

**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:** 090 Govt. Degree College, Kanigiri, Prakasam.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780567						
2	0901780579						
3	0901780632						
4	0901860654						
5	0901860711						
6	0901860712						
7	0901860745						
8	0901860748						
9	0901860764						
10	0901860777						
11	0901860779						
12	0901860788						
13	0901860804						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860668						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**DAY OF THE EXAM :** 1 **SCORE:** 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	0901780575			20	0901860722		
2	0901780625			21	0901860724		
3	0901780648			22	0901860726		
4	0901780654			23	0901860727		
5	0901780676			24	0901860731		
6	0901860657			25	0901860733		
7	0901860667			26	0901860735		
8	0901860676			27	0901860736		
9	0901860681			28	0901860750		
10	0901860682			29	0901860751		
11	0901860685			30	0901860758		
12	0901860686			31	0901860766		
13	0901860689			32	0901860767		
14	0901860692			33	0901860775		
15	0901860699			34	0901860776		
16	0901860701			35	0901860778		
17	0901860707			36	0901860789		
18	0901860708			37	0901860792		
19	0901860716			38	0901860802		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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Total No.of Present :    
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**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.
39	0901860803						
40	0901860807						
41	0901860810						
42	0901860812						
43	0901860814						
44	0901860824						
45	0901860831						
46	0901860832						
47	0901860836						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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Total No.of Present :    
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860671						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780641						
2	0901860656						
3	0901860663						
4	0901860675						
5	0901860678						
6	0901860702						
7	0901860715						
8	0901860746						
9	0901860765						
10	0901860769						
11	0901860834						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860754						
2	0901860760						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860762						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860704						
2	0901860705						
3	0901860706						
4	0901860713						
5	0901860827						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780597						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780553			20	0901860826		
2	0901860684			21	0901860833		
3	0901860687			22	0901860835		
4	0901860695						
5	0901860698						
6	0901860719						
7	0901860723						
8	0901860741						
9	0901860742						
10	0901860752						
11	0901860780						
12	0901860785						
13	0901860798						
14	0901860805						
15	0901860808						
16	0901860811						
17	0901860813						
18	0901860815						
19	0901860825						

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

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860652						
2	0901860655						
3	0901860660						
4	0901860693						
5	0901860700						
6	0901860725						
7	0901860734						
8	0901860743						
9	0901860744						
10	0901860747						
11	0901860793						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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Total No.of Present :    
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860658						
2	0901860790						
3	0901860791						
4	0901860818						
5	0901860819						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860728						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780572						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780567						
2	0901780579						
3	0901860654						
4	0901860711						
5	0901860712						
6	0901860745						
7	0901860748						
8	0901860764						
9	0901860777						
10	0901860779						
11	0901860788						
12	0901860804						

Total No.of Absentees :    
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Total No.of Mal Practice Cases :    
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860668						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780559			20	0901860708		
2	0901780575			21	0901860716		
3	0901780625			22	0901860722		
4	0901780648			23	0901860724		
5	0901780654			24	0901860726		
6	0901780676			25	0901860727		
7	0901780677			26	0901860731		
8	0901860657			27	0901860733		
9	0901860667			28	0901860735		
10	0901860676			29	0901860736		
11	0901860681			30	0901860750		
12	0901860682			31	0901860751		
13	0901860685			32	0901860758		
14	0901860686			33	0901860766		
15	0901860689			34	0901860767		
16	0901860692			35	0901860775		
17	0901860699			36	0901860776		
18	0901860701			37	0901860778		
19	0901860707			38	0901860789		

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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.
39	0901860792						
40	0901860802						
41	0901860803						
42	0901860807						
43	0901860810						
44	0901860812						
45	0901860814						
46	0901860824						
47	0901860831						
48	0901860832						
49	0901860836						

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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860671						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

**CENTRE: 090 Govt. Degree College, Kanigiri, Prakasam.**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780641						
2	0901860656						
3	0901860663						
4	0901860675						
5	0901860678						
6	0901860702						
7	0901860715						
8	0901860746						
9	0901860765						
10	0901860769						
11	0901860834						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
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Total No.of Present :    
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**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860754						
2	0901860760						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860762						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860704						
2	0901860705						
3	0901860706						
4	0901860713						
5	0901860827						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780597						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780553			20	0901860826		
2	0901860684			21	0901860833		
3	0901860687			22	0901860835		
4	0901860695						
5	0901860698						
6	0901860719						
7	0901860723						
8	0901860741						
9	0901860742						
10	0901860752						
11	0901860780						
12	0901860785						
13	0901860798						
14	0901860805						
15	0901860808						
16	0901860811						
17	0901860813						
18	0901860815						
19	0901860825						

Total No.of Absentees :

Total No.of Mal Practice Cases :

Total No.of Present :

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860652						
2	0901860655						
3	0901860660						
4	0901860693						
5	0901860700						
6	0901860725						
7	0901860734						
8	0901860743						
9	0901860744						
10	0901860747						
11	0901860793						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860658						
2	0901860790						
3	0901860791						
4	0901860818						
5	0901860819						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860728						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780572						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901780553			20	0901860658		
2	0901780559			21	0901860660		
3	0901780567			22	0901860663		
4	0901780572			23	0901860667		
5	0901780575			24	0901860668		
6	0901780579			25	0901860671		
7	0901780597			26	0901860675		
8	0901780623			27	0901860676		
9	0901780625			28	0901860678		
10	0901780641			29	0901860681		
11	0901780648			30	0901860682		
12	0901780654			31	0901860684		
13	0901780676			32	0901860685		
14	0901780677			33	0901860686		
15	0901860652			34	0901860687		
16	0901860654			35	0901860689		
17	0901860655			36	0901860692		
18	0901860656			37	0901860693		
19	0901860657			38	0901860695		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901860698			58	0901860725		
40	0901860699			59	0901860726		
41	0901860700			60	0901860727		
42	0901860701			61	0901860728		
43	0901860702			62	0901860731		
44	0901860704			63	0901860733		
45	0901860705			64	0901860734		
46	0901860706			65	0901860735		
47	0901860707			66	0901860736		
48	0901860708			67	0901860741		
49	0901860711			68	0901860742		
50	0901860712			69	0901860743		
51	0901860713			70	0901860744		
52	0901860715			71	0901860745		
53	0901860716			72	0901860746		
54	0901860719			73	0901860747		
55	0901860722			74	0901860748		
56	0901860723			75	0901860750		
57	0901860724			76	0901860751		

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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860752			96	0901860790		
78	0901860754			97	0901860791		
79	0901860758			98	0901860792		
80	0901860760			99	0901860793		
81	0901860762			100	0901860798		
82	0901860764			101	0901860802		
83	0901860765			102	0901860803		
84	0901860766			103	0901860804		
85	0901860767			104	0901860805		
86	0901860769			105	0901860807		
87	0901860775			106	0901860808		
88	0901860776			107	0901860810		
89	0901860777			108	0901860811		
90	0901860778			109	0901860812		
91	0901860779			110	0901860813		
92	0901860780			111	0901860814		
93	0901860785			112	0901860815		
94	0901860788			113	0901860818		
95	0901860789			114	0901860819		

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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860824						
116	0901860825						
117	0901860826						
118	0901860827						
119	0901860831						
120	0901860832						
121	0901860833						
122	0901860834						
123	0901860835						
124	0901860836						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780559			20	0901860671		
2	0901780572			21	0901860675		
3	0901780575			22	0901860676		
4	0901780597			23	0901860681		
5	0901780625			24	0901860682		
6	0901780641			25	0901860684		
7	0901780648			26	0901860685		
8	0901780654			27	0901860686		
9	0901780676			28	0901860687		
10	0901780677			29	0901860689		
11	0901860652			30	0901860692		
12	0901860655			31	0901860693		
13	0901860656			32	0901860695		
14	0901860657			33	0901860698		
15	0901860658			34	0901860699		
16	0901860660			35	0901860700		
17	0901860663			36	0901860701		
18	0901860667			37	0901860702		
19	0901860668			38	0901860707		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860708			58	0901860747		
40	0901860715			59	0901860748		
41	0901860716			60	0901860750		
42	0901860722			61	0901860751		
43	0901860723			62	0901860752		
44	0901860724			63	0901860758		
45	0901860725			64	0901860760		
46	0901860726			65	0901860762		
47	0901860727			66	0901860764		
48	0901860728			67	0901860766		
49	0901860731			68	0901860767		
50	0901860733			69	0901860769		
51	0901860735			70	0901860775		
52	0901860736			71	0901860776		
53	0901860741			72	0901860778		
54	0901860742			73	0901860780		
55	0901860743			74	0901860785		
56	0901860744			75	0901860789		
57	0901860746			76	0901860790		

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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860791			96	0901860831		
78	0901860792			97	0901860832		
79	0901860793			98	0901860833		
80	0901860798			99	0901860834		
81	0901860802			100	0901860835		
82	0901860803			101	0901860836		
83	0901860805						
84	0901860808						
85	0901860810						
86	0901860812						
87	0901860813						
88	0901860814						
89	0901860815						
90	0901860818						
91	0901860819						
92	0901860824						
93	0901860825						
94	0901860826						
95	0901860827						

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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901780553						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780567			20	0901860807		
2	0901780579			21	0901860811		
3	0901860654						
4	0901860678						
5	0901860704						
6	0901860705						
7	0901860706						
8	0901860711						
9	0901860712						
10	0901860713						
11	0901860719						
12	0901860734						
13	0901860745						
14	0901860754						
15	0901860765						
16	0901860777						
17	0901860779						
18	0901860788						
19	0901860804						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780567						
2	0901780579						
3	0901860654						
4	0901860711						
5	0901860712						
6	0901860745						
7	0901860747						
8	0901860748						
9	0901860764						
10	0901860777						
11	0901860779						
12	0901860788						
13	0901860804						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901860668						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780559			20	0901860692		
2	0901780575			21	0901860698		
3	0901780625			22	0901860699		
4	0901780648			23	0901860700		
5	0901780654			24	0901860701		
6	0901780676			25	0901860707		
7	0901780677			26	0901860708		
8	0901860652			27	0901860716		
9	0901860655			28	0901860722		
10	0901860657			29	0901860723		
11	0901860658			30	0901860724		
12	0901860667			31	0901860725		
13	0901860676			32	0901860726		
14	0901860681			33	0901860727		
15	0901860682			34	0901860731		
16	0901860684			35	0901860733		
17	0901860685			36	0901860735		
18	0901860686			37	0901860736		
19	0901860689			38	0901860742		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
39	0901860743			58	0901860812		
40	0901860744			59	0901860814		
41	0901860750			60	0901860824		
42	0901860751			61	0901860831		
43	0901860752			62	0901860832		
44	0901860758			63	0901860836		
45	0901860766						
46	0901860767						
47	0901860775						
48	0901860776						
49	0901860778						
50	0901860780						
51	0901860789						
52	0901860792						
53	0901860798						
54	0901860802						
55	0901860803						
56	0901860807						
57	0901860810						

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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860671						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780553						
2	0901780641						
3	0901780643						
4	0901860656						
5	0901860663						
6	0901860675						
7	0901860678						
8	0901860702						
9	0901860715						
10	0901860746						
11	0901860754						
12	0901860760						
13	0901860765						
14	0901860769						
15	0901860813						
16	0901860834						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901860762						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780597						
2	0901860704						
3	0901860705						
4	0901860706						
5	0901860713						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860827						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901780623			20	0901860833		
2	0901860660			21	0901860835		
3	0901860687						
4	0901860693						
5	0901860695						
6	0901860719						
7	0901860734						
8	0901860741						
9	0901860785						
10	0901860790						
11	0901860791						
12	0901860793						
13	0901860805						
14	0901860808						
15	0901860811						
16	0901860815						
17	0901860819						
18	0901860825						
19	0901860826						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**DAY OF THE EXAM :** 5 **SCODE:** 421 **SUBJECT :** HISTORY

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780572						
2	0901860728						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860818						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**DAY OF THE EXAM :** 6

**SCODE:** 411

**SUBJECT :**COMMERCE-11

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780553						
2	0901780641						
3	0901860656						
4	0901860663						
5	0901860675						
6	0901860678						
7	0901860702						
8	0901860715						
9	0901860746						
10	0901860754						
11	0901860760						
12	0901860765						
13	0901860769						
14	0901860813						
15	0901860834						

Total No.of Absentees :  
in this Sheet

--	--

Total No.of Mal Practice Cases :  
in this Sheet

--	--

Total No.of Present :  
in this Sheet

--	--

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901860762						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901780597						
2	0901860704						
3	0901860705						
4	0901860706						
5	0901860713						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901780559			20	0901860700		
2	0901780567			21	0901860701		
3	0901780579			22	0901860708		
4	0901780648			23	0901860711		
5	0901780676			24	0901860712		
6	0901860657			25	0901860716		
7	0901860658			26	0901860722		
8	0901860667			27	0901860723		
9	0901860668			28	0901860724		
10	0901860671			29	0901860726		
11	0901860676			30	0901860727		
12	0901860682			31	0901860736		
13	0901860684			32	0901860742		
14	0901860685			33	0901860745		
15	0901860686			34	0901860751		
16	0901860689			35	0901860752		
17	0901860692			36	0901860758		
18	0901860698			37	0901860764		
19	0901860699			38	0901860766		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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.
39	0901860767						
40	0901860775						
41	0901860776						
42	0901860777						
43	0901860778						
44	0901860779						
45	0901860780						
46	0901860788						
47	0901860789						
48	0901860798						
49	0901860802						
50	0901860803						
51	0901860804						
52	0901860807						
53	0901860810						
54	0901860814						
55	0901860824						
56	0901860831						
57	0901860832						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

**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	0901780625			20	0901860747		
2	0901780654			21	0901860748		
3	0901780677			22	0901860750		
4	0901860652			23	0901860785		
5	0901860654			24	0901860790		
6	0901860655			25	0901860791		
7	0901860660			26	0901860792		
8	0901860681			27	0901860793		
9	0901860687			28	0901860805		
10	0901860693			29	0901860808		
11	0901860695			30	0901860811		
12	0901860707			31	0901860812		
13	0901860725			32	0901860815		
14	0901860731			33	0901860819		
15	0901860734			34	0901860825		
16	0901860735			35	0901860827		
17	0901860741			36	0901860833		
18	0901860743			37	0901860835		
19	0901860744			38	0901860836		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780572						
2	0901780575						
3	0901860719						
4	0901860733						
5	0901860826						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860728						
2	0901860818						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780641						
2	0901860656						
3	0901860663						
4	0901860675						
5	0901860678						
6	0901860702						
7	0901860715						
8	0901860746						
9	0901860754						
10	0901860760						
11	0901860765						
12	0901860769						
13	0901860834						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780597						
2	0901860704						
3	0901860705						
4	0901860706						
5	0901860713						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860762						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780553						
2	0901860813						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of 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: 090 Govt. Degree College, Kanigiri, Prakasam.**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901780565			20	0901860716		
2	0901780567			21	0901860722		
3	0901780579			22	0901860727		
4	0901780648			23	0901860736		
5	0901780676			24	0901860745		
6	0901860657			25	0901860751		
7	0901860667			26	0901860752		
8	0901860668			27	0901860758		
9	0901860671			28	0901860764		
10	0901860682			29	0901860767		
11	0901860684			30	0901860775		
12	0901860689			31	0901860776		
13	0901860698			32	0901860777		
14	0901860699			33	0901860788		
15	0901860700			34	0901860789		
16	0901860701						
17	0901860708						
18	0901860711						
19	0901860712						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of 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:** 090 Govt. Degree College, Kanigiri, Prakasam.

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	0901860780						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780625			20	0901860743		
2	0901780654			21	0901860744		
3	0901860652			22	0901860747		
4	0901860654			23	0901860748		
5	0901860655			24	0901860750		
6	0901860658			25	0901860766		
7	0901860660			26	0901860778		
8	0901860676			27	0901860779		
9	0901860681			28	0901860785		
10	0901860685			29	0901860790		
11	0901860686			30	0901860791		
12	0901860687			31	0901860793		
13	0901860692			32	0901860798		
14	0901860693			33	0901860802		
15	0901860695			34	0901860803		
16	0901860707			35	0901860804		
17	0901860731			36	0901860805		
18	0901860734			37	0901860807		
19	0901860735			38	0901860808		

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:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901860810						
40	0901860811						
41	0901860814						
42	0901860815						
43	0901860819						
44	0901860831						
45	0901860833						
46	0901860835						
47	0901860836						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780603						
2	0901860723						
3	0901860724						
4	0901860725						
5	0901860726						
6	0901860733						
7	0901860741						
8	0901860742						
9	0901860792						
10	0901860812						
11	0901860824						
12	0901860825						
13	0901860827						
14	0901860832						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 090 Govt. Degree College, Kanigiri, Prakasam.

**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	0901780572						
2	0901780575						
3	0901860719						
4	0901860728						
5	0901860818						
6	0901860826						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent