

INDIRA GANDHI NATIONAL OPEN UNIVERSITY

Course Registration Form for BAFPA III & IV Semesters – January/ July 20____ Session



Send this filled-in form
along with the fee to:

The Regional Director of
your Regional Centre

* as per schedule

Enrolment No.

StudyCentre Code

Regional Centre Code

1. Name of the Student (in capital letters): _____

2. Complete Address: _____

Details of fee paid: Draft is to be made in the name of IGNOU payable at the city of the Regional Centre.

a. Name of the Bank _____ Place _____

b. Bank Draft No. _____ Date _____

I hereby register for the following courses for III & IV Semesters **BAFPA** commencing **January/ July 20_____**.

Year	Semester	Discipline Specific Courses (DSE)	Minor	Ability Enhancement Courses (Language)	Inter-disciplinary Course (Introductory level) Skill Enhancement courses	Total Credits
II YEAR	3rd Sem	BPAC 103 BPAC 104	Choose any one except from your specialization areas BHIM 161 () BPSM 161 () BSOM 161 () BEGM 163 ()	BEGAE 182	None	20
	4th Sem	BPAC 105 BPAC 106	Choose any one except from your specialization areas BHIM 162 () BPSM 162 () BSOM 162 () BEGM 162 ()	None	Choose any one from the following BANS 183 () BCHS 183 () BCOS 183 () BEGS 183 () BPCS 183 () BSSS 183 ()	20

Date: _____

Signature of Student: _____

E-Mail ID: _____

Mobile/ Ph. No. _____