

**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:** 104 Govt. Degree College, Bodhan

**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	1041803585						
2	1041803649						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041803580						
2	1041803581						
3	1041803639						
4	1041803640						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803572						
2	1041803597						
3	1041803645						
4	1041803669						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of the Invigilator**

**Signature of Chief Superintendent**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803650						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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:** 21-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 104 Govt. Degree College, Bodhan

**DAY OF THE EXAM :** 1 **SCORE:** 4051701 **SUBJECT :**MATHEMATICS (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041704811						
2	1041803554						
3	1041803573						
4	1041803586						
5	1041803612						
6	1041803625						
7	1041803646						
8	1041803665						
9	1041803670						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**DAY OF THE EXAM :** 1 **SCODE:** 4051901 **SUBJECT :**ZOOLOGY (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041704713						
2	1041803680						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

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**Signature of Chief Superintendent**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803675						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

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

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041704674						
2	1041704810						
3	1041803591						
4	1041803601						
5	1041803615						
6	1041803648						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent



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**EXAMINATION BRANCH**

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**DAY OF THE EXAM :** 1 **SCORE:** 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	1041704676						
2	1041704702						
3	1041704734						
4	1041704740						
5	1041704792						
6	1041803561						
7	1041803582						
8	1041803626						
9	1041803628						
10	1041803652						
11	1041803655						
12	1041803659						
13	1041803666						
14	1041803679						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**DAY OF THE EXAM :** 1 **SCORE:** 4052501

**SUBJECT :** PUBLIC ADMINISTRATION: STRESS  
MANAGEMENT (SEEC 1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041704700						
2	1041704727						
3	1041803552						
4	1041803559						
5	1041803564						
6	1041803569						
7	1041803577						
8	1041803604						
9	1041803614						
10	1041803633						
11	1041803656						
12	1041803677						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041803557						
2	1041803566						
3	1041803579						
4	1041803594						
5	1041803600						
6	1041803610						
7	1041803635						
8	1041803653						

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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against hall ticket number if any

**Signature of the Invigilator**

**Signature of Chief Superintendent**

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**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803585						
2	1041803649						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
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**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803580						
2	1041803581						
3	1041803639						
4	1041803640						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**CENTRE: 104 Govt. Degree College, Bodhan**

**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	1041704660						
2	1041704765						
3	1041803572						
4	1041803597						
5	1041803645						
6	1041803669						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of Chief Superintendent

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803650						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
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**Signature of Chief Superintendent**

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
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**DATE OF EXAMINATION: 22-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 104 Govt. Degree College, Bodhan**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041704811						
2	1041803554						
3	1041803573						
4	1041803586						
5	1041803612						
6	1041803625						
7	1041803646						
8	1041803665						
9	1041803670						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of Chief Superintendent



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

**CENTRE:** 104 Govt. Degree College, Bodhan

**DAY OF THE EXAM :** 2 **SCODE:** 4051902 **SUBJECT :**ZOOLOGY (SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041704713						
2	1041803680						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

**Signature of Chief Superintendent**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803675						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041704810						
2	1041803591						
3	1041803601						
4	1041803615						
5	1041803648						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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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**DATE OF EXAMINATION:** 22-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041704734						
2	1041704792						
3	1041803561						
4	1041803582						
5	1041803626						
6	1041803628						
7	1041803652						
8	1041803655						
9	1041803659						
10	1041803666						
11	1041803679						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

**Note :** Please write **Absent** or **Mal Practice**  
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Signature of Chief Superintendent

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**CENTRE:** 104 Govt. Degree College, Bodhan

**DAY OF THE EXAM :** 2 **SCORE:** 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	1041704727						
2	1041803552						
3	1041803559						
4	1041803564						
5	1041803569						
6	1041803577						
7	1041803604						
8	1041803614						
9	1041803633						
10	1041803656						
11	1041803677						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803557						
2	1041803566						
3	1041803579						
4	1041803594						
5	1041803600						
6	1041803610						
7	1041803635						
8	1041803653						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 104 Govt. Degree College, Bodhan**

**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	1041704713			20	1041803586		
2	1041704727			21	1041803591		
3	1041704802			22	1041803594		
4	1041803552			23	1041803597		
5	1041803554			24	1041803600		
6	1041803557			25	1041803601		
7	1041803559			26	1041803604		
8	1041803561			27	1041803610		
9	1041803564			28	1041803612		
10	1041803566			29	1041803614		
11	1041803569			30	1041803615		
12	1041803572			31	1041803625		
13	1041803573			32	1041803626		
14	1041803577			33	1041803628		
15	1041803579			34	1041803633		
16	1041803580			35	1041803635		
17	1041803581			36	1041803639		
18	1041803582			37	1041803640		
19	1041803585			38	1041803645		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041803646						
40	1041803648						
41	1041803649						
42	1041803650						
43	1041803652						
44	1041803653						
45	1041803655						
46	1041803656						
47	1041803659						
48	1041803665						
49	1041803666						
50	1041803669						
51	1041803670						
52	1041803675						
53	1041803677						
54	1041803679						
55	1041803680						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041704713			20	1041803600		
2	1041704727			21	1041803604		
3	1041803552			22	1041803612		
4	1041803554			23	1041803614		
5	1041803557			24	1041803615		
6	1041803559			25	1041803626		
7	1041803561			26	1041803628		
8	1041803564			27	1041803633		
9	1041803566			28	1041803635		
10	1041803569			29	1041803646		
11	1041803572			30	1041803650		
12	1041803573			31	1041803652		
13	1041803577			32	1041803653		
14	1041803579			33	1041803655		
15	1041803580			34	1041803656		
16	1041803581			35	1041803659		
17	1041803582			36	1041803665		
18	1041803586			37	1041803666		
19	1041803591			38	1041803670		

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041803675						
40	1041803679						
41	1041803680						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041803594						
2	1041803597						
3	1041803610						
4	1041803625						
5	1041803639						
6	1041803640						
7	1041803648						
8	1041803649						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041704660						
2	1041803669						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

**Signature of the Invigilator**

**Signature of Chief Superintendent**

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

**D - FORM CUM ROOM WISE STATEMENT**

**DATE OF EXAMINATION:** 24-03-2021 **NAME OF EXAMINATION:** UG(CBCS) IV SEMESTER MARCH-2021

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041803585						
2	1041803601						
3	1041803645						
4	1041803677						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041803585						
2	1041803649						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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:** 104 Govt. Degree College, Bodhan

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041803557						
2	1041803580						
3	1041803581						
4	1041803594						
5	1041803625						
6	1041803639						
7	1041803640						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041704674						
2	1041803659						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent



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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE: 104 Govt. Degree College, Bodhan**

**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	1041704656						
2	1041704660						
3	1041704694						
4	1041704745						
5	1041704762						
6	1041704765						
7	1041803572						
8	1041803597						
9	1041803645						
10	1041803650						
11	1041803669						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041704713						
2	1041803680						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041704811						
2	1041803573						
3	1041803586						
4	1041803646						
5	1041803665						
6	1041803670						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041803554						
2	1041803561						
3	1041803582						
4	1041803612						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041803604						
2	1041803628						
3	1041803648						
4	1041803652						
5	1041803675						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041704654						
2	1041704727						
3	1041803591						
4	1041803601						
5	1041803615						
6	1041803677						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041704711			20	1041803666		
2	1041704740			21	1041803679		
3	1041704760						
4	1041803552						
5	1041803559						
6	1041803564						
7	1041803566						
8	1041803569						
9	1041803577						
10	1041803579						
11	1041803600						
12	1041803610						
13	1041803614						
14	1041803626						
15	1041803633						
16	1041803635						
17	1041803653						
18	1041803655						
19	1041803656						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041704660						
2	1041704694						
3	1041704745						
4	1041704762						
5	1041803572						
6	1041803597						
7	1041803645						
8	1041803650						
9	1041803669						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

**Signature of the Invigilator**

**Signature of Chief Superintendent**



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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE: 104 Govt. Degree College, Bodhan**

**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	1041704713						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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: 104 Govt. Degree College, Bodhan**

**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	1041704811						
2	1041803573						
3	1041803580						
4	1041803581						
5	1041803586						
6	1041803625						
7	1041803646						
8	1041803665						
9	1041803670						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041803554						
2	1041803561						
3	1041803582						
4	1041803612						
5	1041803680						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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: 104 Govt. Degree College, Bodhan**

**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	1041704723						
2	1041803585						
3	1041803604						
4	1041803628						
5	1041803648						
6	1041803652						
7	1041803659						
8	1041803675						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1041803615						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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:** 104 Govt. Degree College, Bodhan

**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	1041704654						
2	1041803591						
3	1041803594						
4	1041803601						
5	1041803639						
6	1041803640						
7	1041803649						
8	1041803677						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041704727			20	1041803679		
2	1041803552						
3	1041803557						
4	1041803559						
5	1041803564						
6	1041803566						
7	1041803569						
8	1041803577						
9	1041803579						
10	1041803600						
11	1041803610						
12	1041803614						
13	1041803626						
14	1041803633						
15	1041803635						
16	1041803653						
17	1041803655						
18	1041803656						
19	1041803666						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041704656						
2	1041704660						
3	1041704694						
4	1041704745						
5	1041704762						
6	1041704765						
7	1041803572						
8	1041803597						
9	1041803645						
10	1041803650						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent



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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE: 104 Govt. Degree College, Bodhan**

**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	1041704811						
2	1041803573						
3	1041803580						
4	1041803581						
5	1041803586						
6	1041803625						
7	1041803646						
8	1041803665						
9	1041803670						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041704713						
2	1041803680						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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:** 104 Govt. Degree College, Bodhan

**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	1041803669						

Total No.of Absentees :   
in this Sheet

Total No.of Mal Practice Cases :   
in this Sheet

Total No.of Present :   
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: 104 Govt. Degree College, Bodhan**

**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	1041803554						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041704810						
2	1041803561						
3	1041803582						
4	1041803585						
5	1041803612						
6	1041803615						
7	1041803628						
8	1041803648						
9	1041803652						
10	1041803659						
11	1041803675						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
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:** 104 Govt. Degree College, Bodhan

**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	1041704758						
2	1041803591						
3	1041803604						
4	1041803649						
5	1041803677						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

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

**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 104 Govt. Degree College, Bodhan

**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	1041704727			20	1041803640		
2	1041704740			21	1041803653		
3	1041803552			22	1041803655		
4	1041803557			23	1041803656		
5	1041803559			24	1041803666		
6	1041803564			25	1041803679		
7	1041803566						
8	1041803569						
9	1041803577						
10	1041803579						
11	1041803594						
12	1041803600						
13	1041803601						
14	1041803610						
15	1041803614						
16	1041803626						
17	1041803633						
18	1041803635						
19	1041803639						

Total No.of Absentees :    
in this Sheet

Total No.of Mal Practice Cases :    
in this Sheet

Total No.of Present :    
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent