
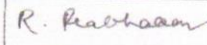


Scribe Facility for Blind Students:

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VIKRAMA SIMHAPURI UNIVERSITY :: NELLORE		
HALL TICKET		
BCOM UG FIRST SEMESTER REGULAR EXAMINATIONS, FEB - 2023		
COURSE: BCOM	GROUP: CA	REGISTERED NO: 222116007
Student Name:	BALIEM KALYANI	
Examination Centre:	(118) KRISHNA CHAITANYA DEGREE COLLEGE, NEAR Z.P OFFICE VRC CNT NLR	
College Name:	(116) JAGAN'S DEGREE COLLEGE, NELLORE	
Father Name:	D/o BALLEM KAMAKSHIAH	
Exam Date	Exam Time	Appearing Papers
13/02/2023	2.00 PM to 5.00 PM	1011ENG20 - A Course in Communication and Soft Skills
14/02/2023	2.00 PM to 5.00 PM	1021TEL20 - Pracheena Telugu Kavithvam
15/02/2023	2.00 PM to 4.00 PM	1031LS120 - Basic Computer Applications
16/02/2023	2.00 PM to 4.00 PM	1044SDC20 - Insurance Promotion
17/02/2023	2.00 PM to 5.00 PM	1201FOA20 - Fundamentals of Accounting
20/02/2023	2.00 PM to 5.00 PM	1204INT20 - Information Technology
23/02/2023	2.00 PM to 5.00 PM	1202BOM20 - Business Organization and Management (Gen & CA)
PRACTICAL	PRACTICAL	1204INT20P - PRACTICAL : INFORMATION TECHNOLOGY
PLEASE WEAR MASK		
		 Controller of Examinations


NOTE 1: VERIFY THE SUBJECT DATES WITH THE UNIVERSITY TIME TABLE BEFORE ATTENDING EXAMINATIONS.

INSTRUCTIONS TO CANDIDATES

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- Strict silence should be maintained in the examination hall.
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- All the answers should be written in the given answerbook only. No additional sheets will be supplied.
- Candidates writing the examination at a centre other than the allotted one, without prior permission of the CEO, VSU or the Chief superintendent of the examination are liable for cancellation of their answer booklets.
- Legal suits against the University if any, shall be filed in courts within the jurisdiction of Nellore city only.


PRINCIPAL
JAGAN'S DEGREE & PG COLLEGE
Nellore


<https://mail.google.com/mail/u/0/?tab=km#inbox?projector=1>



గ్రామ - వార్డు సచివాలయము

ఆంధ్రప్రదేశ్ ప్రభుత్వం

Government of Andhra Pradesh



GWSA 81164199

CERTIFICATE FOR PERSON WITH DISABILITY

(Issued under the authority vide G.O.Ms.No.35 HEALTH, MEDICAL AND FAMILY WELFARE (A) DEPARTMENT dt.10.04.2018)

Medical Board: Government General Hospital, Nellore

ID No.of Person with Disability: 0982015000000022

Date of Issue: 12/12/2022

This is certified that Kumari Ballem Katyani, D/o KAMAKSHAYYA, Female, age 18 years, 19th Ward Habitation, 19th Ward Village, Nellore (urban) Mandal, S P S Nellore District, is suffering from Permanent disability of the following category-

Visual Impairment.




- Sub-type of disability :Blind ness
- Cause of Disability : Disease-BetterEye,Disease-WorseEye.

CORNEAL OPACITY BOTH EYES.

- Re-assessment of this case is not recommended.
- Percentage of disability in her case is 75% [Sevarty Five percent].

Identification Marks of Person with Disability-

- a)AMOLE ON UPPER LIP.
- b)A MOLE ON FACE.

 Signature DR.K.VIVEK PRAVEEN MS.opthal Assistant Professor Regn.No : 57975	 Signature Dr.C S Sandhya Professor Regn.No : 15818	 Signature Dr.B S Naik Chairman, Medical Board Regn.No : 17355
--	---	--

Signature Not Verified

Digitally signed by
SIDDANAIK BUKKE
 Date: 2022.12.15
 01:01:13+05'30

Note: This is a Digitally Signed Certificate, does not require physical signature. And this certificate can be verified at www.gramawardsachivalayam.ap.gov.in by furnishing the application number mentioned in the Certificate.



8
"DFA"
VIKRAMA SIMHAPURI UNIVERSITY:: NELLORE

Roc.No.VSU/ Scribe Permission/2023

Date: 10.02.2023

From The Controller of Examinations V.S.University, Nellore	To The Chief Superintendent Vivekananda Degree College, Nellore
---	---

Sir,

Sub:- Vikrama Simhapuri University – Examination Branch – UG Three
Years (CBCS) I Semester Regular Examinations, Feb-2023 –
Providing Scribe for Blindness candidate appearing in your
Examination Center – Request – Regarding.
Ref:- Letter No. Nil, Dated:09.02.2023 of Jagan's Degree & PG College,
Nellore.

I am to inform that **Mr.Shaik Khaja, Reg. No.222116069** is going to appear for the
ensuing **BCOM I Semester** Degree Examinations in your examination Center. In this
connection I request you to permit **Mr. Kodi Tarun (Aadhar No. 5125 6610 5795)** as scribe for
her due to Disability: 'Congenital- BetterEye, Congenital –WorseEye' without any financial
commitment at your end.

Kindly acknowledge the receipt of this letter. This Certificate is valid till the completion
of B.COM., UG - I Semester Examinations, February 2023.


Yours sincerely

R. Prabhakaran
CONTROLLER OF EXAMINATIONS

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10.2.23

Copy to Concern

Copy to the Principal, Jagan's Degree & PG College, Nellore for information and necessary
action.

VIKRAMA SIMHAPURI UNIVERSITY :: NELLORE		
HALL TICKET		
BCOM UG FIRST SEMESTER REGULAR EXAMINATIONS, FEB - 2023		
COURSE: BCOM	GROUP: CA	REGISTERED NO: 222116069
Student Name:	SHAIK KHAJA	
Examination Centre:	(163) VIVEKANANDA DEGREE COLLEGE, TWONHOSEPET, NELLORE	
College Name:	(116) JAGAN'S DEGREE COLLEGE, NELLORE	
Father Name:	D/o SHAIK JABBAR	
Exam Date	Exam Time	Appearing Papers
13/02/2023	2.00 PM to 5.00 PM	1011ENG20 - A Course in Communication and Soft Skills
14/02/2023	2.00 PM to 5.00 PM	1021TEL20 - Pracheena Telugu Kavithvam
15/02/2023	2.00 PM to 4.00 PM	1031LS120 - Basic Computer Applications
16/02/2023	2.00 PM to 4.00 PM	1044SDC20 - Insurance Promotion
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PRACTICAL	PRACTICAL	1204INT20P - PRACTICAL : INFORMATION TECHNOLOGY
PLEASE WEAR MASK		 R. Ralhaan Controller of Examinations

NOTE 1: VERIFY THE SUBJECT DATES WITH THE UNIVERSITY TIME TABLE BEFORE ATTENDING EXAMINATIONS.

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- Legal suits against the University if any, shall be filed in courts within the jurisdiction of Nellore city only.


 PRINCIPAL
 JAGAN'S DEGREE & PG COLLEGE
 Nellore

Physically Handicapped person Hall ticket

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AP19 79668103

Government of Andhra Pradesh

CERTIFICATE FOR PERSON WITH DISABILITY

(Issued under the authority vide G.O.Ms.No.35 HEALTH, MEDICAL AND FAMILY WELFARE (A) DEPARTMENT dt.10.04.2018

Medical Board: Area Hospital, Kavali

ID No.of Person with Disability: 09125810070000070

Date of Issue: 18/12/2020



• This is certified that Shri Shaik Khaja, S/o C/O Shaik Abdul Jabbar, Male, age 18 years, resident of H.No.# 7-19-1b, 7th Ward Habitation, 7th Ward Village, Kavali (urban) Mandal, S P S Nellore District, is suffering from Permanent disability of the following category-
Visual Impairment.

- Sub-type of disability :Blind ness
- Cause of Disability : Congenital-Better Eye, Congenital-Worse Eye.

RETINITIS PIGMENTOSA.

- Re-assessment of this case is not recommended.
- Percentage of disability in his case is 100% [Hundred percent].
- Identification Marks of Person with Disability-

- a) A MOLE ON THE RIGHT NECK .
- b) A MOLE ON LEFT HAND .

Signature

Dr. G. Prameela Kumari

MBBS, DO

Civ. Assistant Surgeon

Regn.No : 39365

Signature

Dr. K. Subba Rao

MD, GM

Civil Surgeon Specialist

Regn.No : 35385

Signature

Dr.M.Venkateswarlu

MBBS,DCH

Chairman, Medical Board

Regn.No : 17453

Signature valid


Digitally signed by
Mandana
Venkateswarlu
Date: 2020.12.18
20:18:10 IST

Note: This is a Digitally Signed Certificate, does not require physical signature and this certificate can be verified at www.dsp.gov.in by furnishing the application number mentioned in the Certificate.




11

3


 భారత ప్రభుత్వం
GOVERNMENT OF INDIA

కోడి తరున్
Kodi Tarun



పుట్టిన సంవత్సరం/Year of Birth: 2005
పురుషుడు / Male

5125 6610 5795



ఆధార్ - సామాన్యని హక్కు

Ramali

Principal
JAGAN'S DEGREE & P. G. COLLEGE
NELLORE - 3.





భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
భారత ప్రభుత్వం
Unique Identification Authority of India
Government of India

నమోదు సంఖ్య / Enrollment No. : 2710/02364/77469

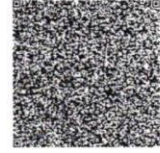
To
Shaik Khaja
షక ఖాజా
C/O Shaik Abdul Jabbar
7-19-1b
achari vari street
Kavali
Kavali, Kavali, Nellore,
Andhra Pradesh - 524201
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11/03/2013

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KA893260104FH



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

5764 3901 1186

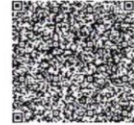
నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



షక ఖాజా
Shaik Khaja
పుట్టిన తేదీ / DOB: 16/09/2001
పురుషుడు / Male



5764 3901 1186

నా ఆధార్, నా గుర్తింపు



13 "DFA"

VIKRAMA SIMHAPURI UNIVERSITY:: NELLORE

Roc.No.VSU/ Scribe Permission/2023

Date: 10.02.2023

From The Controller of Examinations V.S.University, Nellore	To The Chief Superintendent VR Degree College, Nellore
---	--

Sir,

- Sub:- Vikrama Simhapuri University – Examination Branch – UG Three Years (CBCS) I Semester Regular Examinations, Feb-2023 – Providing Scribe for Blindness candidate appearing in your Examination Center – Request – Regarding.
- Ref:- Letter No. Nil, Dated:09.02.2023 of Jagan's Degree & PG College, Nellore.

I am to inform that **Mr.Mogulluru Balaji, Reg. No.222116045** is going to appear for the ensuing **BCOM I Semester** Degree Examinations in your examination Center. In this connection I request you to permit **Mr. Shaik Kashif Ahamed (Aadhar No. 8803 2529 1973)** as scribe for her due to Disability: 'Congenital- BetterEye, Congenital –WorseEye, Hereditary-BetterEye, Hereditary –WorseEye' without any financial commitment at your end.

Kindly acknowledge the receipt of this letter. This Certificate is valid till the completion of B.COM., UG - I Semester Examinations, February 2023.


Yours sincerely

P. Mahalingam
CONTROLLER OF EXAMINATIONS

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10.2.23

Copy to Concern

Copy to the Principal, Jagan's Degree & PG College, Nellore for information and necessary action.

VIKRAMA SIMHAPURI UNIVERSITY :: NELLORE		
HALL TICKET		
BCOM UG FIRST SEMESTER REGULAR EXAMINATIONS, FEB - 2023		
COURSE: BCOM	GROUP: CA	REGISTERED NO: 222116045
Student Name:	MOGULLURU BALAJI	
Examination Centre:	(155) VR DEGREE COLLEGE, TRUNK ROAD NELLORE	
College Name:	(116) JAGAN'S DEGREE COLLEGE, NELLORE	
Father Name:	S/o MOGULLURU PRASAD	
Exam Date	Exam Time	Appearing Papers
13/02/2023	2.00 PM to 5.00 PM	1011ENG20 - A Course in Communication and Soft Skills
14/02/2023	2.00 PM to 5.00 PM	1021TEL20 - Pracheena Telugu Kavithvam
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16/02/2023	2.00 PM to 4.00 PM	1044SDC20 - Insurance Promotion
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PRACTICAL	PRACTICAL	1204INT20P - PRACTICAL : INFORMATION TECHNOLOGY
PLEASE WEAR MASK		 R. Prabhakar Controller of Examinations

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PRINCIPAL
 JAGAN'S DEGREE & PG COLLEGE
 Nellore



15



AP18 54478585

Government of Andhra Pradesh

CERTIFICATE FOR PERSON WITH DISABILITY

(Issued under the authority vide G.O.Ms.No.35 HEALTH, MEDICAL AND FAMILY WELFARE (A) DEPARTMENT dt.10.04.2018

Medical Board: **Government General Hospital, Nellore**

ID No.of Person with Disability: **09129240170117039**

Date of issue: **11/12/2018**



• This is certified that **Shri Mogalluru Balajee, S/o Prasad, Male, age 15 years, Ayagaripalem Habitation, Ayagaripalem Village, Podalakur Mandal, S P S Nellore District,** is suffering from Permanent disability of the following category:-

Visual Impairment.

• Sub-type of disability :**Low Vision**

• Cause of Disability : **Congenital-BetterEye, Congenital-WorseEye, Hereditary-BetterEye, Hereditary-WorseEye.**

BE MACULAR DYSTROPHY .

• Re-assessment of this case is **not recommended.**

• Percentage of disability in his case is **40% [Fourty percent].**

• He meets the following physical requirements for discharge of his duties. **RW-can perform work by reading and writing, SE-can perform work by seeing.**

• Identification Marks of Person with Disability:-

a) **A MOLE ON THE RIGHT CHEEK .**

b) **A MOLE ON THE RIGHT SHOWLDER .**

Signature

Dr.G Sireesha

Assistant Professor

Regn.No : **40550**

Signature

Dr.A.Srihari

M.S.,

Assistant Professor

Regn.No : **14131**

Signature

Dr.Ch Radhakrishnama Raju

Chairman, Medical Board

Regn.No : **18611**

Signature valid

Digitally signed by
Chamathi
Radhakrishnam Raju
Date: 2018.01.08
14:51:18 IST

note: This is a Digitally Signed Certificate, does not require physical signature and this certificate can be verified at www.ap.mee seva.gov.in by furnishing the application number mentioned in the Certificate.

**VIKRAMA SIMHAPURI UNIVERSITY:: NELLORE**

Roc.No.VSU/ Scribe Permission/2023

Date: 10.02.2023

From The Controller of Examinations V.S.University, Nellore	To The Chief Superintendent Krishna Chaitanya Degree College, Nellore
---	---

Sir,

Sub:- Vikrama Simhapuri University – Examination Branch – UG Three Years (CBCS) I Semester Regular Examinations, Feb-2023 – Providing Scribe for Blindness candidate appearing in your Examination Center – Request – Regarding.

Ref:- Letter No. Nil, Dated:09.02.2023 of Jagan's Degree & PG College, Nellore.

I am to inform that **Ms.Ballem Kalyani, Reg. No.222116007** is going to appear for the ensuing **BCOM I Semester** Degree Examinations in your examination Center. In this connection I request you to permit **Ms. Vuyyala Sowmya (Aadhar No. 4808 9474 0092)** as scribe for her due to Disability: 'Disease-BetterEye,Disease-WorseEye' without any financial commitment at your end.

Kindly acknowledge the receipt of this letter. This Certificate is valid till the completion of B.COM., UG - I Semester Examinations, February 2023.

Yours sincerely

R. Mahalingam
CONTROLLER OF EXAMINATIONS

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10.2.23

Copy to Concern

Copy to the Principal, Jagan's Degree & PG College, Nellore for information and necessary action.

