



INDIRA GANDHI NATIONAL OPEN UNIVERSITY
CHANGE/CORRECTION OF ADDRESS/STUDY CENTRE

All correspondence to be sent at the following address and change of Study Centre be recorded.

Enrolment Number

Date of Change effective from

Write in BLOCK LETTERS only

Name: Shri/Smt./Km.

New Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Medium of Study

Programme of Study

New Study Centre Code

 (See Appendix-2)

Town	<input type="text"/>										
State	<input type="text"/>		Pin	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>											

State Code (See Appendix-4)

Signature _____

Date _____

The filled-up form should be mailed to :

The Regional Director concerned who will forward the request after verifying the student's signature to SR&E Division, IGNOU, Maidan Garhi, New Delhi-110068.

(You are advised to use the photocopy of this proforma)