



# INDIRA GANDHI NATIONAL OPEN UNIVERSITY

MAIDAN GARHI, NEW DELHI-110 068

APPLICATION FORM FOR OPENMAT - XXXII, XXXIII, XXXIV, ENTRANCE TEST

FORM NO. 1

FORM NO.:

Control Number box

CONTROL NUMBER:

Control Number input box

### INSTRUCTIONS

1. Please read the instructions in the information brochure before filling up this form.
2. Use BLACK BALL POINT PEN in boxes using English capital letters or English numerals.
3. Do not make any stray marks on this sheet.
4. Do not staple, pin, wrinkle scribble, tear or wet this sheet.
5. Write in CAPITAL LETTERS only within the box without touching the lines as shown in the Sample below.

Alphabetical key: 0 1 2 3 4 5 6 7 8 9 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

1. Regional Centre Code	2. Exam Centre Code	3. State Code	4. Category (Write the relevant code in the box)	A1 - GEN B2 - SC D4A - Creamy Layer D4B - NonCreamy Layer	C3 - ST D4 - OBC
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5. Nationality (Write the relevant code in the box) A1 - Indian B2 - Others	6. Sex (Write the relevant code in the box) A1 - Male B2 - Female	7. Marital Status (Write the relevant code in the box) A1 - Married B2 - Unmarried	8. Whether Minority: (Write the relevant code in the box) A1 Yes B2 No	9. Religion (Write the relevant code in the box) A1 Hindu B2 Muslim C3 Christian D4 Sikh E5 Jain F6 Buddhist G7 Parsi H8 Jews I9 Others
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10. Date of Birth Date / Month / Year	11. Social Status (Write the relevant code in the box) A1 Ex-service man B2 War widow C3 Not applicable	12. Whether Kashmiri Migrant (Write the relevant code in the box) A1 Yes B2 No
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13. Territory A1 - URBAN B2 - RURAL C3 - TRIBAL	14. Employment Status A1 - Employed B2 - Unemployed C3 - IGNOU Regular Employee D4 - KVS Employee	15.a. Whether Physically Handicapped: A1 - Yes B2 - No	15.b. If physically handicapped (nature of disability) A1 Hearing Impairment B2 Locomotor Impairment C3 Visual Impairment D4 Reading Disability E5 Any other, Please specify
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16.a. Are you registered with IGNOU (Write the relevant code in the box) A1 Yes B2 No	16.b. If yes, write the Enrol. No. & Programme Code in the boxes below : Enrolment No. Programme Code
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17. Details of Scholarship being received if any (a) Annual Scholarship Amount	(b) Dept. Offering Scholarship (Write the relevant code in the box) A1 Govt. Deptt. B2 Other	(c) Family income (yearly)
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← Fold from here →

18. Name of the Candidate

19. Name of Father/Mother/Husband (strike out whichever not applicable)

20. (a) Educational Qualifications (Which makes you eligible for the programme)

Qualification Code	Year of Passing	Percentage of marks
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20. (b) Stream: (Cross (X) any one of the Appropriate Box only)

NON-GRADUATE (10+2 or its equivalent)	Science	Arts	Commerce	Engineering	Others
GRADUATE					
POST GRADUATE					

21. Write Name & Complete Mailing Address (In BLACK BALL Point Pen only)

Name :

Address:

PIN CODE :

22. For Office Use  
Enrollment No.:

23. Candidate's Signature

24. Photograph

Affix your latest passport size photograph (4 cm x 5 cm) duly attested by Gazetted Officer

25. Working Experience

Duration	Years	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>	Months.	<input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
Employed in (Cross (X) any one of the Appropriate Box only)				
Govt./Public Sector		<input type="checkbox"/>	Semi Govt.	<input type="checkbox"/>
Pvt. Sector		<input type="checkbox"/>	Self Employed	
Annual Income (Cross (X) any one of the Appropriate Box only)				
Upto ₹ 50,000/-		<input type="checkbox"/>	₹ 50,000 to 1 lac	<input type="checkbox"/>
₹ 1.5 lac to 2 lac		<input type="checkbox"/>	Above ₹ 2 lacs	
		<input type="checkbox"/>	<input type="checkbox"/>	

26. Address for Correspondence

(Do not give Post Box No. address. Leave a blank box between each unit of address like House No., Street Name, P.O., etc.)

City															District														
State															Pin Code														

27. Telephone Number (If any) with STD Code/Mobile No.

STD Code		Telephone No.	

28. Fax No. (If any) with STD Code

STD Code		Telephone No.	

29. E-mail address/ID (If any)

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**DECLARATION BY APPLICANT**

I hereby declare that I have read and understood the conditions of eligibility for the programme for which I seek admission. I fulfil the minimum eligibility criteria and have provided necessary information in this regard. In the event of any information being found incorrect or misleading, my candidature shall be liable to cancellation by the University at any time and I shall not be entitled to refund of any fee paid by me to the University

I have carefully studied the rules of the University as printed in the Prospectus and I accept them and shall not raise any dispute in future over the same rules.

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

(Signature of the Applicant)

**INSTRUCTIONS FOR CANDIDATES**

1. Please send your Application form by Registered/Speed Post to the following Address :  
Registrar  
Student Evaluation Division  
IGNOU, MAIDAN GARHI, NEW DELHI - 110068
2. Last date for receipt of filled in application form for XXXII OPENMAT is 15<sup>th</sup> July, 2012, for OPENMAT - XXXIII is 15<sup>th</sup> December, 2012, and OPENMAT XXXIV is 15<sup>th</sup> July, 2013.
3. Application form received after the due date will not be accepted.
4. Please retain photo copy of the filled application form for future reference.
5. For Detailed instructions please refer Students Handbook & Prospectus.
6. No documents are to be attached with this application form.