

Month MARCH
Year 2018

[illegible]

Name of the Office GEHS COLLEGE
BIOCHEMISTRY

Attendance

Register

Month MARCH
 Year 2018

S No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
1.	Dr. V. SREERAMULU MD	Professor HOD	[Signature]										[Signature]																					
2.	Dr. M.B.C.R. NAIDU MSc PhD	Asst Professor	[Signature]										[Signature]																					
3.	Dr. B. JYOTCHNA DEVI MD	Asst Professor	[Signature]										[Signature]																					
4.	Dr. THEJASWINI H MD	Asst Professor	[Signature]										[Signature]																					
5.	Mrs. CH. KIRAN MAI MSc (M)	Tutor	[Signature]										[Signature]																					
6.	Mrs. T.C. SWARNIA LATHA MSc (M)	Tutor	[Signature]										[Signature]																					
7.	Dr. H. SANTOSH KUMAR MSc	Tutor	[Signature]										[Signature]																					
8.	Dr. T. MOHAN BABU		[Signature]										[Signature]																					
SIGNATURE OF THE HOD			[Signature]										[Signature]																					
SIGNATURE OF THE PRINCIPAL			[Signature]										[Signature]																					

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
1	Dr. G. PARVATHI	Professor & HOD																																
2	Dr. N. SRINIVASARAGAVAN	Asso. Professor																															Relieved on 16-03-2018	
3	Dr. R. HAVILAH TWINKLE	Asst. Professor																																
4	Dr. PRATIMA D KHATAKE	Asst. Professor																																
5	Dr. G. RAMESH NAIDU	Tutor																																
6	Dr. P. ARAVIND	Tutor																																
7	Dr. R. SARAT CHANDRA	Tutor																																
SIGNATURE OF HOD																																		
SIGNATURE OF PRINCIPAL																																		

Attendance

Register

Month: MARCH

Year 2004

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Name of the Office GENE & HOSPITAL
DEPT. OF MICROBIOLOGY

Attendance

Register

Month MARCH
Year 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
01	Dr. P. SAMATHA MD	Professor & HOD	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
02	Dr. I. JYOTHI PADHAJA MD	Professor	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
03	Dr. K. SRIDHAR MD	Asso-Prof	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
04	Dr. B. RADHIKA MD	Asst. Prof	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
05	Mr. P. BALACHANDRA SEKHAR MD	Asst. Prof	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
06	Dr. S. S. VIJAYASRI B MD	Asst. Prof	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
07	Dr. V. HARSHITHA	TUTOR	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
08	Dr. P. GIRIDAR RAO	TUTOR	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
09	Dr. R. VENKATGSH	TUTOR	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
	Signature of HOD		PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	
	Signature of Principal		PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	PS	

Name of the Office G. E. M. S.
Roorly, Sakaralam

Attendance

Register PATHOLOGY

Month March
Year 2018

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Attendance

Register

Month MARCH
 Year 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
1	Dr. P. SRINIVASULU	Assistant HOD	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
2	Dr. SUJAN KUMAR	Assistant Professor	H	E	F																													
3	Dr. B. JEEVESWARA RAO	Assistant Professor	X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
4	Dr. D. NARESH	TUTOR	pl	pl	pl		pl	pl	E	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	pl	
5	Dr. H. GOVINDA RAO	TUTOR	g	g	g		g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	g	
6	Dr. CH. VAMSI KRISHNA	TUTOR	v	v	v		v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	v	
7	Dr. J. S. SAI NEEVEDIKA	TUTOR																																
	Signature of the HOD		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
	Signature of the Principal		J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	

Name of the Office ENT
 ..(Great Eastern Medical College) ..

Attendance

Register

Month MARCH 31 Date
 Year 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
	Professor & HOD																																	
1	Dr. B. Tatyao		A	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
	Associate Professor																																	
2	Dr. P.B. Kameswaryao		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
3	Dr. S. Rama Krishna Rao		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
	Assistant Professor																																	
4	Dr. P. Rajeswarao		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
5	Dr. L. Swapna		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
	SR Resident																																	
6	Dr. M. Archana		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
	Sign of HOD		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	
	Sign of Principal		B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	

Name of the Office... Ophthalmology

Attendance

Register

Month... March
Year... 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
	Professors																																	
1.	Dr. K. Radma Raju	HOD																																
2.	Dr. J. P. Behera																																	
	Assistant Professor																																	
3.	Dr. Anand Reddy																																	
4.	Dr. Ch. Ganesa Murthy																																	
5.	Dr. Dinesh Karthi																																	
	Senior Resident																																	
6.	Dr. S. Lakshmi																																	
	Sign of the HOD:																																	
	Sign of the Principal:																																	

Attendance

RA G O L U , S R I K A K U L A M

Register

COMMUNITY
MEDICINE
DEPARTMENT

Month: March
Year: 2018

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Name of the Office **GREAT EASTERN MEDICAL SCHOOL & HOSPITAL**

Attendance

RAGOLU

Register

URBAN HEALTH
TRAINING CENTRE

Month **MARCH**
Year **2018**

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
	Dr. SAMINA M. AUSVI	Asst Professor	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	As	
	Dr. KRISHNA YENI	LMO	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	Dis - 01/3/18
	Signature of the H.O.D.																																	
	Signature of the principal																																	

Attendance

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Register RURAL HEALTH TRAINING CENTRE
Month: MARCH
Year: 2018

[illegible]

Attendance

Register

General Medicine Month March
Year 2018

[illegible]

Name of the Office Genl. Hosp. Val

Attendance

Register

General Medicine

Month March
Year 2013

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
	Dr. P. Sreedevi	Ant. Rd.																																
	Dr. Y. Suresh Kumar	"																																
	Dr. U. Vijaya Lakshmi	"																																
	Dr. Shah Tariq Rashid	"																																
	Dr. D. Vidya Sagar	Sr. Resid.																																
	Dr. B. Suresh	"																																
	Dr. P. V. Pradeep Kumar	"																																
	Dr. A. Ashok Kumar	"																																
	Dr. P. Ganesh Chakravarthy	"																																
	Dr. B. S. R. P. Gupta	"																																
	Dr. B. Kedar Nath	"																																
	Signature of the HOD																																	
	Signature of the principal																																	

Name of the Office ... GEMS Hospital
 Bagel, Sri. Kakulam

Attendance

Register

psychiatry

Month ... March
 Year ... 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
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Dr. D. Satyanarayana

ASOC
prof

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Dr. R.V.R. Abhinaya

ASOC

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Dr. N. Suryakumari

ASOC

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Dr. K.V.N. Sailabari

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Sign of the head

Sign of the principal

Name of the Office GEMS & Hospital
Bagalur, Srikulavaram

Attendance

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10
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Dr. I. Vijayashree

Professor
HOD

X X X X X X X X X X

Dr. V. Anand Kumar

Asst. Prof.

X X X X X X X X X X

Dr. V. Korantautu

Asst. Prof.

X X X X X X X X X X

Dr. A. Subasini

Senior
Resident

X X X X X X X X X X

Sign of the HOD

X X X X X X X X X X

Sign of the Principal

X X X X X X X X X X

Register

D.V.L

Month March
 Year 2018

11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
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D.O.J - 01-03-2018

Name of the Office GENS & Hospital
Raghu, Srikakulam

Attendance

[illegible]

Register

TE 6 chest

Month March
Year 2018

[illegible]

Name of the Office General Surgery

Attendance

Register

Month March
Year 2018

[illegible][illegible]

Wounded Man
 02/20/2018
 at Joplin (C.G.)
05/18/18
05/18/18
NITRUS: 12/18/18
 for 12/18/18
 on 26th Nov 2018

Name of the Office General Surgery

Attendance

[illegible]

Register

Month MARCH
Year 2018

[illegible]

Name of the Office March
ORTHOPAEDICS 2018 department

Attendance

Register

Month March
 Year 2018

S No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
	<u>PROFESSORS</u>																																	
	DR. Y. SUBBA REDDY		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	
	DR. R. Venu Gopal Rao																																	Joining 13/03/2018
	DR. V. Venu Gopal Rao		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	Joining 01/03/2018
	DR. MOHAMMAD AZMUDIN		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	Joining 01/03/2018
	<u>ASSOCIATE PROFESSORS</u>																																	
	DR. B. Komala Rao		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	
	DR. V. Ramesh		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	
	<u>ASSISTANT PROFESSORS</u>																																	
	DR. Sai phani Chandra		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	
	DR. A. Siva prasad		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	
	DR. P. Dinesh Kumar		abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	abs	

Name of the Office ORTHOPAEDICS
 Department

Attendance

Register

Month March
 Year 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Remarks
	DR. Vamsi Krishna		absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	
	DR. T. Zeehan Muthid	Senior Residents	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	
	DR. Praveen Kumar		Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	Pr	
	DR. Lakshmi Narayana G		absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	
	DR. N. Phani Kumar		absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	
	Signature of the HOD :-		absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	
	Signature of the principal :-		absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	absent	

D.O.J. 15/3/18

Register

Month MARCH
Year 2018

[illegible]

Name of the Office GEMS HOSPITAL
RAGOLU, SRIMAKULAM

Attendance

Register

Month February
Year 2018

S No.	NAME	Design- ation	1	2	3	(4)	5	6	7	8	9	10
	Dr. V. Rajanikanth Rao	Prof & HOD	X	X	X		X	X	X	X	X	X
	Dr. N. Giridhar Gopal	Prof.	X	X	X		X	X	X	X	X	X
	Dr. Anant MadhuKasi	Prof.	m	m	m		m	m	m	m	m	m
	Dr. L. Gyam Tekchand	Asst. Prof.	x	x	x		x	x	x	(x)	x	x
	Ar.M. Rupesh	Assoc Prof.	w	w	w		w	w	w	w	w	w
	Dr CH Sirisha	Asst.Prof.	w	w	w	s	w	w	w	w	w	w
	Dr. Swetha Reddy	Asst.Prf.	d	d	d	N	d	d	d	d	d	(d)
	Dr. Seshom Baburao	SR	v	v	v	A	v	v	v	v	v	v
	Dr A. Sumithra Devi	SR	L	L	L	y	L	L	L	L	L	L
	Dr. B. Sushma	SR	b	b	b		b	b	b	b	b	b
	Dr. Challo Anil Kumar	SR	x	x	x		x	x	x	x	x	x
	Dr. P. Lawakumar	SR	w	w	w		w	w	w	w	w	w
	Dr. N. Rakesh Kumar	SR	v	v	v		v	v	v	v	v	v
	L.R.R go											
	Signature of HOD											
	Signature of Principal		RPR	KVR	JRR							

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Register

Year 2018

[illegible]

Name of the Office DEPT

Attendance

Register

Month MARCH
Year 2018

S. No.	NAME	Designation	1	2	3	4	5	6	7	8	9	10
<u>Professors</u>												
1.	Dr. Ravi Sadumu	Professor & HOD	L	L		L	L	L	L			
2.	Dr. M. Tri Rura Sundaramba		AS	AS	AS		AS	AS	AS	CL	AS	
3.	Dr. H. Bhaskara Rao		<u>AS</u>	<u>AS</u>	<u>AS</u>		<u>AS</u>	<u>AS</u>	<u>AS</u>	<u>AS</u>	<u>AS</u>	<u>AS</u>
4.	Dr. P. Usha Rani [DUS-12-03-18]											
<u>Associate Professors</u>												
1.	Dr. Ch. Rambabu		AP	AP	AP		AP	AP	AP	AP		
2.	Dr. D. Sidhar		DS	DS	DS		CL	DS	DS	DS	DS	DS
<u>Assistant Professors</u>												
1.	Dr. D. Hanumanthi		AP	AP	AP		AP	AP	AP	AP	AP	AP
2.	Dr. M. Maheswari Rao		AP	AP	AP		AP	AP	AP	AP	AP	AP
3.	Dr. M. Sumanlatha		AP	AP	AP		AP	AP	AP	AP	AP	AP
4.	Dr. B. H. L. Sumanthi		<u>AP</u>	<u>AP</u>	<u>AP</u>		<u>AP</u>	<u>AP</u>	<u>AP</u>	<u>AP</u>	<u>AP</u>	<u>AP</u>
5.	P. Sumanlatha		B	B	B		B	B	B	B	B	B

11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
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Name of the Office 073674

Attendance

S. No.	NAME	Designation	1	2	3	(4)	5	6	7	8	9	10
6	D. J. Sai Somyakta.		G	a	m		G	a	m	G	a	m
76	Dr. G. Sumalatha.		T	R	C		T	R	T	R	T	R
	<u>Sr Resident's</u>											
1.	Dr. P. Madanika		P	M	P		P	M	P	M	C	P
2.	Dr. B. Saranya.		L	L	L		L	L	L	L	L	L
3.	Dr. T. Lakshmi Lalitha		L	L	L		L	L	L	L	L	L
4.	Dr. M. Anusui		A	A	A		A	A	A	A	A	A
5.	Dr. B. Sandhya		B	B	B		B	B	B	B	B	B
6.	Dr. S. Sravanthi		S	S	S		S	S	S	S	S	S
	Signature of HOD		F	F	F		E	E	E	E	E	E
	Signature of Principal		J	J	J		J	J	J	J	J	J

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Year ... 2018

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Attendance

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PROFESSORS												
1.	DR. A. BHASKAR		W	W	W		A	A	A	B	B	B
2.	DR. HARI MORISETTY		H	H	H		H	H	H	H	H	H
ASSOCIATE PROFESSORS												
1.	DR. CH. SANTHARAM		(S)	(S)	(S)	(S)	(S)	(S)	(S)	(S)	(S)	(S)
2.	DR. S. JYOTHI PRAKASH RAJU		T	T	T		T	T	T	T	T	T
ASSISTANT PROFESSORS												
1.	DR. N. VIJAY KUMAR		V	V	V	V	V	V	V	V	V	V
2.	DR. N.V. DASARWAR		N	N	N		N	N	N	N	N	N
3.	DR. MANCHU POLAYYA		M	M	M		M	M	M	M	M	M
4.	DR. K. MADHAVI		K	K	K		K	K	K	K	K	K
5.	DR. J. SANTHOSH KUMAR		J	J	J	J	J	J	J	J	J	J
SENIOR RESIDENTS												
1.	DR. M. RAHUNVEERA		M	M	M		M	M	M	M	M	M
2.	DR. AJIT PATNAIK		A	A	A		A	A	A	A	A	A
3.	DR. K. DILEEP KUMAR		D	D	D		D	D	D	D	D	D
4.	DR. D. SWAMI NAIDU		S	S	S		S	S	S	S	S	S
5.	DR. K. VINOD KUMAR		(V)	(V)	(V)		(V)	(V)	(V)	(V)	(V)	(V)
SIGN OF THE HOD:												
SIGN OF THE PRINCIPAL:												

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