

Enrolment No. Programme: **BA/B.COM**

Name:

Course Code: Medium:

Sl. No.	Assignment No.	For Office Use Only
		Sl. No.:
		Date of Receipt:
		Name of Receipt:
		Date of despatch to the Evaluator:
Sig. of dealing Accountant		Date of receipt from
Date:		Evaluator:

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

Enrolment No. Programme: **BA/B.COM**

Name:

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Sl. No. Assignment No.

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Signature of the Student

Date:.....

FOR OFFICE USE ONLY	
Sl. No.:.....	
Signature of the receiver	
Date:.....	Seal

- Note:**
1. Submit this form to the coordinator of your study centre alongwith the assignment.
 2. When you submit the assignment by post, enclose a self-addressed stamped envelop along with this.