**INSTITUTE OF HOTEL MANAGEMENT AND CATERING TECHNOLOGY**

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| **Photo** |

**KOVALAM, THIRUVANTHAPURAM, KERALA- 695527**

[**administration@ihmctkovalam.org**](mailto:administration@ihmctkovalam.org) **Ph: 0471-2480283**

**Application Form for DIPLOMA IN FOOD PRODUCTION (Batch 2020-21)**

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| STUDENT NAME |  |
| GENDER | MALE / FEMALE |
| AGE : 25 years for OBC and 28 years for SC/ST(AS ON 01.07.2020) |  |
| DATE OF BIRTH |  |
| CATEGORY | OBC / SC / ST / DIFFERENTLY ABLED |
| STUDENT EMAIL ID |  |
| STUDENT MOBILE NO |  |
| BOARD | STATE/CBSE/OPEN SCHOOL/VHSE |
| PLUS TWO/HSE PASSED | YES / NO |
| TOTAL MARKS OBTAINED |  |
| TOTAL MAXIMUM MARKS |  |
| FATHER/MOTHER NAME |  |
| HOUSE NO:/ NAME |  |
| STREET |  |
| POST OFFICE |  |
| DISTRICT |  |
| STATE& PINCODE |  |
| Account Holder: Institute of Hotel Management and Catering Technology  Account Number : 1620800709  Bank : Central Bank of India ,  Branch : Kovalam  IFSC : CBIN0280939, | APPLICATION FEE Rs.250/-(Rs. 125/- for SC/ST) |
| Date of Payment :  Amount :  Bank Name:  Branch :  Name of Payee: |

Documents to be submitted:-

1) Copy of the plus 2 Mark sheet 2) Age Proof 3) Caste certificate

4) Demand Draft in original

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

DATE: Signature of the Parent Signature of the student