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

D - FORM CUM ROOM WISE STATEMENT

DATE OF EXAMINATION: 28-12-2016 **NAME OF EXAMINATION: MBA IIIYR AND DIPLOMAS DEC-2016**

CENTRE: 017 : TIRUPATI : S.V.ARTS COLLEGE

DAY OF THE EXAM : 1 **PCODE: 01** **PNAME :** MBA **PAPER :** 13

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO.	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	01708017853						
2	01713011884						

Total No.of Absentees : in this Sheet

Total No.of Mal Practice Cases : in this Sheet

Total No.of Present : 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: 29-12-2016 **NAME OF EXAMINATION: MBA IIIYR AND DIPLOMAS DEC-2016**

CENTRE: 017 : TIRUPATI : S.V.ARTS COLLEGE

DAY OF THE EXAM : 2 **PCODE: 01** **PNAME :** MBA **PAPER :** 14

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO.	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	01713011884						

Total No.of Absentees : in this Sheet

Total No.of Mal Practice Cases : in this Sheet

Total No.of Present : 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: 30-12-2016 **NAME OF EXAMINATION: MBA IIIYR AND DIPLOMAS DEC-2016**

CENTRE: 017 : TIRUPATI : S.V.ARTS COLLEGE

DAY OF THE EXAM : 3 **PCODE: 01** **PNAME :** MBA **PAPER :** 15

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO.	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	01713011884						

Total No.of Absentees : in this Sheet

Total No.of Mal Practice Cases : in this Sheet

Total No.of Present : 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: 31-12-2016 **NAME OF EXAMINATION: MBA IIIYR AND DIPLOMAS DEC-2016**

CENTRE: 017 : TIRUPATI : S.V.ARTS COLLEGE

DAY OF THE EXAM : 4 **PCODE: 01** **PNAME :** MBA **PAPER :** 31

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO.	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	01713011884						

Total No.of Absentees : in this Sheet

Total No.of Mal Practice Cases : in this Sheet

Total No.of Present : 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: 02-01-2017 **NAME OF EXAMINATION: MBA IIIYR AND DIPLOMAS DEC-2016**

CENTRE: 017 : TIRUPATI : S.V.ARTS COLLEGE

DAY OF THE EXAM : 5 **PCODE: 01** **PNAME :** MBA **PAPER :** 32

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO.	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	01713011884						

Total No.of Absentees : in this Sheet

Total No.of Mal Practice Cases : in this Sheet

Total No.of Present : 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: 03-01-2017 **NAME OF EXAMINATION: MBA IIIYR AND DIPLOMAS DEC-2016**

CENTRE: 017 : TIRUPATI : S.V.ARTS COLLEGE

DAY OF THE EXAM : 6 **PCODE: 01** **PNAME :** MBA **PAPER :** 33

S.NO	H.T.NO.	ANSWER BOOKLET NO.	SIGN.	S.NO.	H.T.NO.	ANSWER BOOKLET NO.	SIGN.
1	01713011884						

Total No.of Absentees : in this Sheet

Total No.of Mal Practice Cases : in this Sheet

Total No.of Present : in this Sheet

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

Signature of the Invigilator **Signature of Chief Superintendent**