

FILE COVER PAGE

ENROLLMENT NUMBER : _____

NAME OF STUDENT: _____

COURSE CODE: _____

INDIRA GANDHI NATIONAL OPEN UNIVERSITY

Regional Centre 49- Mumbai

Assignment Evaluation-(Assessmet Sheet)

Enrolment Number										Programme Code	
Course Code					Regional Centre Code	4	9	Study Centre Code	1632		

Name of Student			
Contact No.			
E-mail ID			
Signature of Student		Date of Submission	
Residential Address with Pin Code			

(FOR OFFICE USE ONLY)

	Max. Marks	Marks Obtained	Grade	Sign of Evaluator
Over All Grades				

Please Tick in the Relevant Box Only:

Excellent	Very Good	Good	Average
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(Student Acknowledgement of Assignment Submission)

Enrolment Number										Programme Code	
Course Code					Regional Centre Code	4	9	Study Centre Code	1632		

Name of Student			
Signature of Student		Date of Submission	

Study Centre Stamp