

F.No. NIHFW/WILL/PGC/01/2019

27th November, 2019

Sub: Willingness to complete the Diploma in Health & Family Welfare Management through Distance Learning for examination 2020.

Dear Candidate,

You were enrolled for the said course in the year 2016-17 & 2017-18 as per our records; ***you have not completed the course till date.*** If you want to complete the course, and to appear in the final examination 2020 provided as last opportunity you have to attend both the Contact Programmes, submit all the Assignments and Project Report within stipulated dates. 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 2020.

If you wish to appear in the examination this year at NIHFW 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) drawn in favour of "Director, NIHFW" payable at "New Delhi" as Continuation Fees. The same should reach the Institute latest by 15th January 2020.

Yours sincerely,

(Neera Dhar)
Nodal Officer

Encl: As above

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

WILLINGNESS FORM

(ONLY FOR BATCHES 2016-17 & 2017-18)

Sub: Willingness to appear in 2020 final examination of Diploma in Health & Family Welfare Management through Distance Learning.

Sir,

I intend to appear in the examination for the Diploma in Health & Family Welfare Management. I am enclosing a Demand Draft of Rs.500/- as Continuation Fees in favour of Director, NIHF, New Delhi payable at New Delhi.

Enrolment No. : PGC/____/20____ Demand Draft No. _____ Date _____

Name : Dr./Mrs./Ms./Mr. _____
(In Capital Letters) _____

Current Mailing: _____
Address _____

(In Capital Letters) City _____ Pin Code _____ State _____

Phone No. : _____ Mobile No. _____

E-mail : _____

1. Attended Contact Programmes

Contact Programme – I: No/Yes (centre's name) _____ Dates _____

Contact Programme – II: No/Yes (centre's name) _____ Dates _____

2. Assignments submitted: Assignment – I Date _____
Assignment – II Date _____

3. Project Report submitted: No/Yes Date _____

In case you do not fulfil the above mentioned 3 conditions, you are not eligible to appear in the final examination to be held during year 2020.

(Signature with date)

Please post this page to :

Distance Learning Cell
Room No.417
The National Institute of Health & Family Welfare
Baba Gangnath Marg, Munirka, NEW DELHI-110067

(Please mention your enrolment number on the envelope)