



इग्नू
जन-जन का
विश्वविद्यालय

इन्दिरा गांधी राष्ट्रीय मुक्त विश्वविद्यालय
INDIRA GANDHI NATIONAL OPEN UNIVERSITY
क्षेत्रीय केन्द्र - राजकोट, REGIONAL CENTRE - RAJKOT



ignou
THE PEOPLE'S
UNIVERSITY

Assessment Sheet

Enrolment No. _____ Programme _____ Assessment
Student's Name _____ Course _____ Grade/Marks
Study Centre Code No. _____ Assignment No. _____ Max. Marks

Evaluator's Comments

(If this space is not sufficient, please use back page)

Please tick in the relevant box below

CONTENT		STRUCTURE & PRESENTATION	
Accurate Information	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Inaccurate Information	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Adequate Coverage Good	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Inadequate Coverage Poor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Conceptual Analysis Good	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Conceptual Analysis Poor	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Well Planned	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Concise	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Clearly Expressed	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Inadequately Planned	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Too long or too short	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		Not Clearly Expressed	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Evaluator's Signature _____

Moderator's Comments, if any

Date _____

Name in full _____

Evaluator's Code No. _____

Address _____

Signature of the Moderator _____

Name in full _____



INDIRA GANDHI NATIONAL OPEN UNIVERSITY

TMA Acknowledgment Slip

The Receipt of following Tutor Marked Assignment(s) is acknowledged.

Sr. No.	Course Code	Assignment Number & Details	Sr. No.	Course Code	Assignment Number & Details
1			6		
2			7		
3			8		
4			9		
5			10		

(Note: Retain Xerox copy of full TMAS. Personally collect the evaluated TMAs, Before the Term End Exam – December/June (or) within 2-3 months From the date of submission of TMA)

Enrollment No.

Programme of Study

Study Centre Code

Name of Student

E Mail ID

Mobile NO.

Date of Submission

Study Centre Stamp with Date

Signature of Receiver with Date