



ignou
THE PEOPLE'S
UNIVERSITY

INDIRA GANDHI NATIONAL OPEN UNIVERSITY

VOUCHER NO.

Study Centre :

Month _____ Year: _____

Name of the Counsellor _____ Approval No. _____ Date _____ Programme/Course _____ Theory/Practical

Date	Time		Brief description of time spent		Amt. of Counselling Charge	Conveyance Charges	Total (Rs.)	Acquaintance (Signature) of the Academic Counsellor
	From	To	Discussion	Counselling				
1	2a	2b	3a	3b	4	5	6	7
Grand Total								

- a) Certified that the amount has not been claimed and drawn previously.
- b) Certified that the counselling was conducted according to the monthly counselling schedule.
- c) Certified that the counselling has been done by the counsellor approved for the programme/course by the University
- d) Certified that the amount shall be declared as Income for income tax purposes.

(Signature of the Counsellor)

No of learners enrolled for the course

No of learners attended counselling session(s): Session 1....., Session 2....., Session 3....., Session 4.....

Passed for payment for Rs. _____ (Rupees _____)

Note : This format must be accompanied with Learners' Attendance Sheet arranged in chronological order

Signature & Stamp of Coordinator/PIC