



CONFIDENTIAL

INDIRA GANDHI NATIONAL OPEN UNIVERSITY
PROFORMA FOR ESTABLISHMENT OF EXAMINATION CENTRE FOR
TERM-END EXAMINATION:20.....

(Para I below is to be filled up, if proposed examination center is also established study center of IGNOU, otherwise leave it blank)

1. **STUDY CENTRE CODE NO** : _____

Name of the coordinator & : _____

& Official address with pin code: _____

: _____

: _____

Telephone No. with STD Code : _____

Mobile No. : _____

E-mail ID : _____

Fax No. : _____

Residential address with pin cod: _____

: _____

Telephone No. with STD Code : _____

2. **In case your center is established as examination center by the University:-**

Name of the Centre Supdt. & : _____

& Official address with pin code: _____

: _____

Telephone No. with STD Code : _____

Mobile No. : _____

E-mail ID : _____

Fax No : _____

Residential address with pin code: _____

: _____

Telephone No. with STD Code : _____

3. **Venue of examination Centre** : _____

With full mailing address : _____

: _____

Telephone no with STD Code : _____

Fax No. : _____

Seating Capacity of center:

Morning Session : _____

Evening Session : _____

(Please mention separately the No. of maximum students can be accommodated per session)

4. If proposed examination center is study center of IGNOU, the Coordinator of the study center will be the custodian of all the confidential material related to the examinations. The University will send all the confidential material to him at his official address mentioned in para I above. In case the Coordinator is unable to be the custodian of confidential material due to unavoidable circumstances, the Coordinator should nominate any other person for custody of confidential material. His name and address may be mentioned below:

- a) Name of person nominated by Coordinator as _____
Custodian of confidential material : _____
: _____
Telephone No. with STD code : _____
Mobile No. : _____
E-mail ID : _____
- b) Address, where confidential material : _____
is to be sent, with pin code : _____
: _____

(In case (a) & (b) above are not relevant, please mention N.A.)

If proposed examination center is NOT study center of IGNOU; the Examination Centre Suptd. will be the custodian of confidential material related to examinations. The University will send all the confidential to him at his official address mentioned in para 2 above.

5. Demand Draft/Cheque for advance and final payment for the expenditure incurred in conduct of examination will be drawn in favour of IGNOU in case proposed examination center is also study center of IGNOU.

If proposed examination center is **NOT** study center of IGNOU, Demand draft/Cheque for advance & final payment is to be drawn in favour of _____

6. Special requirement/proposal, if any: _____

7. If your centre was established examination centre during test examination of the University, the amount of advance and final payment sent to you by the University Rs. _____ (Advance Payment)
Rs. _____ (Final Payment)

- Number of answer books available in the Centre Main _____
Supplementary _____
- Number of answer books additional required in the Centre Main _____
Supplementary _____

8. I hereby declare that to the best of my knowledge none of my close relative is appearing at the Examination Centre for June, 2012 Term-end examination.

Signature: _____
Name: _____

Name of Coordinator of Study Centre with office stamp
(If proposed Exam Centre is study centre)

OR

Name of Exam Suptd. With office stamp:
(If proposed exam centre is NOT study centre of IGNOU)

Date: _____

(This proforma duly filled in is to be sent to Regional Centre concerned only)