

NATIONAL COUNCIL FOR HOTEL MANAGEMENT & CATERING TECHNOLOGY
A-34, Sector- 62, NOIDA - 201 309

MARKS VERIFICATION FORM – SEMESTER II
(FOR NCHMCT COMPONENTS ONLY)

LAST DATE FOR FORM SUBMISSION IN THE INSTITUTE:

11th August 2023

(Applications received after the last date will not be accepted)

1. Name in BLOCK letters : _____
(As in ADMIT CARD)
2. NCHM&CT Roll No. : _____
3. Institute Name : _____
4. Student's Address : _____

_____ Pin: _____
5. Email id : _____
6. Mobile No. : _____

| S/No | Subject(s) for Verification | | | | Marks obtained | Marks after verification (For NCHM use only) |
|------|-----------------------------|--------------|--------|-----------|----------------|---|
| | Subject Code | Subject Name | Theory | Practical | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |

FEE: Rs.300/-per subject (Forwarded to NCHMCT)

Candidate's signature

Principal's Signature with stamp

Date: _____

