National Council for Hotel Management & Catering Technology A-34, SECTOR 62, NOIDA 201309

SEM-VI SUPPLEMENTARY EXAMINATION FORM

Academic Year 2022-2023

COURSE TITLE: THREE-YEAR B.Sc. IN H&HA

(FOR FAIL & RE-APPEAR CANDIDATES ONLY)

LAST DATE FOR SUBMISSION OF EXAM FORMS IN THE INSTITUTE - 12.07.2023

ONE-TIME FEE: **Rs.1000/-** (to be remitted to NCHM) plus **EXAM FEE** as per column 6 below

Paste Passport Size Photograph.

(Do not staple)

(Photograph to be attested by Principal)

Cou	incil Roll No	Na	Name of the Institute						Principal)		
								<u>L</u>			
1.	Name of the ca	andidate in Eng	glish (full na	ame in l	BLOC	K lett	ers)				
First name			Middle name					Surname			
(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)											
2.	Father's / Mother's Name										
3.	Permanent residential address for correspondence										
			Din					•			
		Pin: Mobile:					• —				
	Email id:										
4.	Date of Birth	(by Christian en	ra)			5. Se	x: Ma	ıle/F	emale		
6.	Give details o	of subject(s) rea	ppearing fo	r:							

Sl Subject Subject Please tick No. Code Practical Mid End-Term Term BHM351 ADVANCE FP OPERATIONS -II 1 2 **BHM352** ADVANCE F & B OPERATIONS -II

FRONT OFFICE MANAGEMENT-II 3 BHM353 4 **BHM354** ACCOMMODATION MANAGEMENT-II **BHM305** FOOD & BEVERAGE MANAGEMENT 5 **FACILITY PLANNING BHM306** 6 RESEARCH PROJECT 7 **BHM309** X X

RE-APPEAR EXAMINATION FEE

- Theory @ Rs.300/- per subject (To be remitted to NCHMCT)
- Practical @ Rs.500/- per subject (retained by institute)

7.	Give details of examination and related fees		tion and related fees paid:	Examination Fee Total Fee						
8.	a) Certified that the name as written above by me is correct.									
	b)	b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.								
	c) Certified that I have read and understood the Examination Rules of the National Council.									
	Date:			(Signature of the candidate)						
		C	ERTIFICATE BY PRINC	IPAL						
1.	Certif	ied that admission	to the semester was grante	d as per NCHM&CT Rules.						
2.	Certified that Mr./Ms is/was a bonafide full time student of this institution and has satisfactorily completed the prescribed course of studies as laid down by the Council.									
3.	Certified that Examination Rules have been explained to the candidate and undertaking obtained for having understood the same.									
4.	Certified that Admit Card for the Examination will be issued to the candidate only after satisfying that he/she fulfils the attendance requirements as laid down in Examination Rules of National Council for Hotel Management.									
5.	Certified that the following fee of the candidate is included in the amount of Rs remitted to the Council through RTGS vide UTR/IMP No dated in favour of National Counc for Hotel Management & Catering Technology (mandate form attached).									
	Exami Total		ds							
Date:			Princi	pal's signature with office seal						
			FOR NCHM&CT USI	Ξ						
Fee received Exam Fee: Rs Total Fee Rs			Examination particulars Checked & Verified	Examination Hall Admission ticket issued.						
		Dealing Assistant	Executive Officer (S)	Assistant Director (T)						