						
51	0871809940						
52	0871809941						
53	0871809942						
54	0871809947						
55	0871820435						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809753						
2	0871809799						
3	0871809812						
4	0871809837						
5	0871809865						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809752						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809765			20	0871809893		
2	0871809766			21	0871809899		
3	0871809774			22	0871809901		
4	0871809784			23	0871809934		
5	0871809795			24	0871809935		
6	0871809807			25	0871809954		
7	0871809814			26	0871809955		
8	0871809815						
9	0871809818						
10	0871809826						
11	0871809827						
12	0871809829						
13	0871809831						
14	0871809839						
15	0871809842						
16	0871809853						
17	0871809861						
18	0871809864						
19	0871809881						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712886						
2	0871712905						
3	0871809839						
4	0871809865						
5	0871809947						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809829						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712895						
2	0871809775						
3	0871809840						
4	0871809841						
5	0871809862						
6	0871809884						
7	0871809906						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809752						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712734						
2	0871712808						
3	0871712833						
4	0871809764						
5	0871809771						
6	0871809784						
7	0871809790						
8	0871809795						
9	0871809814						
10	0871809820						
11	0871809827						
12	0871809837						
13	0871809842						
14	0871809846						
15	0871809849						
16	0871809853						
17	0871809864						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809799						
2	0871809807						
3	0871809859						
4	0871809954						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809774						
2	0871809955						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809753						
2	0871809901						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871712701						
2	0871712769						
3	0871809754						
4	0871809760						
5	0871809824						
6	0871809831						
7	0871809874						
8	0871809875						
9	0871809876						
10	0871809916						
11	0871809917						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712800			20	0871809850		
2	0871712801			21	0871809852		
3	0871712805			22	0871809856		
4	0871712827			23	0871809860		
5	0871712859			24	0871809861		
6	0871712888			25	0871809886		
7	0871712891			26	0871809893		
8	0871712925			27	0871809895		
9	0871809762			28	0871809899		
10	0871809763			29	0871809904		
11	0871809765			30	0871809910		
12	0871809766			31	0871809932		
13	0871809769			32	0871809934		
14	0871809809			33	0871809935		
15	0871809812			34	0871809939		
16	0871809815			35	0871809940		
17	0871809818			36	0871809941		
18	0871809826			37	0871820435		
19	0871809847						

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: 087 ABV Govt. Degree College, Jangaon

DAY OF THE EXAM : 5 SCORE: 422 SUBJECT :JOURNALISM

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809823						
2	0871809830						
3	0871809925						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871712850						
2	0871712872						
3	0871809851						
4	0871809881						
5	0871809883						
6	0871809898						
7	0871809942						

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: 087 ABV Govt. Degree College, Jangaon

DAY OF THE EXAM : 5 SCORE: 424 SUBJECT :PSYCHOLOGY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809791						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712856						
2	0871712880						
3	0871712894						
4	0871809764						
5	0871809771						
6	0871809784						
7	0871809790						
8	0871809795						
9	0871809814						
10	0871809820						
11	0871809827						
12	0871809837						
13	0871809842						
14	0871809846						
15	0871809849						
16	0871809853						
17	0871809864						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809799						
2	0871809807						
3	0871809859						
4	0871809954						

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: 087 ABV Govt. Degree College, Jangaon

DAY OF THE EXAM : 6 **SCODE:** 415 **SUBJECT :**Computer Applications

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809774						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712803						
2	0871809753						
3	0871809955						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809839						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712701						
2	0871809775						
3	0871809831						
4	0871809862						
5	0871809865						
6	0871809876						
7	0871809906						
8	0871809917						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809812						
2	0871809852						
3	0871809947						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712769			20	0871809860		
2	0871712787			21	0871809861		
3	0871712891			22	0871809874		
4	0871809754			23	0871809875		
5	0871809760			24	0871809884		
6	0871809762			25	0871809886		
7	0871809763			26	0871809893		
8	0871809765			27	0871809895		
9	0871809766			28	0871809899		
10	0871809809			29	0871809904		
11	0871809815			30	0871809910		
12	0871809823			31	0871809916		
13	0871809824			32	0871809925		
14	0871809826			33	0871809932		
15	0871809840			34	0871809934		
16	0871809841			35	0871809935		
17	0871809847			36	0871809939		
18	0871809850			37	0871809940		
19	0871809856			38	0871820435		

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871712734						
2	0871712805						
3	0871712850						
4	0871712872						
5	0871712882						
6	0871809769						
7	0871809791						
8	0871809818						
9	0871809829						
10	0871809830						
11	0871809851						
12	0871809881						
13	0871809883						
14	0871809898						
15	0871809901						
16	0871809941						
17	0871809942						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809764						
2	0871809784						
3	0871809790						
4	0871809795						
5	0871809814						
6	0871809820						
7	0871809827						
8	0871809842						
9	0871809846						
10	0871809853						
11	0871809864						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809849						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809774						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712860						
2	0871809753						
3	0871809955						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871809799						
2	0871809807						
3	0871809859						
4	0871809954						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809771						
2	0871809837						

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0871712701						
2	0871809775						
3	0871809812						
4	0871809852						
5	0871809906						
6	0871809917						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809760						
2	0871809762						
3	0871809763						
4	0871809815						
5	0871809823						
6	0871809824						
7	0871809826						
8	0871809841						
9	0871809847						
10	0871809860						
11	0871809861						
12	0871809893						
13	0871809899						
14	0871809904						
15	0871809910						
16	0871809939						
17	0871809940						

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: 087 ABV Govt. Degree College, Jangaon

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	0871712734			20	0871809862		
2	0871712769			21	0871809865		
3	0871712800			22	0871809874		
4	0871712850			23	0871809875		
5	0871712872			24	0871809876		
6	0871809754			25	0871809881		
7	0871809765			26	0871809883		
8	0871809766			27	0871809884		
9	0871809769			28	0871809886		
10	0871809791			29	0871809895		
11	0871809809			30	0871809898		
12	0871809818			31	0871809901		
13	0871809829			32	0871809916		
14	0871809830			33	0871809925		
15	0871809831			34	0871809932		
16	0871809840			35	0871809934		
17	0871809850			36	0871809935		
18	0871809851			37	0871809941		
19	0871809856			38	0871809942		

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: 087 ABV Govt. Degree College, Jangaon

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0871809947						
40	0871820435						

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: 087 ABV Govt. Degree College, Jangaon

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	0871809839						

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