

FILE
COVER PAGE

ENROLNMENT NO.: _____

NAME: _____

COURSE CODE: _____

FORM NO. 1

Enrol. No.: _____
 Programme Title: _____
 Name: _____
 Course Code: _____ Medium: _____

S. No.	Assignment No.

Signature of the Student _____
 Date : _____

For Office Use Only
 S. No. _____
 Date of Receipt: _____
 Name of Evaluator: _____
 Date of despatch to the Evaluator: _____
 Date of receipt from the Evaluator: _____

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY
 ASSIGNMENTS REMITTANCE-CUM-ACKNOWLEDGEMENT
 CARD**

Enrol. No.: _____ Programme Title: _____
 Name: _____
 Course Code: _____ Medium: _____

S. No.	Assignment No.

Signature of the Student _____
 Name: _____
 Address of the Student: _____
 Date : _____

For Office Use Only
 S. No. _____
 Name of Evaluator: _____
 Date : _____ Seal

(Please write complete address and affix adequate postal stamp on reverse)

Affix
Stamp
Here

From:

The Coordinator
 Study Centre concerned

To

(ADDRESS OF THE STUDENT)

.....



Sl. No.

INDIRA GANDHI NATIONAL OPEN UNIVERSITY
(Evaluation Division)

Maidan Garhi, New Delhi - 110 068.

(To be filled in Duplicate)*

Enrolment No. _____

Programme _____

Assessment

Student's Name _____ Course _____ Marks Awarded

Study Centre Code No. _____ Assignment No. _____ Maximum Marks

Evaluators Comment's

If the space is not sufficient, please use back page.

Please tick (✓) in the relevant box below

CONTENT				PRESENTATION			
	Good	Average	Poor		Good	Average	Poor
Appropriateness of Information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conciseness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analysis of the topic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Language and Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Evaluator's Signature _____

Moderator's comments, if any

Date _____

Name in full _____

Evaluator's Code No. _____

Address _____

Signature of the Moderator _____

Name in Full _____

* First Copy is meant for the student and the Second Copy for the Study Centre's record.

IGNOU STUDY CENTRE
1632

ENROLNMENT NO.: _____

NAME: _____

ADDRESS: _____

PROGRAMME TITLE: _____

COURSE CODE: _____

COURSE TITLE: _____

ASSIGNMENT CODE: _____

(as printed on assignment sheet)

STUDY CENTRE CODE: _____

SIGNATURE: _____

DATE: _____