

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

STUDENT EVALUATION DIVISION

MAIDAN GARHI, NEW DELHI-110 068

TERM-END EXAM – JUNE / DECEMBER, 201____

EXAM FORMSerial
No.

Control No.

INSTRUCTIONS

1. Please submit your exam form at the concerned Regional Centre under which your examination centre falls.
2. Write in **CAPITAL LETTERS** only within the box without touching the lines as shown in the sample below.

0 1 2 3 4 5 6 7 8 9 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

Programme Code

Regional Centre Code

Study Centre Code

Enrolment No.

Exam Centre Code

(Where you wish to appear in Exam)

Name of the Candidate: (Leave one box empty between First Name, Middle Name and Surname)

Address for Correspondence (Do not give Post Box No. Address. Leave a blank box between each unit of address like House No., Street Name, PO, etc.)

City

District

State

Pin Code

MOBILE NO.

E-MAIL

Physical Handicapped
(Please tick the relevant box)

YES

NO

Scribe/Amanuensis required by the student
(Please tick the relevant box)

YES

NO

FOR SCRIBE/AMANUENSIS, THE STUDENT MAY APPROACH THE CONCERNED REGIONAL CENTRE (UNDER WHOM THE EXAMINATION CENTRE FALLS) ALONG WITH DISABILITY CERTIFICATE

COURSE OPTION:

Course codes for which appearing for the first time OR failed in the earlier TEEs including Practical Courses for BCA, MCA/ PGDLAN / BLIS Programmes.
FEE ₹ 120/- PER COURSE (Demand draft in favour of IGNOU and payable at City of Regional Centre under which your exam centre falls.

S.No.	Course Code	S.No.	Course Code
1.		9.	
2.		10.	
3.		11.	
4.		12.	
5.		13.	
6.		14.	
7.		15.	
8.		16.	

FEE DETAILS (Please write your Name & Enrolment No. at the back of the Draft)

Total No. of Course		Total Amount
Theory Courses	₹ × 120	
Practical Courses	₹ × 120	
Late Fee		
TOTAL		

SIGNATURE OF THE STUDENT
(within the Box only)

1. Draft No.

Amount

2. Draft No.

Amount

Date

Issuing Branch

Payable at (Regional Centre under which your exam centre falls)

ISSUING BANK