# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2023-2024

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

First name       Middle name       Surname         (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)       (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)         2.       Student's Mobile No.	LAST	DATE ]	FOR SUBM	ISSION OF FO	RMS IN THE	INSTITUTI	E	Paste Pa	assport
With Late fee of Rs.1000/-       : 14/11/2023       (Do tot staple)         Council Roll No       Institute Name       (Photograph to be attested by Principal)         1.       Name of the candidate in English (full name in BLOCK letters)       First name       Surname         First name       Middle name       Surname         (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)       2.         Student's Mobile No.	,	Without	t Late fee		: 16/10/202	3		Size Pho	tograph.
With Late fee of Rs.1000/-       : 14/11/2023       (Do tot staple)         Council Roll No       Institute Name       (Photograph to be attested by Principal)         1.       Name of the candidate in English (full name in BLOCK letters)       First name       Surname         First name       Middle name       Surname         (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)       2.         Student's Mobile No.	l l	With La	te fee of R	s.500/-	: 31/10/202	3		(D )	4.1)
Council Roll No       Institute Name       (Photograph to be attested by Principal)         Image: Council Roll No       Institute Name       Principal)         Image: Council Roll No       Image: Council Roll No       Principal)         Image: First name       Middle name       Surname         Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No         Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No         Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No         Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No         Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No       Image: Council Roll No         Image: Council Roll No       Image: Council Roll No       Image: Council Roll Roll No       Image: Council Roll Roll Roll No       Image: Council Roll Roll Roll Roll Roll Roll Roll Ro								(Do not	staple)
Council Roll No       Institute Name       attested by Principal)         I.       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 CBSE/Board Certificate)       2.         2.       Student's Mobile No.						-		(Photogra	ph to be
Image: Summary Structure       Image: Summary			_		_				
First name       Middle name       Surname         (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)       (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)         2.       Student's Mobile No.	Counc	il Roll I	No	Institute I	Name			Princ	ipal)
First name       Middle name       Surname         (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)       (Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)         2.       Student's Mobile No.							L		
(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)         2.       Student's Mobile No.         3.       Student's Email id :			the candida	•		LOCK letter	rs)		
2.       Student's Mobile No.	First	name		Mi	ddle name			Su	rname
2.       Student's Mobile No.									
3.       Student's Email id :         4.       Father's / Mother's Name         5.       Permanent residential address for correspondence	(Ple	ase note t	hat the name	written above shou	ild be same as gi	ven in your +2	CBSE/B	oard Certi	ficate)
4.       Father's / Mother's Name	2. 5	Student'	s Mobile N	o.					
4.       Father's / Mother's Name	3. 5	Student'	s Email id :			·			
5.       Permanent residential address for correspondence									
Pin:       Alternate/Landline No.         6.       Date of Birth (by Christian era)       7. Sex: Male/Female         8.       Give details of subject(s) reappearing for:         8.       Give details of subject(s) reappearing for:         8.       Subject       Please tick         6.       Code       Mid       End Term         1       BHM111       FC in Food Production-I       Image: Female       Image: Female         2       BHM112       FC in F & B Service-I       Image: Female       Image: Female         3       BHM113       FC in Front Office-I       Image: Female       Image: Female         4       BHM105       Application of Computers       Image: Female       Image: Female         5       BHM106       Hotel Engineering       Image: Female       Image: Female         7       BHM116       Nutrition       Image: Female       Image: Female         REAPPEAR EXAMINATION FEE         Theory @ Rs.300/- per subject (Forwarded to NCHM)									
5. Date of Birth (by Christian era)       7. Sex: Male/Female         8. Give details of subject(s) reappearing for:         8. Give details of subject       Please tick         Image: Code       Mid       End Term         1       BHM111       FC in Food Production-I       Image: Practical         2       BHM112       FC in F & B Service-I       Image: Practical         3       BHM113       FC in Front Office-I       Image: Practical         4       BHM105       Application of Computers       Image: Practical         5       BHM106       Hotel Engineering       Image: Practical         7       BHM116       Nutrition       Image: Practical         REAPPEAR EXAMINATION FEE         - Theory @ Rs.300/- per subject (Forwarded to NCHM)	. 1	ormane			onespondene				
5. Date of Birth (by Christian era)       7. Sex: Male/Female         8. Give details of subject(s) reappearing for:         8. Give details of subject       Please tick         Image: Code       Mid       End Term         1       BHM111       FC in Food Production-I       Image: Practical         2       BHM112       FC in F & B Service-I       Image: Practical         3       BHM113       FC in Front Office-I       Image: Practical         4       BHM105       Application of Computers       Image: Practical         5       BHM106       Hotel Engineering       Image: Practical         7       BHM116       Nutrition       Image: Practical         REAPPEAR EXAMINATION FEE         - Theory @ Rs.300/- per subject (Forwarded to NCHM)	-								
8. Give details of subject(s) reappearing for: $ \begin{array}{c c c c c c c c c c c c c c c c c c c $	-			Pin:	Alte	ernate/Landl	ine No.		
S.No.       Subject       Subject       Please tick         Code       Mid       End Term         1       BHM111       FC in Food Production-I       Image: Second	6. I	Date of ]	Birth (by Cl	nristian era)		7. Se	ex: Male	e/Female	
Code       Mid Term(T)       End Term         1       BHM111       FC in Food Production-I       Image: Constraint of the second se	8. (	Give det	ails of subj	ect(s) reappeari	ng for:				
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1       BHM111       FC in Food Production-I         2       BHM112       FC in F & B Service-I         3       BHM113       FC in Front Office-I         4       BHM114       FC in Accommodation Operations-I         5       BHM105       Application of Computers         6       BHM106       Hotel Engineering         7       BHM116       Nutrition			Code				Mid	End	Term
2       BHM112       FC in F & B Service-I         3       BHM113       FC in Front Office-I         4       BHM114       FC in Accommodation Operations-I         5       BHM105       Application of Computers         6       BHM106       Hotel Engineering         7       BHM116       Nutrition         REAPPEAR EXAMINATION FEE         - Theory @ Rs.300/- per subject (Forwarded to NCHM)							Term(T)	Theory	Practical
3       BHM113       FC in Front Office-I		1	BHM111	FC in Food Pr	oduction-I				
4       BHM114       FC in Accommodation Operations-I         5       BHM105       Application of Computers         6       BHM106       Hotel Engineering         7       BHM116       Nutrition         REAPPEAR EXAMINATION FEE         - Theory @ Rs.300/- per subject (Forwarded to NCHM)		2	BHM112	FC in F & B S	Service-I				
5       BHM105       Application of Computers         6       BHM106       Hotel Engineering         7       BHM116       Nutrition         REAPPEAR EXAMINATION FEE         - Theory @ Rs.300/- per subject (Forwarded to NCHM)		3	BHM113	FC in Front O	ffice-I				
6     BHM106     Hotel Engineering       7     BHM116     Nutrition         REAPPEAR EXAMINATION FEE       - Theory @ Rs.300/- per subject (Forwarded to NCHM)	-	4	BHM114	FC in Accom	nodation Ope	rations-I			
7     BHM116     Nutrition       REAPPEAR EXAMINATION FEE       - Theory @ Rs.300/- per subject (Forwarded to NCHM)	-	5	BHM105	Application of	f Computers				
REAPPEAR EXAMINATION FEE - Theory @ Rs.300/- per subject (Forwarded to NCHM)	-	6	BHM106	Hotel Enginee	ering				
- Theory @ Rs.300/- per subject (Forwarded to NCHM)	Ī	7	BHM116	Nutrition					
- Theory @ Rs.300/- per subject (Forwarded to NCHM)	Г			ПЕАРМ		TION FEE			
		- Theory	/ @ Rs 300/- r			TION FEE			
						0/- per subject	(Both ret	ained by I	nstitute)
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Page1 of 2 Print on both sides

3-YEAR B.Sc. (HHA)

3-YEAR B.Sc. (HHA)

9.	Give details of examination 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:

(Signature of the candidate)

#### **CERTIFICATE BY PRINCIPAL**

- 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 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
Late Fee (if any)	Rs
Total Fee	Rs

Date:

Principal's signature with office seal

#### FOR NCHMCT USE

Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs.	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs.		
Total Fee Rs.		
Dealing Assistant		
Dealing Assistant	Executive Officer (S)	Assistant Director (T)

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2023-2024

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

	LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE						Paste Passport			
	Without Late fee: 18/09/2023							graph.		
		te fee of Rs.500/ te fee of Rs.100			(E	)o not	t sta	aple)		
Coun	cil Roll I	No	Institute Name			otogra attest Princ	ed			
l. ]	Name of	the candidate in ]	- English (full name in BLOCK letter	s)						
	t name		Middle name	5)		Su	Irna	me		
(Pl	ease note t	hat the name written	above should be same as given in your +2	CBSE/	Board	Certi	fic	ate)	I	
2.	Student'	s Mobile No.								
3.	Student'	s Email id :								
			e							
5.			lress for correspondence							
			Pin: Alternate/Landl							
5.	Date of ]		in era) 7. Se							
3.		ails of subject(s)								
3.	Give det S.No.	ails of subject(s) Subject Code	reappearing for: Subject		Plea	ase ti				
				Mid Term(1		Enc	d Te	rm	al	
				Mid Term(1			d Te		al	
	S.No.	Subject Code	Subject			Enc	d Te	rm	al	
	S.No.	Subject Code BHM201	Subject Food Production Operations			Enc	d Te	rm	al	
	S.No.	Subject Code BHM201 BHM202	Subject Food Production Operations Food & Beverage Operations			Enc	d Te	rm	al	
	S.No. 1 2 3	Subject Code BHM201 BHM202 BHM203	SubjectFood Production OperationsFood & Beverage OperationsFront Office Operations			Enc	d Te	rm	al	
3.	S.No. 1 2 3 4	Subject Code BHM201 BHM202 BHM203 BHM204	SubjectFood Production OperationsFood & Beverage OperationsFront Office OperationsAccommodation Operations			Enc	d Te	rm	al	
3.	S.No. 1 2 3 4 5	Subject Code BHM201 BHM202 BHM203 BHM204 BHM205	SubjectFood Production OperationsFood & Beverage OperationsFront Office OperationsAccommodation OperationsFood & Beverage Controls			Enc	d Te	rm	al	
3.	S.No. 1 2 3 4 5 6	Subject Code BHM201 BHM202 BHM203 BHM204 BHM205 BHM206	SubjectFood Production OperationsFood & Beverage OperationsFront Office OperationsAccommodation OperationsFood & Beverage ControlsHotel Accountancy			Enc	d Te	rm	al	
3.	S.No. 1 2 3 4 5 6 7 8 - Theory	Subject Code BHM201 BHM202 BHM203 BHM204 BHM205 BHM206 BHM207 BHM208	SubjectFood Production OperationsFood & Beverage OperationsFront Office OperationsAccommodation OperationsFood & Beverage ControlsHotel AccountancyFood Safety & Quality	Term(1		Enc		rm Practic:		

3-YEAR B.Sc. (HHA)

**3-YEAR B.Sc. (HHA)** 

Give details of examination and related fees paid:	Examination Fee
	Late Fee (if any)
	Total Fee

- 10. Certified that the name as written above by me is correct. a)
  - I hereby declare that the statements made in the application are true to the best **b**) of my knowledge and belief.
  - Certified that I have read and understood the Examination Rules of the c) National Council.

Date: \_\_\_\_

9.

(Signature of the candidate)

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#### **CERTIFICATE BY PRINCIPAL**

- 1. Certified that admission to the semester was granted as per NCHM&CT Rules.
- Certified that Mr./Ms. is/was a bonafide full time 2. student of this institution and has satisfactorily completed the prescribed course of studies as laid down by the Council.
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Examination Fee	Rs
Late Fee (if any)	Rs
Total Fee	Rs

Date:

Principal's signature with office seal

	FOR NCHMCT USE	
Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs.	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs.		
Total Fee Rs.		
Dealing Assistant		
Dealing Assistant	Executive Officer (S)	Assistant Director (T)

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# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2023-2024

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

LAS	Withou With L	FOR SUBMI at Late fee ate fee of Rs ate fee of Rs	.500/-		RMS IN : 18/0 : 03/1 : 17/1	9/202 0/202	23 23	[ST]	ITU	TE		Siz	aste Pa ze Pho Do not	togr	aph.
Coun	cil Roll	No	Insti	tute N	ame								otogra attesto Princ	ed by	y
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2.		's Mobile No							Uui	120	DOL	_ Dourd	i Certi	neat	)
			LI												
8.	Student	's Email id :													
ŀ.	Father's	s / Mother's M	Name												
5.		ent residentia													
).	Date of	Birth (by Ch	ristian era	ı)					7.	Sex	: M	ale/Fe	male		
<b>)</b> .	Give de	tails of subje	ct(s) reap	pearin	g for:										
	S.No.	Subject			Subj	ect						I	Please	e tic	k
		Code										Mid			Term
	1	BHM311	Advance	e Food	Produ	ction	On	ero	tion	c_I	T	erm(T)	The	ory	Practical
	2	BHM311 BHM312	Advance				1								
	3	BHM313				0		Per		10 1	-				
	4	BHM314		Front Office Management-I Accommodation Management-I											
	5	BHM307		Financial Management											
	6	BHM308	Strategi		U										
		y @ Rs.300/- p cal @ Rs.500/-	er subject (l	Forward		CHM)	)				Both	retaine	ed by I	nsti	tute)

A-34, Sector-62, Institutional Area, NOIDA – 201 309 e-mail: dirs-nchm@nic.in

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Page1 of

3-YEAR B.Sc. (HHA)

3-YEAR B.Sc. (HHA)

9.	Give details of examination and related fees paid:	Examination Fee
		Late Fee (if any)
		Total Fee

- 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:

10.

(Signature of the candidate)

#### **CERTIFICATE BY PRINCIPAL**

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- 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
Late Fee (if any)	Rs
Total Fee	Rs

Date:

Principal's signature with office seal

#### FOR NCHM&CT USE

Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs		
Total Fee Rs		
Dealing Assistant		
Deaning Prosistant	Executive Officer (S)	Assistant Director (T)

**ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2023-2024

COURSE TITLE : 1 <sup>1</sup>/<sub>2</sub> YEAR CRAFTSMANSHIP CERTIFICATE COURSE IN FOOD PRODUCTION & PATISSERIE – SEMESTER-I

### (RE-APPEAR CANDIDATES ONLY)

	Г DATE ut late f		IISSION OF FORMS IN THE INSTITUTE : 13/10/2023	Paste Pas Size Photo					
	ate fee ( ate fee (	(Do not staple)							
Coun	Council Roll No     Institute Name								
	Name o t name	f the candida	ate in English (full name in BLOCK letters) Middle name	Surn	ame				
(Pl	ease note	that the name	written above should be same as given in your +2 CBSE/F	Board Certific	cate)				
2.		t's Mobile N			,				
3.	Studen	t's Email id	:						
4.	Father'	s / Mother's	Name						
5.	Permar	nent resident	ial address for correspondence						
			Pin: Alternate/Landline No	•					
6.	Date of	f Birth (by C	hristian era) 7. Sex: Mal	e/Female					
8.	Give de	etails of subj	ect(s) reappearing for:						
Γ	S.No.	Subject	Subject	Please	e tick				
		Code		Mid Term	End Term				
	1	CFPP11	Cookery & Larder Theory-I						
	2	CFPP12	Cookery Practical-I						
	3	CFPP13	Larder Practical-I						
Γ	4	CFPP14	Bakery & Patisserie Theory-I						
Γ	5	CFPP15	Bakery & Patisserie Practical-I						
Γ	6	CFPP16	Hygiene						
F	7	CFPP17	Equipment Maintenance						

# **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 examination 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:

(Signature of the candidate)

#### **CERTIFICATE BY PRINCIPAL**

- 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 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
Late Fee (if any)	Rs
<b>m</b> 1 <b>n</b>	Rs

Date:

Principal's signature with office seal

#### FOR NCHMCT USE

Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs		
Total Fee Rs		
Dealing Assistant	Executive Officer (S)	Assistant Director (T)

# Page1 of 2 Print on both sides

**2-YEAR M.Sc. (HA)** 

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

**ODD SEMESTER END TERM EXAMINATION FORM** Academic Year 2023-2024

COURSE TITLE: TWO-YEAR M.Sc. (HA) – SEMESTER-I (FOR RE-APPEAR CANDIDATES ONLY)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE	Paste Passport							
Without late fee : 06/10/2023	Size Photograph.							
With late fee of Rs. 500/-: 21/10/2023With late fee of Rs. 1000/-: 04/11/2023	(Do not staple)							
Council Roll No     Institute Name	(Photograph to be attested by Principal)							
1. Name of the candidate in English (full name in BLOCK letters)	9							
First name Middle name	Surname							
(Please note that the name written above should be same as given in your +2 CBSE	/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 N	0							
6.Date of Birth (by Christian era)7.Sex: Ma	ale/Female							
8. Give details of subject(s) reappearing for:								

S.No.	Subject	Subject	Pleas	e tick
	Code		Mid Term	End Term
1	MHA-02	Hospitality Management		
2	MHA-03	Properties Development & Planning		

#### **REAPPEAR EXAMINATION FEE**

- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Mid Term IC (Theory) @ Rs.300/- per subject (Retained by Institute)

2-YEAR M.Sc. (HA)

9.	Give details of examination 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:

(Signature of the candidate)

#### **CERTIFICATE BY PRINCIPAL**

- 1. Certified that admission to the semester was granted as per NCHM&CT Rules.
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Examination Fee	Rs
Late Fee (if any)	Rs
Total Fee	Rs

Date:

Principal's signature with office seal

#### FOR NCHMCT USE

Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs.	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs.		
Total Fee Rs.		
Dealing Assistant	Executive Officer (S)	Assistant Director (T)

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2023-2024

### COURSE TITLE: TWO-YEAR M.Sc. (HA) – SEMESTER-III (FOR RE-APPEAR CANDIDATES ONLY)

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Cour	Council Roll No Institute Name									(Photograph to be attested by Principal)		e				
1. Fire	Name c st name	of the candid	ate in Engl		ll nai ile na		n BL(	CK	lett	ers)	)			Sur	name	
(P	lease note	e that the name	written abov	ve should	l be s	ame a	ıs give	n in y	our	+2 C	BSE	/Boai	rd C	ertif	icate)	
2.	Studen	t's Mobile N	lo.													
3.	Studen	t's Email id	:													
4.																
5.	Father's / Mother's Name         Permanent residential address for correspondence															
	Pin: Alternate/Landline No															
6.	Date of	f Birth (by C	Christian er	a)					7.	Sex	: Ma	ale/F	Fem	ale		
8.		etails of subj														
	S.No.	Subject			Sub	ject						P	leas	e ti	ck	
		Code									M	id Ter	rm	F	and Terr	n
	1	MHA-11	Marketing	, Service	es &	Cons	sumer	Beha	avio	ur						
	2	MHA-12	Internatio	onal Ma	arket	ing										
	3	MHA-15	Managing	g Chan	ge in	Org	ganisa	tion	5							
	4	MHA-16	Social Press	ocesses	s & E	Beha	viour	al Iss	sues							
		y @ Rs.300/- p erm IC (Theor	er subject (H		ed to ]	NCH	M)									

2-YEAR M.Sc. (HA)

9.	Give details of examination 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:

(Signature of the candidate)

#### **CERTIFICATE BY PRINCIPAL**

- 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.
- 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
Late Fee (if any)	Rs
	Rs

Date:

Principal's signature with office seal

#### FOR NCHMCT USE

Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs		
Total Fee Rs		
Dealing Assistant	Executive Officer (S)	Assistant Director (T)