## F.No. NIHFW/WILL/HFWMgmt./03/2014-15

28<sup>th</sup> September 2015

Sub: Willingness to complete the Diploma in Health & Family Welfare Management through Distance Learning with the current session 2015-16.

Dear Candidate,

You were enrolled for the said course in the year 2012-13/2013-14/2014-15 & as per our records, *you have not completed the course till date.* If you want to complete the course with the current session, then for appearing in the final examination 2016 you have to attend both the Contact Programmes, submit all the Assignments and Project Report within stipulated dates for the current batch. Kindly fill up the details in the attached prescribed proforma about your status in terms of Contact Programmes, submission of all the Assignments and Project Report and above all your willingness to appear in Final Examination 2016.

If you wish to appear in the examination this year then you are requested to send us the *dully filled Willingness Form* enclosed along with a Demand Draft of Rs.500/- (Rupees Five hundred only) in favour of "Director, NIHFW" payable at "New Delhi" as Continuation Fees. The same should reach the Institute latest by 30<sup>th</sup> November 2015.

Yours sincerely,

( Utsuk Datta ) Dean of Studies

Encl: As above

N.B.: Please quote your Enrolment Number while corresponding with the Institute in future.

## **WILLINGNESS FORM (SESSION 2015-16)**

(ONLY FOR BATCHES 2012-13, 2013-14 & 2014-15)

Sub: Willingness to appear in the final examination of Diploma in Health & Family Welfare Management through Distance Learning with current session 2015-16.

Sir,

		FW, New Delhi payable at Nev	
Enrolment No. :	PGC/_	/20 Demand Draft N	No Date
Name : ( <i>In Capital Letters</i> ) Current Mailing: Address			
In Capital Letters)	City_	Pin Code	State
Phone No. :		Mobile No	
E-mail :			
1. Attended Contact P	rogramr	nes	
Contact Programme –	I:	No/Yes (centre's name)	Dates
Contact Programme –	II:	No/Yes (centre's name)	Dates
2. Assignments sent:		Assignment – I Assignment – II	Date
3. Project Report subn	nitted:	No/Yes	Date
-			conditions, you are not eligible for t
examination with the	current	batch.	
			(Signature with date)
Please mail this page t	0:		
Distance Learr Room No.417	ning Cell		

(Please mention your enrolment number on the envelope)

National Institute of Health & Family Welfare

Baba Gangnath Marg, Munirka, NEW DELHI-110067