Option form for selecting Digital/Soft copy to Printed Study Material

			Date:
То			
The Registrar, Student Registration Division (SRD IGNOU, Block-3, Maidan Garhi, New Delhi – 110068)),		
I would like to request you to kindl Study Material. I am also paying the below:		•	
Student Name		:	
Programme Name		:	
Programme Code		:	
Enrolment No			
Session & Year of Admission: (Janu	uary/July)		
Demand Draft No. :		Date	:
Amount :		Bank Name	
For office Use only			(Signature)
Discount Given:	Student Nan	ne:	
Amount Paid:	Address	:	
Details verified and found correct			
Dealing Assistant:	Mobile No.	:	
	E-Mail ID		

AD/ DD (SRD) Registrar (SRD) Registrar (MPDD)