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: ONE-AND-HALF YEAR PG DIPLOMA IN ACCOMMODATION OPERATIONS & MANAGEMENT – SEMESTER-I

(RE-APPEAR CANDIDATES ONLY)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE										Paste Passport										
Without late fee				: 13/10/2023									Size Photograph.							
With late fee of Rs. 500/-				: 28/10/2023									(Do not staple)							
With late fee of Rs. 1000/- : 11/11/2023										(Do not staple)										
													(Photograph to be							
Council Roll No Institute Name												attested by								
Council Roll No Histitute Ivalite								-	Principal)											
				_											L					L
1. Name of the candidate in English (full name in BLOCK letters)																				
Fir	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 No										NI _O					_					
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6.	6. Date of Birth (by Christian era) 7. Sex: Male/Female																			
8. Give details of subject(s) reappearing for:																				
	S.No.	Subject		Subject I							P1	Please tick				1				
		Code		Mid Term						rm	End Term				1					
																Th	eory	Pra	actical	1
	1	AOM11	Acc	Accommodation Operations																
	2	AOM12	Fron	Front Office Operations											1					

REAPPEAR EXAMINATION FEE

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

Accountancy

Communication

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

Supervisory Management

3

4

5

AOM13

AOM14

AOM15

Print on both sides
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11/2 YEAR PG DIPLOMA PROGRAM

9.	Give o	details of examina	tion 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 National Counc	have read and understorical.	ood the Examinat	ion Rules of the							
	Date:			(Signature o	of the candidate)							
		C	ERTIFICATE BY PRINC	CIPAL								
1.	Certif	ied that admission	to the semester was grante	ed as per NCHM&C	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.	Rs dated Nation	Certified that the following fee of the candidate is included in the amount of Rs. remitted to the Council vide bank draft no: dated drawn on branch in favour of National Council for Hotel Management & Catering Technology (mandate form attached).										
		Gee (if any) R	S S									
Date:			P	rincipal's signature	with office seal							
			FOR NCHMCT USE	,								
Fee red 1.Exan 2.Late Total	n Fee: F	Rs Rs s	Examination particulars Checked & Verified	Examina Admission t								
		Dealing Assistant	Executive Officer (S	Λ.	sistant Director (T)							