होटल प्रबंध खानपान प्रौद्योगिकी एवं पोषण आहार संस्थान

1100 आवास गृह, भोपाल-462016

क्रं.हो.प्र.सं. / प्रशि. / 25 / 350

दिनांक २१०।2025

आदेश

EVEN SEMESTER RE-APPEAR EXAMINATION FORM SUBMISSION SCHEDULE FOR RE-APPEAR & FAIL STUDENTS.

(FOR END TERM EXAMINATION APRIL/MAY 2025)

S. No.	Examination Form	Late Fee	Form & Fee Submission Last Date	Tentative Exam Schedule	
		Without Late Fee	24.02.2025		
1	M.Sc.(HA) 4 th Semester	Rs. 500/-	11.03.2025	25.04.2025	
		Rs. 1000/-	25.03.2025		
	n o days cho	Without Late Fee	14.02.2025	16.04.2025 +	
2	B.Sc.(HHA) 6 th Semester	Rs. 500/-	28.02.2025	16.04.2025 to 25.04.2025	
	B.Sc.(HHA) 4 th Semester	Rs. 1000/-	17.03.2025	23.04.2023	
	M.Sc.(HA) 2 nd Semester (JNU/IGNOU)	Without Late Fee	17.03.2025	13.05.2025 to	
3	B.Sc.(HHA) 2 nd Semester (JNU/IGNOU)	Rs. 500/-	01.04.2025	21.05.2025	
	CCFPP 2 nd Semester	Rs. 1000/-	16.04.2025	21.03.2023	
4	B.Sc.(HHA) 5 th Semester Supplementary Examination Form	With One Time Fee Rs. 1000/-	25.04.2025	26.05.2025 to 02.06.2025	

End Term Exam Fee: -

- Rs. 300/- per subject (Theory)
- Rs. 500/- per subject (Practical)
- Rs. 500/- for Change of Examination Centre (for Passed out students only)

संबंधित छात्रों को निर्देशित किया जाता है कि जो छात्र अपना re-appear subject का परीक्षा फॉर्म भरना चाहते है, वह संस्था में स्वयं उपस्थित हो कर अपना परीक्षा फॉर्म जमा करें। या

Institute website: www.ihmbhopal.ac.in पर उपलब्ध HDFC Bank के शुल्क भुगतान लिंक के माध्यम से शुल्क का भुगतान कर शुल्क रसीद एवं परीक्षा फॉर्म फोटो सहित email ID: training@ihmbhopal.ac.in पर Scan कर उक्त वर्णित तिथि के अंदर भेजें।

(डॉ. रोहित सरीन) प्राचार्य ^औ दिनांक १९०० | 2025

क्रं.हो.प्र.सं. / प्रशि. / 25 / 350 01 +0 350 04

प्रतिलिपि सूचनार्थः -

1. श्रीमती आशा कोलेकर, विभाग प्रमुख, हो.प्र.सं. भोपाल।

2. श्री सुजीत कपूर, वरिष्ठ व्याख्याता (अकादिमक प्रभारी), हो.प्र.सं. भोपाल।

3. लेखा विभाग, हो.प्र.सं. भोपाल।

सभी संबंधित छात्रों को सूचनार्थ (सूचना पटल / वेबसाइट)

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: TWO-YEAR M.Sc. HA – SEMESTER-IV (RE-APPEAR CANDIDATES OF IGNOU-NCHMCT ONLY)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE	Paste Passport
Without late fee : 24/02/2025	Size Photograph.
With late fee of Rs. 500/- : 11/03/2025	(Do not staple)
With late fee of Rs. 1000/- : 25/03/2025	
	(Photograph to be
Council Roll No Institute Name	attested by Principal)
	- Timelpan
1. Name of the candidate in English (full name in BLOCK letters)	
First name Middle name	Surname
(Please note that the name written above should be same as given in your +2 CB	SE/Board Certificate)
2. Student's Mobile No.	
3. Student's Email id :	
4. Father's / Mother's Name	
5. Permanent residential address for correspondence	
Pin: Alternate/Landline	No.
6. Date of Birth (by Christian era)7. Sex: M	
8. Give details of subject(s) reappearing for:	
S.No. Subject Subject	Please tick
Code	End Term
1 MHA-17 Production & Operation Management	
2 MHA-21 Mentorship & Research Project - (Dissertation	n)
REAPPEAR EXAMINATION FEE	
- Theory @ Rs.300/- per subject (Forwarded to NCHM)	

9.	Give details of exa	mination and related fee	Late Fee	ion Feeíf any)					
10.	b) I hereby de	at the name as written a eclare that the statements wledge and belief.	<u> </u>	ect. ation are true to the best					
	c) Certified (inderstood the Ex	amination Rules of the					
	Date:		(Signature of the	e candidate)					
		CERTIFICATE BY	PRINCIPAL						
1.	Certified that admi	ssion to the semester wa	as granted as per NO	CHM&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.		camination Rules have ed for having understoo	-	to the candidate and					
4.	after satisfying th		attendance require	ed to the candidate only ments as laid down in t.					
5.	Rs	remitted to the	ne Council through	aded in the amount of RTGS vide UTR/IMPS vour of National Council attached).					
	Examination Fee Late Fee (if any) Total Fee	Rs Rs							
Date:			Principal's signat	ure with office seal					
		FOR NCHM&	CT USE	_					
1.Exa	ceived m Fee: Rs Fee: Rs Fee Rs			Examination Hall mission ticket issued.					
	Dealing Assi	stant Executive (Officer (S)	Assistant Director (T)					

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: TWO-YEAR M.Sc. HA—SEMESTER-II (RE-APPEAR CANDIDATES OF IGNOU-NCHMCT ONLY)

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ncil Roll	No	Institute	e Name			Principal)		
Name	of the candi	idate in Englisi	h (full na	me in BLOC	CK letters)			
First name			Middle na	nme		Surname		
(Please no	ote that the nan	ne written above s	should be s	ame as given i	n your +2 CBS	E/Board Certificate)		
Stude	ent's Mobile	No.						
Stude	ent's Email i	d :						
гаше	er s / Mother	's Name						
Perm	anent reside	ntial address fo	or corresp	oondence				
Perma	anent reside	ntial address fo	or corresp	oondence Alterna	te/Landline	No		
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Perma ————————————————————————————————————	of Birth (by details of su	ntial address forPin:Pin:	or corresp	oondence Alterna	te/Landline	No		
Perma Date Give	of Birth (by	Pin:	earing for	oondence Alterna :: ubject	te/Landline	Noale/Female		
Perma Date Give	of Birth (by details of su	ntial address forPin:Pin:	earing for	oondence Alterna :: ubject	te/Landline	No		
Date Give	of Birth (by details of su Subject Code	Pin:	earing for	Alterna :: ubject agement	te/Landline l _7. Sex: Ma	No		
Date Give S.No.	of Birth (by details of su Subject Code MHA-5	Pin: Christian era) bject(s) reappe	earing for Sield Man & Materia	oondence Alterna :: ubject agement	te/Landline landline	No		
Date Give S.No.	of Birth (by details of su Subject Code MHA-5 MHA-7	Pin: Christian era) bject(s) reappe Revenue / Y Equipment &	earing for Sield Man & Materia	oondence Alterna :: ubject agement	te/Landline landline	No		
Date Give S.No.	of Birth (by details of su Subject Code MHA-5 MHA-7	Pin: Christian era) bject(s) reappe Revenue / Y Equipment &	earing for Sield Man & Materia	oondence Alterna :: ubject agement	te/Landline landline	No		

9.	Give details of exa	mination and related fee	Late Fee	ion Feeíf any)					
10.	b) I hereby de	at the name as written a eclare that the statements wledge and belief.	<u> </u>	ect. ation are true to the best					
	c) Certified (inderstood the Ex	amination Rules of the					
	Date:		(Signature of the	e candidate)					
		CERTIFICATE BY	PRINCIPAL						
1.	Certified that admi	ssion to the semester wa	as granted as per NO	CHM&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.		camination Rules have ed for having understoo	-	to the candidate and					
4.	after satisfying th		attendance require	ed to the candidate only ments as laid down in t.					
5.	Rs	remitted to the	ne Council through	aded in the amount of RTGS vide UTR/IMPS vour of National Council attached).					
	Examination Fee Late Fee (if any) Total Fee	Rs Rs							
Date:			Principal's signat	ure with office seal					
		FOR NCHM&	CT USE	_					
1.Exa	ceived m Fee: Rs Fee: Rs Fee Rs			Examination Hall mission ticket issued.					
	Dealing Assi	stant Executive (Officer (S)	Assistant Director (T)					

EVEN SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

COURSE TITLE: TWO-YEAR M.Sc. (HA) – SEMESTER-II (RE-APPEAR CANDIDATES OF JNU-NCHMCT ONLY)

LAST	DATE	E FOR SUBM	ISSION OF FORM	AS IN THE	ACADEMIC	CHAPTER	Paste F	Passport		
	Witl	hout Late f	ee	:	17/03/2	025	Size Pho	otograph.		
	Witl	h Late fee	of Rs.500/-	:	01/04/2	025	(Do no	t staple)		
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Cour	ncil R	oll No	Name of A	Academic	Chapter			ted by cipal)		
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1.	- ····-···									
Firs	First name Middle name							ırname		
(P	lease n	ote that the n	ame written above	should be s	ame as given i	n your +2 CBSE/	Board Cert	ificate)		
2.	Student's Mobile No.									
3.	Stud	ent's Emai	l id :							
4.	Fath	er's / Moth	er's Name							
5.	Pern	nanent resid	lential address for	or corresp	ondence					
				•						
			Pin:		Alterna	te/Landline No)			
6.	Date	of Birth (b	y Christian era)		7.	Sex: Male/Fen	nale/Othe	rs		
8.	Give	details of	subject(s) reappo	earing for	:					
	S.	Subject		Su	bject		Pleas	se tick		
	No.	Code					IE	ESE		
							1L	LSL		
	1	MHA801	Strategic Manag	gement						
	2	MHA802	Employee & Ma	nagement	Relations					
	3	MHA803	Business Ethics							
	4	MHA804	Organisational E	Behaviour	& Developm	ent				
	5	MHA805	Financial Repor	ting & An	alysis					

REAPPEAR EXAMINATION FEE

- *IE Internal Evaluation, *ESE End Semester Examination
- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/- & IE @ Rs.300/- per subject (Both retained by Academic Chapter)

9.	Give o	details of examinat	ion and related fees paid:	Examination Fee Late Fee (if any) Total Fee						
10.	a) b)	I hereby declare of my knowledg		n the application ar						
	c)	Certified that I National Counc	have read and understoril.	ood the Examinat	ion Rules of the					
	Date:			(Signature o	of the candidate)					
		Cl	ERTIFICATE BY PRINC	CIPAL						
1.	Certif	ied that admission	to the semester was grante	ed as per NCHM&O	CT Rules.					
2.	Certified that admission to the semester was granted as per NCHM&CT Rules. Certified that Mr./Ms is/was a bonafide full time student of this academic chapter and has satisfactorily completed the prescribed course of studies as laid down by the Council.									
3.			ation Rules have been having understood the sar	•	candidate and					
4.	after	satisfying that he ination Rules of	ard for the Examination we/she fulfils the attendan National Council for H	ce requirements a	as laid down in					
5.	Rs No.		owing fee of the candidated remitted to the Council dated Catering Technology (ma	cil through RTGS in favour of	vide UTR/IMPS National Council					
	Late F	Examination Fee Rs Late Fee (if any) Rs Total Fee Rs								
Date:			P	rincipal's signature	with office seal					
			FOR NCHMCT USE							
1.Exa	Fee: R	Rs Rs Ss	Examination particulars Checked & Verified	Examina Admission t	tion Hall icket issued.					
		Dealing Assistant	Executive Officer (S)	As	ssistant Director (T)					

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: THREE-YEAR B.Sc. HHA- SEMESTER-VI (FOR RE-APPEAR CANDIDATES ONLY)

LA	Without Late fee : 14/02/2025 With Late fee of Rs.500/- : 28/02/2025 With Late fee of Rs.1000/- : 17/03/2025 uncil Roll No Institute Name								Paste Passport Size Photograph. (Do not staple) (Photograph to be attested by													
Coun	cil Roll	No				I	nstii	tute	Nar	ne								Principal)				
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1. Fi	Name	of th	e ca	ndi	date	e in	Eng	•	`	ll nam		BLO	ЭСŀ	ζ le	tters	s)			S	urnaı	me	
(Please no	ote that	t the	nam	e wi	itter	abo	ve s	houl	d be sar	ne as	give	n in	youi	+2	CBS	E/B	oard	Cert	ifica	te)	
2.	Stude	Student's Mobile No.																				
3.						<u> </u>					<u> </u>											
4.							ame															
5.										rrespo												
							Pin:				A	lter	nate	/La	ndli	ne]	No.					_
6.	Date	of Bi	rth (by (Chr	istia	an e	ra) _					7	'. S	Sex:	Ma	ıle/I	Fem	ale			
8.	Give	detai	ls of	f sul	ojec	t(s)	rea	ppe	arin	g for:												
	S.	Su	ıbje	ct					S	Subjec	t						P	leas	e tio	k		
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	2		M 3									rau	ons	11	-							
	3		M 3						-	ations nagen		rt			+							
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	5		$\frac{M}{M}$												-							
	6		$\frac{M}{M}$			ood & Beverage Management acility Planning																
	7		M 3						ning oject						+		+					
		DII	.1V1 J	07	I	CSC	11 CII	110	Jec													
	1						RF	API	PEA	R EXA	MIN	ATI	ON :	FEF	2							

- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/-&Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)

9.	Give o	letails of examina	tion and related fees paid:	Examination Fee					
10.	a)	Certified that the	e 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:		(Sign	nature of the candidate)					
		C	ERTIFICATE BY PRINC	IPAL					
1.	Certified that admission to the semester was granted 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 (mandate form attached).								
5.	te is included in the amount of cil through RTGS vide UTR/IMPS in favour of National Council andate form attached).								
	Examination Fee Rs Late Fee (if any) Rs Total Fee Rs								
Date:			Princi	pal's signature with office seal					
			FOR NCHM&CT USI						
Fee red 1.Exar 2.Late Total l	n Fee: R Fee: R	s .s s	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.					
		Dealing Assistant	Executive Officer (S)	Assistant Director (T)					

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: THREE-YEAR B.Sc. HHA- SEMESTER-IV (FOR RE-APPEAR CANDIDATES ONLY)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE							1E	Paste Passport			
1	With	out Late fee		:	14/02/	2025		Size Ph	otograph.		
		Late fee of I Late fee of I		:	28/02/ 17/03/			(Do no	t staple)		
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Council	R_011	No	Institute l	Name					ted by cipal)		
				vallic				PIIII	cipai)		
1. N	ame	of the candid	late in English	(full na	me in BLC	OCK lett	ers)				
First 1	name		N	Middle na	ame			S	urname		
(Plea	ase no	te that the name	written above sh	ould be s	ame as giver	in your -	-2 CBSE/E	Board Cert	ificate)		
2. S	Stude	nt's Mobile I	No.								
3. S	Stude	nt's Email id	÷								
	Father's / Mother's Name										
5. F	Permanent residential address for correspondence										
				•	_						
_			Pin:		Alterr	ate/Lan	dline No.				
6. I	Date o	of Birth (by C	Christian era) _			7. Se	x: Male/	Female			
8.	Give o	details of sub	ject(s) reappea	ring for	••						
	S.	Subject		Subje	ect		P	Please tic	k		
1	No.	Code					Mid		Term		
	1	DIIM 201	F - 1 D - 1 - 4	· O			Term(T)	Theory	Practical		
	1	BHM 201	Food Product								
	2	BHM 202	Food & Beve	_ 1							
	3	BHM 203	Front Office	-							
	4	BHM 204	Accommodat								
	5	BHM 205	Food & Beve		ontrol						
	6	BHM 206	Hotel Accour								
	7	BHM 207	Food Safety &		ty						
	8	BHM 208	Industrial Tra	ining							

REAPPEAR EXAMINATION FEE

- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)

9.	Give details of examin	nation and related fees paid:	Examination Fee						
10.	b) I hereby decla of my knowle	dge and belief.							
	National Cou								
	Date:	(Sign	nature of the candidate)						
		CERTIFICATE BY PRINC	IPAL						
1.	Certified that admission	on 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.		ination Rules have been for having understood the sar	explained to the candidate and me.						
4.	after satisfying that	he/she fulfils the attendan	rill be issued to the candidate only ce requirements as laid down in totel Management (mandate form						
5.	Certified that the following fee of the candidate is included in the amount of Rs remitted to the Council through RTGS vide UTR/IMPS No dated in favour of National Council for Hotel Management & Catering Technology (mandate form attached).								
	Examination Fee Late Fee (if any) Total Fee	Rs							
Date:		Princi	pal's signature with office seal						
		FOR NCHM&CT US	E						
1.Exa	ceived m Fee: Rs. Fee: Rs. Fee Rs. Dealing Assistan		Examination Hall Admission ticket issued.						
	Dealing Assistan	Executive Officer (S)	Assistant Director (T)						

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: THREE-YEAR B.Sc. HHA – SEMESTER-II (RE-APPEAR CANDIDATES OF IGNOU-NCHMCT ONLY)

LAS	T DATE FO	E	Paste Passp			
	Without L	ate fee : 17/03/2025			tograph.	
		fee of Rs.500/- : 01/04/2025 fee of Rs.1000/- : 16/04/2025		(Do no	t staple)	
Counc	il Roll No	Institute Name		(Photograph to be attested by Principal)		
1.	Name of the	candidate in English (full name in BLOCK lette	ers)			
Fir	st name	Middle name	,	Su	rname	
(P	Please note that	the name written above should be same as given in your +	2 CBSE/B	oard Certi	ficate)	
2.	Student's M	Mobile No.				
3.	Student's E	mail id :				
4.		Nother's Name				
5.		residential address for correspondence				
		Pin:Alternate/Land	lline No.			
6.	Date of Bir	th (by Christian era)7. Sex	x: Male/I	Female		
8.	Give details	s of subject(s) reappearing for:				
S.	Subject	Subject	I	Please tio	k	
No.	Code		Mid		Term	
1	BHM151	Foundation Course in Food Production-II	Term(T)	Theory	Practical	
2	BHM152	Foundation Course in F & B Service-II				
3	BHM153	Foundation Course in Front Office-II				
4	BHM154	Foundation Course in Accom. Operations-II				
5	BHM108	Accountancy				
6	BHM109	Communication				
7	BHM117	Principles of Food Science				
- Th	neory @ Rs.300	REAPPEAR EXAMINATION FEE //- per subject (Forwarded to NCHM)		l.		

- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)

9.	Give o	letails of examina	tion and related fees paid:	Examination Fee					
10.	a)	Certified that the	e name as written above by	me is correct.					
	b)	•							
	c)								
	Date:	Date: (Signature of the candidate)							
		C	ERTIFICATE BY PRINC	IPAL					
1.	Certified that admission to the semester was granted 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 (mandate form attached).								
5.	Certified that the following fee of the candidate is included in the amount Rs remitted to the Council through RTGS vide UTR/IMF No dated in favour of National Council for Hotel Management & Catering Technology (mandate form attached).								
Examination Fee Rs									
Date:			Princi	pal's signature with office seal					
			FOR NCHM&CT USI						
Fee red 1.Exar 2.Late Total l	n Fee: R Fee: R	sss	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.					
		Dealing Assistant	Executive Officer (S)	Assistant Director (T)					

EVEN SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

COURSE TITLE: THREE-YEAR B.Sc. (HHA) – SEMESTER- II (RE-APPEAR CANDIDATES OF JNU-NCHMCT ONLY)

LAST	DATE	ISSION OF FORMS IN THE ACADEMIC CHAPTER Paste Pa	Paste Passport					
	With		Size Photograph.					
	With	Late fee o	of Rs.500/- : 01/04/2025	stamla)				
	With	Late fee o	of Rs.1000/- : 16/04/2025	(Do not staple)				
			(Photogra		,			
Coun	cil Ro	11 No	N	attested by Principal)				
			Princi	pai)				
1. Name of the candidate in English (full name in BLOCK letters)								
	First name Middle name Surname							
(Pl	lease no	te that the na	ume written above should be same as given in your +2 CBSE/Board Certif	icate)				
2.	Stude	nt's Mobil	e No.	ŕ				
3.	Stude	nt's Email	id:					
4.			er's Name					
5.			ential address for correspondence					
٠.	1 01111	anoni 10510	ential address for correspondence					
			Pin: Alternate/Landline No		_			
6.	Date	of Birth (b	y Christian era) 7. Sex: Male/Female/Others	s				
8.			subject(s) reappearing for:					
0.	S.	Subject	Subject	Please	tials			
	No.	Code	Subject		ESE			
	1	BHA201	Foundation Course In Food Production-II (Theory)	IE	ESE			
	2	BHA202	Foundation Course In Food Production-II (Practical)					
	3	BHA203	Foundation Course In Food & Beverage Service-II (Theory)					
	4	BHA204	Foundation Course In Food & Beverage Service-II (Practical)					
	5	BHA205	Foundation Course In Rooms Division Operations-II (Theory)					
	6	BHA206	Foundation Course In Rooms Division Operations-II (Practical)					
	7	BHA207	Hotel Security					
	8	BHA208	Sustainable Tourism					
	9	BHA209						
	10	ВНА210						
	11	ВНА211	Application of Computers & IT (Practical)					
	12	BHA212	Yoga/Stress Management-II (Practical)					
	1 4	שוותבוב	1 oga/ou oss ivianagement-11 (1 factical)					

REAPPEAR EXAMINATION FEE

- * ${\rm IE}-{\rm Internal}$ Evaluation, * ${\rm ESE}$ End Semester Examination
- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/- & IE @ Rs.300/- per subject (Both retained by Academic Chapter)

9.	Give details of ex	camination	and related fees paid:	Examination Fee Late Fee (if any) Total Fee			
10.	b) I hereby of my knoc) Certified	declare that owledge an	ne as written above by the statements made i d belief. we read and underste	n the application a			
	Date:			(Signature	of the candidate)		
		CERT	IFICATE BY PRINC	CIPAL			
1.	Certified that adn	nission to th	ne semester was grante	ed as per NCHM&	CT Rules.		
2.	Certified that Mr./Ms is/was a bonafide full time student of this academic chapter 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 (mandate form attached).						
5. Certified that the following fee of the candidate is included in the amount Rs. remitted to the Council through RTGS vide UTR No. dated in favour of National Council Management & Catering Technology (mandate form attached).							
Examination Fee Rs Late Fee (if any) Rs Total Fee Rs							
Date:			P	rincipal's signature	e with office seal		
			EOD NCUMCT USE	,			
1.Ext 2.Lat	received am Fee: Rs te Fee: Rs I Fee Rs		FOR NCHMCT USE Examination particulars Checked & Verified	Exami	nation Hall 1 ticket issued.		
	Dealing A	ssistant	F 0.00	· a\	4 · · · · · · · · · · · · · · · · · · ·		

Executive Officer (S)

Assistant Director (T)

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: CRAFTSMANSHIP CERTIFICATE COURSE IN FOOD PRODUCTION & PATISSERIE – SEMESTER-II (FOR RE-APPEAR CANDIDATES ONLY)

LAST I	LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE						,		Paste 1	Passp	ort	1				
V	Without Late fee : 17/03/2025							Size Photograph.								
V	Vith I	Late fee of l	Rs.500/-		:	(01/04	/202	25			(Do not staple)				
V	Vith I	Late fee of l	Rs.1000/-		:	1	16/04	/202	25			(Do not staple)		ne)		
	7 '1D 11N								(Photograph to be							
Council I	Council Roll No Institute Name									ted by	•					
		``		1410 111									Prin	cipal))	
1. Na	ame o	f the candid	late in En	glish (f	ull na	me iı	n BL	OCI	C le	tters	s)					
First n	ame			Mi	ddle na	ıme							S	urnan	ne	
(Plea	se note	that the name	written ab	ove shou	ıld be s	ame a	ıs give	n in	your	r +2	CBSE	E/Boa	ard Cer	ificat	e)	
2. S	tuden	t's Mobile l	No.													
			<u> </u>				l I									
		t's Email id														
4. F	ather'	s / Mother's	s Name _													_
5. P	ermar	nent residen	tial addre	ss for c	orresp	onde	ence									
							•									
	Pin: Alternate/Landline No															
		CD: 4 4												Г		_
6. D	ate of	f Birth (by C	Christian e	era)					. 5	sex:	Mal	e/Fe	emale			_
8. G	ive d	etails of sub	ject(s) rea	appeari	ng for	:										
			. ,													
S	.No.	Subject			Subje	ect						Ple	ease tio	ck		1
		Code			3						Mid		End	Term		
										T	erm(T) [Theory		ctical	1
	1	CFPP21	Cookery	& Lar	der Tl	heory	$y - \overline{\Pi}$	_								
	2	CFPP22	Cookery	Practi	cal – I	II										
	3	CEPP23	Larder F	ractica	1 _ II											İ

REAPPEAR EXAMINATION FEE

Bakery & Patisserie Theory – II

Bakery & Patisserie Practical – II

- Theory @ Rs.300/- per subject (Forwarded to NCHM)

Costing

CFPP24

CFPP25 CFPP26

- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)

5

9.	Give o	letails of examin	ation and related fees paid:	Examination Fee Late Fee (if any) Total Fee				
10.	 a) Certified that the name as written above by me is correct. 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:		(Sign	nature of the candidate)				
	CERTIFICATE BY PRINCIPAL							
1.	Certifi	ied that admission	n 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 (mandate form attached).							
5.	Certified that the following fee of the candidate is included in the amount Rs. remitted to the Council through RTGS vide UTR/IM No. dated in favour of National Cour for Hotel Management & Catering Technology (mandate form attached).							
	Late F	Examination Fee Rs Late Fee (if any) Rs Total Fee Rs						
Date:			Princi	pal's signature with office seal				
			FOR NCHMCT USE					
Fee rec 1.Exar 2.Late Total I	n Fee: R Fee: R	sssss	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.				

Executive Officer (S)

Assistant Director (T)

SEM-V SUPPLEMENTARY EXAMINATION FORM

Academic Year 2024-2025

COURSE TITLE: THREE-YEAR B.Sc. HHA

(FOR FAIL & RE-APPEAR CANDIDATES ONLY)

LAST DATE FOR SUBMISSION OF EXAM FORMS IN THE INSTITUTE - 25.04.2025

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	ncil Roll No	N	Iame of the Institute	2	Principal)			
1.	Name of the	candidate in En	glish (full name	in BLOCK letter	rs)			
	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 / M	other's Name _						
3.	Permanent re	esidential addre	ss for correspon	dence				
			Pin:	Mo	obile:			
	Email id:							
4.	Date of Birtl	n (by Christian	era)	5. Sex	: Male/Female			
6.	Give details	of subject(s) rea	appearing for:					

Sl	Subject	Subject]	Please tic	k
No.	Code		Mid Practical End		End-
			Term		Term
1	BHM311	Advance Food Production operations-I			
2	BHM312	Advance Food & Beverage operations-I			
3	BHM313	Front Office Management-I			
4	BHM314	Accommodation Management-I			
5	BHM307	Financial Management			
6	BHM308	Strategic Management			

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 examina	ation and related fees paid:	Examination Fee Total Fee					
8.	 a) Certified that the name as written above by me is correct. 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:	(Sign	nature of the candid	late)				
	(CERTIFICATE BY PRINC	CIPAL					
1.	Certified that admission	n to the semester was grante	d as per NCHM&O	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/IMPS No dated in favour of National Council for Hotel Management & Catering Technology (mandate form attached). Examination Fee: Rs							
	Total Fee: Rs							
Date	:	_ Princi	pal's signature with	n office seal				
		FOR NCHM&CT US	E					
1.Exa		Examination particulars Checked & Verified		tion Hall icket issued.				
	Dealing Assistant	F		· D· (T)				

Executive Officer (S)

Assistant Director (T)

APPLICATION FOR CHANGE OF CENTRE

Academic Year 2024-2025

(Please ensure that you are eligible for change of centre before filling up this form)

CHANGE OF CENTRE I	Paste Passport Size Photograph. (Do not staple)						
Council Roll No	(Photograph to be attested by Principal)						
1. Name of the candidate in English (full name in BLOCK letters)							
First name	Middle name		Surname				
(Please note that the name writter 2. Student's Mobile No.	above should be same as given in	your +2 CBSE/	Board Certificate)				
3. Student's Email id:							
	e						
	dress for correspondence :						
5. I officiation residential adv	iness for correspondence.						
	Pin: Alternate	e/Landline No)				
6. Date of Birth (by Christia	nn era)	7. Sex: Ma	le/Female				
	Centre opted for appearing in						
Candidate's signature							
Date: Principal's signature with office seal							
FOR NCHMCT USE							
Fee received	Examination particulars Checked & Verified		mination Hall ion ticket issued.				
Dealing Assistant	Dealing Assistant Executive Officer (S)						