



**SCHOOL OF COMPUTER AND INFORMATION SCIENCES  
IGNOU, MAIDAN GARHI, NEW DELHI – 110 068**

**II. PROFORMA FOR THE APPROVAL OF MCA PROJECT PROPOSAL (MCSP-060)**

*(Note: All entries of the proforma of approval should be filled up with appropriate and complete information.  
Incomplete proforma of approval in any respect will be summarily rejected.)*

**Project Proposal No :.....**  
*(for office use only)*

**Enrolment No.:** .....  
**Study Centre:** .....  
**Regional Centre:..... RC Code:.....**  
**E-mail:** .....  
**Mobile/Tel No.:** .....

1. Name and Address of the Student: .....

2. Title of the Project\*\*\*: .....

3. Name and Address of the Guide: .....

4. Educational Qualification of the Guide: .....  
(Attach bio-data also)

Ph.D*	M.Tech.*	B.E*/B.Tech.*	MCA	M.Sc.*
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**(\*in Computer Science / IT only)**

5. Working / Teaching experience of the Guide\*\* :.....

*(\*\*Note: At any given point of time, a guide should not provide guidance for more than 5 MCA students of IGNOU)*

6. Software used in the Project\*\*\*:.....  
(\*\*\* Please refer to section VIII of these guidelines)

7. If already pursued BCA/BIT from IGNOU, mention the title of the project (CS-76) and the s/w used:.....

8. Project title of the Mini Project (MCS-044) and the s/w used:.....

9. Is this your first submission? ☐ Yes ☐ No

Signature of the Student  
Date: .....

Signature of the Guide  
Date: .....

**For Office Use Only**

Name:.....

☐
☐

Approved      Not Approved

.....  
Signature, Designation, Stamp of the  
Project Proposal Evaluator  
Date: .....

**Suggestions for reformulating the Project:**

**FOR USE IN THE EXAMINATION BRANCH**

Regional Director/Registrar (SED)

Verified by Dealing Asstt.

**FOR USE IN FINANCE BRANCH**

Passed for payment of Rupees

\_\_\_\_\_

Debit Head : Examination

\_\_\_\_\_

: Contingent

\_\_\_\_\_

: T.A.

\_\_\_\_\_

Dated : \_\_\_\_\_

Section Officer / A.R. (Accounts)

Dealing Asstt.

\_\_\_\_\_

Paid by Cheque No. \_\_\_\_\_

Dated \_\_\_\_\_

Assistant Registrar

## XI. CERTIFICATE OF ORIGINALITY

This is to certify that the project report entitled \_\_\_\_\_ submitted to **Indira Gandhi National Open University** in partial fulfilment of the requirement for the award of the degree of **MASTER OF COMPUTER APPLICATIONS ( MCA )**, is an authentic and original work carried out by Mr. / Ms. \_\_\_\_\_ with enrolment no. \_\_\_\_\_ under my guidance.

The matter embodied in this project is genuine work done by the student and has not been submitted whether to this University or to any other University / Institute for the fulfilment of the requirements of any course of study.

.....  
Signature of the Student:

Date: .....

Name and Address  
of the student

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Enrolment No.....

.....  
Signature of the Guide

Date: .....

Name, Designation  
and Address of the  
Guide:

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