**INSTITUTE OF HOTEL MANAGEMENT AND CATERING TECHNOLOGY**

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| **Photo** |

**KOVALAM, THIRUVANTHAPURAM ,KERALA- 695527**

**Application Form for DIPLOMA IN FOOD PRODUCTION2018 - 2019**

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|   | OFFICE USE :-> |  ENROLMENT NO: |
| PERSONAL  | STUDENT NAME |  |
|  | GENDER |  MALE / FEMALE  |
|  | AGE & DATE OF BIRTH  |  |
|  | CATEGORY | GENERAL /OBC / SC / ST / DA  |
|  | RELIGION & CASTE  |  |
|  | EMAIL ID |  |
|  | STUDENT MOBILE NO |  |
|  | BLOOD GROUP |  |
|  | DOMICILE STATE |  |
|  | NATIONALITY |  |
|  | AADHAR NUMBER |  |
| ACADEMIC | QUALIFICATION |  |
|  | BOARD  |  |
|  | MARKS  | English  | Subject 2 | Subject 3 | Subject 4 | Subject 5 | Subject 6 |
|  |  |  |  |  |  |  |  |
|  |  | TOTAL MARKS OBTAINED | TOTAL MAXIMUM MARKS |
|  |  |  |  |
| PARENTAL  | FATHER NAME  |  |
|  | MOTHER NAME  |  |
|  | PARENT MOBILE NO: |  |
|  | ANNUAL INCOME  |  |
|  | PARENT EMAIL ID |  |
| ADDRESS | HOUSE NO:/ NAME  |  |
|  | STREET |  |
|  | POST OFFICE |  |
|  | VILLAGE / CITY NAME |  |
|  | DISTRICT / |  |
|  | STATE & PINCODE |  |
| FEES  | APPLICATION FEE Rs.250/- (Rs.125/ for SC/ST) to be paid into >  | Account Number : 1620800709Institute of Hotel Management and Catering Technology Central Bank of India , IFSC: CBIN0284160, IHMCT BRANCH  |
|  | Payment Details :  | Date of Payment : Amount : Bank Name : Branch : Name of Payee :  |

Certified that the information furnished above is true to the best of my knowledge.

**Signature of the Parent Signature of the student**

Documents to be submitted : 1. Copy of Plus Two Mark Sheet. 2. Age Proof 3. Caste Certificate.