

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY**

**Regional Services Division**

**Maidan Garhi, New Delhi – 110068**

Dated:

PROFORMA FOR ACTIVATION OF AN ADDITIONAL PROGRAMME  
AT AN EXISTING STUDY CENTRE

(PLEASE USE SEPARATE PROFORMA FOR EACH PROGRAMME)

1.a) Regional Centre : \_\_\_\_\_

b) Regional Centre Code No. : \_\_\_\_\_

2. a.) Name of the Study Centre : \_\_\_\_\_

b.) Code No. of the Study Centre: \_\_\_\_\_

3. Programme to be activated : \_\_\_\_\_

**( Please fill the name of only one Programme in the space provided in item 3)**

4. a) Programmes being currently offered at the Study Centre :

\_\_\_\_\_

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b) Programme-wise strength of the existing students enrolled at the Study

Centre : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c) Details of No. of approved Academic Counselors for each Programme :

\_\_\_\_\_

\_\_\_\_\_

5. Infrastructure available for the Programme proposed for activation

a. No. of rooms available for Counselling : \_\_\_\_\_

b. No. of computers available (for computer Programmes and  
Computer-related courses) : .....

( Please enclose detailed list of software, hardware and PHOTOCOPY of licenses )

c. Laboratory facilities available for Science, Agriculture, & Engineering- based  
Programmes i.e. Infrastructure and Apparatus: ( Please enclose detailed list of  
infrastructure and apparatus )

d. Library facilities : \_\_\_\_\_

( List of reference books available in the subject –area for which activation is  
sought )

6. a. No. of prospective students for the Programme to be activated

(Approximate no. may be given) : \_\_\_\_\_

( **This entry is important for the Activation of the programme sought** )

b) Total no. of qualified approved Academic Counsellors available for the  
Programme to be activated : \_\_\_\_\_

c) No. of bio-data enclosed for recommendation as Prospective Counselors  
for counseling with qualification and experience : \_\_\_\_\_

d. Recommendation sheet enclosed with course codes in the relevant  
column of prospective Academic Counsellors : ( YES/NO)

7. Session from which Programme is to be activated

(Please specify as Jan. 20.....(Yr.)/July.20..... (Yr.)

8. Rationale behind seeking the activation:

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Place:

Date:

(Signature of Coordinator )

( With Stamp )

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**To be handled at the Regional Centre:**

Enrolment in the region in the Programme proposed in the preceding 2 Years:

**Recommendation of the Regional Director:**

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Place:

(Signature of the Regional Director)

With Stamp

Date:

**Please Note:**

1. Please enclose the details of qualifications and relevant certificates also along with the bio-data in case of bio-data pertaining to SOSS AND SOCIS as these Schools demand the same while considering the bio-data.

2. Please do enclose the relevant LICENSE CERTIFICATES and details of HARDWARE in case of programmes offered by **SOCIS** / LABORATORY APPARATUS & EQUIPMENT DETAILS in case of Science & Technology based programmes of **SOA, SOCE (M.Sc. < DFSM >), SOS, SOET, & SOSS (BLIS/MLIS)** / INFRASTRUCTURE DETAILS in case of programmes offered by **SOHS** (wherever applicable) and DOCUMENTS like **NCTE** approval in case of teacher-training based programmes of **SOE**.