

**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:** 190 Govt. Degree College, Kodur RS

**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	1901850205			20	1901850272		
2	1901850209			21	1901850278		
3	1901850212			22	1901850280		
4	1901850213			23	1901850282		
5	1901850219			24	1901850285		
6	1901850222						
7	1901850223						
8	1901850226						
9	1901850227						
10	1901850231						
11	1901850237						
12	1901850240						
13	1901850247						
14	1901850248						
15	1901850249						
16	1901850252						
17	1901850256						
18	1901850258						
19	1901850266						

Total No.of Absentees :    
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901850243						

Total No.of Absentees :   
in this 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:** 190 Govt. Degree College, Kodur RS

**DAY OF THE EXAM :** 1 **SCODE:** 4051201 **SUBJECT :**COMMERCE: MICRO FINANCE(SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901766881						
2	1901766896						
3	1901850251						
4	1901850283						

Total No.of Absentees :    
in this 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:** 190 Govt. Degree College, Kodur RS

**DAY OF THE EXAM :** 1 **SCODE:** 4051401 **SUBJECT :**CHEMISTRY (SEEC-1)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901850211						
2	1901850225						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

Signature of the Invigilator

Signature of Chief Superintendent

**Dr.B.R.AMBEDKAR OPEN UNIVERSITY, HYDERABAD**  
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**D - FORM CUM ROOM WISE STATEMENT**

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

**CENTRE:** 190 Govt. Degree College, Kodur RS

**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	1901850253						

Total No.of Absentees :   
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901766851						
2	1901850208						
3	1901850232						
4	1901850236						
5	1901850262						
6	1901850267						
7	1901850273						
8	1901850284						

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

**CENTRE:** 190 Govt. Degree College, Kodur RS

**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	1901850255						
2	1901850264						

Total No.of Absentees :    
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901766820						
2	1901850220						
3	1901850221						
4	1901850228						
5	1901850230						
6	1901850260						
7	1901850261						
8	1901850281						
9	1901850287						

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

**CENTRE:** 190 Govt. Degree College, Kodur RS

**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	1901850217						

Total No.of Absentees :   
in this 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:** 190 Govt. Degree College, Kodur RS

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901850205			20	1901850272		
2	1901850209			21	1901850278		
3	1901850212			22	1901850280		
4	1901850213			23	1901850282		
5	1901850219			24	1901850285		
6	1901850222						
7	1901850223						
8	1901850226						
9	1901850227						
10	1901850231						
11	1901850237						
12	1901850240						
13	1901850247						
14	1901850248						
15	1901850249						
16	1901850252						
17	1901850256						
18	1901850258						
19	1901850266						

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

**CENTRE:** 190 Govt. Degree College, Kodur RS

**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	1901850243						

Total No.of Absentees :  
in this Sheet

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Total No.of Mal Practice Cases :  
in this Sheet

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Total No.of Present :  
in this Sheet

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

**Signature of the Invigilator**

**Signature of Chief Superintendent**

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

**CENTRE:** 190 Govt. Degree College, Kodur RS

**DAY OF THE EXAM :** 2 **SCORE:** 4051202 **SUBJECT :**COMMERCE: RURAL MARKETING(SEEC-2)

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901766827						
2	1901766828						
3	1901766832						
4	1901766850						
5	1901766858						
6	1901766869						
7	1901766874						
8	1901766881						
9	1901766896						
10	1901766908						
11	1901766923						
12	1901766931						
13	1901850251						
14	1901850283						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**DAY OF THE EXAM : 2      SCORE: 4051402      SUBJECT :CHEMISTRY (SEEC-2)**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901850211						
2	1901850225						

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:** 190 Govt. Degree College, Kodur RS

**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	1901850253						

Total No.of Absentees :   
in this 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

**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:** 190 Govt. Degree College, Kodur RS

**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	1901766851						
2	1901850208						
3	1901850232						
4	1901850236						
5	1901850262						
6	1901850267						
7	1901850273						
8	1901850284						

Total No.of Absentees :   
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901850255						
2	1901850264						

Total No.of Absentees :    
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901850220						
2	1901850221						
3	1901850228						
4	1901850230						
5	1901850260						
6	1901850261						
7	1901850281						
8	1901850287						

Total No.of Absentees :    
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901850217						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766806			20	1901850225		
2	1901766820			21	1901850226		
3	1901766851			22	1901850227		
4	1901766872			23	1901850228		
5	1901766874			24	1901850230		
6	1901766881			25	1901850231		
7	1901766896			26	1901850232		
8	1901850205			27	1901850236		
9	1901850208			28	1901850237		
10	1901850209			29	1901850240		
11	1901850211			30	1901850243		
12	1901850212			31	1901850247		
13	1901850213			32	1901850248		
14	1901850217			33	1901850249		
15	1901850219			34	1901850251		
16	1901850220			35	1901850252		
17	1901850221			36	1901850253		
18	1901850222			37	1901850255		
19	1901850223			38	1901850256		

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**  
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**DATE OF EXAMINATION: 23-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 190 Govt. Degree College, Kodur RS**

**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	1901850258						
40	1901850260						
41	1901850261						
42	1901850262						
43	1901850264						
44	1901850266						
45	1901850267						
46	1901850272						
47	1901850273						
48	1901850278						
49	1901850280						
50	1901850281						
51	1901850282						
52	1901850283						
53	1901850284						
54	1901850285						
55	1901850287						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766820			20	1901850251		
2	1901766851			21	1901850252		
3	1901766896			22	1901850253		
4	1901850205			23	1901850255		
5	1901850208			24	1901850260		
6	1901850212			25	1901850261		
7	1901850217			26	1901850262		
8	1901850219			27	1901850264		
9	1901850220			28	1901850267		
10	1901850221			29	1901850272		
11	1901850222			30	1901850278		
12	1901850223			31	1901850281		
13	1901850226			32	1901850282		
14	1901850228			33	1901850284		
15	1901850230			34	1901850285		
16	1901850231			35	1901850287		
17	1901850232						
18	1901850240						
19	1901850243						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766881						
2	1901850211						

Total No.of Absentees :    
in this 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: 24-03-2021 NAME OF EXAMINATION: UG(CBCS) IV SEMESTER MARCH-2021**

**CENTRE: 190 Govt. Degree College, Kodur RS**

**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	1901766806						
2	1901850209						
3	1901850213						
4	1901850225						
5	1901850227						
6	1901850236						
7	1901850237						
8	1901850247						
9	1901850248						
10	1901850249						
11	1901850256						
12	1901850258						
13	1901850266						
14	1901850273						
15	1901850280						
16	1901850283						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766805						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**DAY OF THE EXAM : 5**

**SCODE: 410**

**SUBJECT :COMMERCE-10**

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901766881			20	1901850252		
2	1901766896			21	1901850256		
3	1901850205			22	1901850258		
4	1901850209			23	1901850266		
5	1901850212			24	1901850272		
6	1901850213			25	1901850278		
7	1901850219			26	1901850280		
8	1901850222			27	1901850282		
9	1901850223			28	1901850283		
10	1901850226			29	1901850285		
11	1901850227						
12	1901850231						
13	1901850237						
14	1901850240						
15	1901850243						
16	1901850247						
17	1901850248						
18	1901850249						
19	1901850251						

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: 190 Govt. Degree College, Kodur RS**

**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	1901850211						
2	1901850225						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901850253						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766863						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766820						
2	1901766851						
3	1901850208						
4	1901850228						
5	1901850232						
6	1901850236						
7	1901850255						
8	1901850260						
9	1901850261						
10	1901850262						
11	1901850264						
12	1901850267						
13	1901850273						
14	1901850284						
15	1901850287						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766806						
2	1901850220						
3	1901850221						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901850217						
2	1901850230						
3	1901850281						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766881			20	1901850248		
2	1901766896			21	1901850249		
3	1901766899			22	1901850251		
4	1901766908			23	1901850252		
5	1901766923			24	1901850256		
6	1901850205			25	1901850258		
7	1901850209			26	1901850266		
8	1901850212			27	1901850272		
9	1901850213			28	1901850278		
10	1901850219			29	1901850280		
11	1901850222			30	1901850282		
12	1901850223			31	1901850283		
13	1901850226			32	1901850285		
14	1901850227						
15	1901850231						
16	1901850237						
17	1901850240						
18	1901850243						
19	1901850247						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901850211						
2	1901850225						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901850253						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766805						
2	1901766809						
3	1901766820						
4	1901766851						
5	1901850208						
6	1901850228						
7	1901850232						
8	1901850236						
9	1901850255						
10	1901850260						
11	1901850261						
12	1901850262						
13	1901850264						
14	1901850267						
15	1901850273						
16	1901850284						
17	1901850287						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901766806						
2	1901850220						
3	1901850221						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901850217						
2	1901850230						
3	1901850281						

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: 190 Govt. Degree College, Kodur RS**

**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	1901766881			20	1901850258		
2	1901766896			21	1901850266		
3	1901850205			22	1901850272		
4	1901850209			23	1901850278		
5	1901850212			24	1901850280		
6	1901850219			25	1901850282		
7	1901850222			26	1901850283		
8	1901850223			27	1901850285		
9	1901850226						
10	1901850227						
11	1901850231						
12	1901850237						
13	1901850240						
14	1901850247						
15	1901850248						
16	1901850249						
17	1901850251						
18	1901850252						
19	1901850256						

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:** 190 Govt. Degree College, Kodur RS

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901766872						

Total No.of Absentees :   
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901850253						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901850211						
2	1901850225						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766863						
2	1901850243						

Total No.of Absentees :    
in this 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:** 190 Govt. Degree College, Kodur RS

**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	1901850236						

Total No.of Absentees :   
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766820						
2	1901766851						
3	1901850208						
4	1901850213						
5	1901850228						
6	1901850232						
7	1901850255						
8	1901850260						
9	1901850261						
10	1901850262						
11	1901850264						
12	1901850267						
13	1901850273						
14	1901850284						
15	1901850287						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

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

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	1901850220						
2	1901850221						

Total No.of Absentees :    
in this 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: 190 Govt. Degree College, Kodur RS**

**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	1901766803						
2	1901766806						
3	1901850217						
4	1901850230						
5	1901850281						

Total No.of Absentees :    
in this 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