INDIRA GANDHI NATIONAL OPEN UNIVERSITY

REMUNERATION BILL FOR GUIDANCE/EVALUATION OF PROJECT

1. Programme : ……
2. Name of Guide/Evaluator : ……
3. Designation :……
4. Official Address : ……
   ……
   ……
5. Residential address : ……
   ……
   ……
6. Telephone Nos. (O) …… (R) …… (M) ……
7. Purpose (Pleae tick) : Project Guidance [ ]
   Project Evaluation [ ]

S.No.	Course Code	Enrolment No.	Name of Student	Amount
			Total	

Certified that I have evaluated/guided the above students for their Project Work and the Project/Field Work Journal have been submitted to the Study Center _____ on _____

Date: Signature of Guide/Evaluator

Certified that the Project Work of above students have been sent to Student Evaluation Division vide letter No. …… dated ……..

Signature of Study Center Coordinator with seal

Date