

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**RE-REGISTRATION FORM  
(MAGD/MADVS/MASS/MCOM/MSW)**

**January/July 20\_\_\_\_ Session**

**Registration Details**

1. Enrollment no.           2. Programme\_Code  3. OSC/PI\_Code
4. Name of the Student (in capital letters): \_\_\_\_\_
5. Complete Address: \_\_\_\_\_

**Details of Fee Remittance**

- 6.1 Bank Draft/TT No. \_\_\_\_\_ N/A \_\_\_\_\_ Dated \_\_\_\_\_ N/A \_\_\_\_\_ Amount (INR/USD) \_\_\_\_\_ N/A \_\_\_\_\_
- 6.2 Name of the Bank \_\_\_\_\_ N/A \_\_\_\_\_ Place \_\_\_\_\_ N/A \_\_\_\_\_

**Details of Courses**

I hereby register for the following courses for 2<sup>nd</sup> year \_\_\_\_\_ programme commencing January/July 20\_\_\_\_.

S.No	Programme (Tick)	Compulsory Courses	Elective Courses (to be opted by the student )	Total Credit																				
1.	MAGD <input type="checkbox"/>	MGSP 2 (4)	<p align="center"><b>Choose any 8 courses only</b></p> <table border="0"> <tr> <td>MGSE 1</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MGSE 7</td> </tr> <tr> <td>MGSE 2</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MGSE 9</td> </tr> <tr> <td>MGSE 3</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MGSE 10</td> </tr> <tr> <td>MGSE 4</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MGSE 13</td> </tr> <tr> <td>MGSE 6</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MGSE 20</td> </tr> </table>	MGSE 1	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 7	MGSE 2	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 9	MGSE 3	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 10	MGSE 4	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 13	MGSE 6	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 20	36
MGSE 1	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 7																					
MGSE 2	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 9																					
MGSE 3	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 10																					
MGSE 4	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 13																					
MGSE 6	<input type="checkbox"/>	<input type="checkbox"/>	MGSE 20																					
2.	MADVS <input type="checkbox"/>	-----	<p align="center"><b>Choose any 36 Credits</b></p> <table border="0"> <tr> <td>MDV 105</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MDV 115</td> </tr> <tr> <td>MDV 108</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MEDS 41</td> </tr> <tr> <td>MDV 110</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MEDS 42</td> </tr> <tr> <td>MDV 111</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>MDVP117</td> </tr> </table>	MDV 105	<input type="checkbox"/>	<input type="checkbox"/>	MDV 115	MDV 108	<input type="checkbox"/>	<input type="checkbox"/>	MEDS 41	MDV 110	<input type="checkbox"/>	<input type="checkbox"/>	MEDS 42	MDV 111	<input type="checkbox"/>	<input type="checkbox"/>	MDVP117	36				
MDV 105	<input type="checkbox"/>	<input type="checkbox"/>	MDV 115																					
MDV 108	<input type="checkbox"/>	<input type="checkbox"/>	MEDS 41																					
MDV 110	<input type="checkbox"/>	<input type="checkbox"/>	MEDS 42																					
MDV 111	<input type="checkbox"/>	<input type="checkbox"/>	MDVP117																					
3.	MASS <input type="checkbox"/>	MEV 25, MSD 21, MSD 22, MEDS 51, MSD 23, MEDS 44, MSDP 18	-----	36																				
4.	MCOM <input type="checkbox"/>	MCO-03, MCO-07, IBO-02, MCO-015, IBO-01, IBO-06, MCOP 001	-----	40																				
5.	MSW <input type="checkbox"/>	MSW7, MSW8, MSW 9, MSW 17, MSWL 15, MSWL16	<p align="center"><b>Choose any one from the following</b></p> <p>MSWE 1 ( ), MSWE 2 ( ), MSWE 7 ( ), MSWE 3 ( ), MSWP 1 ( )</p>	36																				

Yours faithfully,

Date: \_\_\_\_\_

Signature of student \_\_\_\_\_

E-Mail ID \_\_\_\_\_

Mobile/ Ph. No. \_\_\_\_\_