



CONFIDENTIAL

INDIRA GANDHI NATIONAL OPEN UNIVERSITY
PROFORMA FOR ESTABLISHMENT OF EXAMINATION CENTRE FOR
TERM-END PRACTICAL EXAMINATION (BCA, MCA & CIT PROGRAMME)
JANUARY/ JULY 20.....

- STUDY CENTRE CODE NO : _____
 Name of the /PIC & Coordinator : _____
 & Official address with pin code : _____
 : _____
 : _____
 Telephone No. with STD Code : _____
 Mobile No. : _____
 E-mail ID : _____
 Fax No. : _____

- In case your center is established as Term End Practical 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 : _____

- Venue of examination Centre : _____
 With full mailing address : _____
 : _____
 Telephone no with STD Code : _____
 Fax No. : _____

- Programmes for which examination centre is being proposed (Please put (√))

MCA	
BCA	

- Number of P-IV computers which will be made available for the above practical examinations : _____
- Whether the Centre has the necessary software (MCA) as prescribed by the University _____
(Please enclose list)
- Whether networking available

Please give details of Power backup arrangement:

Signature of the PIC/Coordinator

Name of the PIC/Coordinator
Stamp of the Centre
Date:

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