## INTITUTE OF HOTEL MANAGEMENT <u>GUWAHATI</u>

IHM(GH)/Acad-03/24/269

## NOTICE FOR RE-APPEAR CANDIDATES

Date: 31.08.2024

This is to inform all the Re-appear candidates of B.Sc. Semester- I (IGNOU & JNU), Semester-III, Semester-V, CCFPP Semester-I & PGDAOM Semester-I that the last date of filling up forms are mentioned as below:-

### B.Sc. Semester- I, CCCFPP & PGDAOM

Without late fee : 09.10.2024
With late fee of Rs. 500/With late fee of Rs.1000/: 08.11.2024

### B.Sc. Semester-III & V

Without late fee : 10.09.2024
With late fee of Rs. 500/With late fee of Rs.1000/- : 11.10.2024

Regular students need not have to fill up the forms.

The candidate can download the exam form from the Institute website and pay the exam fees to the Institute Account No. (Mentioned below) and send the scan copy of the exam form and fees receipt to the examination department email ID: <a href="mailto:ihmctanghy.exam@gmail.com">ihmctanghy.exam@gmail.com</a> before the last date of submission.. Candidate may apply through offline mode also. Form available in the Examination Section of IHM, Guwahati.

Per Subject: Theory Rs. 300/-, Practical Rs. 500/-

### Bank Details of IHM, Guwahati

1. Name of the Institute: Institute of Hotel Management

2. Bank's Name : Central Bank of India.

3. Beneficiary A/c No. : 1743905746

4. Account Type : Current Account.

5. Branch Name : Barbari Branch. 6. IFSC no. : CBIN0283518

PRINCIPAL

Copy to: i) Exam Notice Board ii) Institute Website

N.B.: Exam forms enclosed herewith and Tick properly at the subject mentioned.

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

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

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

	Without Late fee : 09/10/2024 With Late fee of Rs.500/- : 24/10/2024 With Late fee of Rs.1000/- : 08/11/2024  Council Roll No Institute Name  Name of the candidate in English (full name in BLOCK letters)										Paste Passport Size Photograph.  (Do not staple)  (Photograph to be attested by Principal)											
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8.	Give de	tails of	sub	ject	(s) 1	eap	pea	ring	g for	:												
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#### REAFFEAR EXAMINATION F

- 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	on and related fees paid:	Late Fee (if any	eey)
10.	a) b) c)	I hereby declare to of my knowledge	name as written above by hat the statements made in and belief.  have read and understo	n the application	
	C)	National Counci		ou the Examin	ation Rules of the
	Date:		_	(Signatur	e of the candidate)
		CE	RTIFICATE BY PRINC	CIPAL	
1.	Certif	ied that admission t	o the semester was grante	d as per NCHM	&CT Rules.
2.	studer	ned that Mr./Msnt of this institution is as laid down by the	n and has satisfactorily of	<del></del>	a bonafide full time rescribed course of
3.		ied that Examinationed for having under	n Rules have been explair estood the same.	ned to the candid	ate and undertaking
4.	satisfy	ying that he/she fulf	for the Examination will ils the attendance required for Hotel Management (	ements as laid do	wn in Examination
5.	Rs No		ving fee of the candida remitted to the Council dated Catering Technology (ma	cil through RTC in favour o	S vide UTR/IMPS of National Council
		Fee (if any) Rs.			
Date	:		P	rincipal's signatu	re with office seal
			FOR NCHMCT USE		
1.Ex 2.La	ite Fee:	Rs Rs Rs	Examination particulars Checked & Verified	Exar	nination Hall ion ticket issued.
		Dealing Assistant	Executive Officer (	S)	Assistant Director (T)

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

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

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

LAST D	ATE F	Paste Passport						
V	Vitho	ut Late fe	ee : 09/10/2024 S	Size Photograph.				
V	Vith 1	Late fee o	f Rs.500/- : 24/10/2024	(Do mo	s	2)		
V	With I	Late fee o	f Rs.1000/- : 08/11/2024	(Do no	ot stapl	e)		
Counci	il Roll	No	Name of Academic Chapter	attes	raph to sted by scipal)	be		
1. N	ame c	of the cano	lidate in English (full name in BLOCK letters)					
First r		or the cane	Middle name	S	urname	s		
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·		t's Mobil		na Cer	incate	,		
3. S	Studen	t's Email	id:					
4. F	ather	's / Mothe	er's Name					
5. P	Permai	nent resid	ential address for correspondence					
-								
_			Pin: Alternate/Landline No					
_					_			
6. I	Date of	f Birth (by	y Christian era) 7. Sex: Male/Female	e/Othe	ers			
8. C	Give d	etails of s	ubject(s) reappearing for:					
Γ	S.	Subject	Subject		Pleas	se tick		
	No.	Code	j		IE	ESE		
	1	BHA101	Foundation Course In Food Production-I (Theory)					
	2	BHA102	Foundation Course In Food Production-I (Practical)					
	3	BHA103	Foundation Course In Food & Beverage Service-I (Theory	y)				
	4	BHA104	Foundation Course In Food & Beverage Service-I (Practic	cal)				
	5	BHA105	Foundation Course In Rooms Division Operations-I (Theo	ory)				
	6	BHA106	Foundation Course In Rooms Division Operations-I (Practical)					
	7	BHA107	Customer Relation Management					
	8	BHA108	Employability Skills					
	9	BHA109	Communication Skills-I					
	10	BHA110	Environmental Studies					
	11	BHA111	Yoga/Stress Management-I (Practical)					
Ī			REAPPEAR EXAMINATION FEE Aluation, *ESE - End Semester Examination  O/- per subject (Forwarded to NCHM)					

- 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 examination and related fees paid: Examination Fee											
10.	b) I hereby declared of my knowledge	ge and belief. I have read and understo	me is correct.  In the application are true to the best  od the Examination Rules of the								
	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 academic chapter and has satisfactorily completed the prescribed course of studies as laid down by the Council.										
3.	Certified that Examinate obtained for having und	<u>-</u>	ed to the candidate and undertaking								
4.	satisfying that he/she fu		be issued to the candidate only after ments as laid down in Examination mandate form attached).								
5.	Rs No	owing fee of the candida remitted to the Counc dated & Catering Technology (ma	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:		Pr	incipal's signature with office seal								
		FOR NCHMCT USE									
1.Exa	eceived am Fee: Rs e Fee: Rs	Examination particulars	Examination Hall Admission ticket issued.								
	Dealing Assistant	Executive Officer (S	S) Assistant Director (T)								

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

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

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

LAS	LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE							
	Withou	t Late fee	: 10/09/2024		Size Photograph.			
	With La	ate fee of Rs.500/	- : 26/09/2024		(Do not	stanle)		
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Cour	icil Roll I	No	Institute Name		atteste Princ			
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1.	Name of	the candidate in I	English (full name in BLOCK letter	rs)				
Firs	st name		Middle name		Su	rname		
(P	lease note t	that the name written	above should be same as given in your +2	CBSE/B	oard Certi	ficate)		
2.	Student'	's Mobile No.						
3.	Student'	's Email id :						
4.								
5.	Permane	ent residential add	ress for correspondence					
			Pin: Alternate/Landl	ine No.				
6.	Date of		n era) 7. Se					
8.	Give det	tails of subject(s)	reappearing for:					
	S.No.	Subject Code	Subject		Please tio	ek		
				Mid		Term		
	1	DID (201		Term(T)	Theory	Practical		
	1	BHM201	Food Production Operations					
	2	BHM202	Food & Beverage Operations					
	3	BHM203	Front Office Operations					
	4	BHM204	Accommodation Operations					
	5	BHM205	Food & Beverage Controls					
	6	BHM206	Hotel Accountancy					
	7	BHM207	Food Safety & Quality					

### REAPPEAR EXAMINATION FEE

**Industrial Training** 

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

**BHM208** 

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

Print on both sides

9.	Give o	details of examinat	ion and related fees paid:	Examination Fee
10.	a)	Certified that the	name as written above by	
	b)		•	the application are true to the best
		of my knowledge		
	c)	Certified that I National Counc		od the Examination Rules of the
	Date:		_	(Signature of the candidate)
		CE	ERTIFICATE BY PRINC	IPAL
1.	Certif	ied that admission	to the semester was grante	d as per NCHM&CT Rules.
2.	Certif	ied that Mr./Ms.		is/was a bonafide full time
	studer		n and has satisfactorily of	completed the prescribed course of
3.		ied that Examination to the contraction of the cont	<u> </u>	ned to the candidate and undertaking
4.	satisfy	ing that he/she ful		be issued to the candidate only after ments as laid down in Examination mandate form attached).
5.				ate is included in the amount of cil through RTGS vide UTR/IMPS
				in favour of National Council
	for Ho	otel Management &	Catering Technology (ma	andate form attached).
	Exam	ination Fee Rs	S	
	Late F	Gee (if any) Rs	5	
	Total	Fee Rs	5	
Date:			Pı	rincipal's signature with office seal
			FOR NCHMCT USE	
	received	D.	Examination particulars	Examination Hall
2.Lat	am ree: te Fee:	Rs	Checked & Verified	Admission ticket issued.
Tota	l Fee	Rs.		
		Dealing Assistant	<b>.</b>	
			Executive Officer (S	S) Assistant Director (T)

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

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

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

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE

	Without Late fee With Late fee of Rs.500/- With Late fee of Rs.1000/-															Size Photograph.  (Do not staple)				
Cou	ıncil Roll	No	Ir	stit	ute	: Na	me_								- [ (	at	togra tteste rinci	d by		
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6.	Date of	Birth (by Ch	ristian	era	.) _							7.	Sex	: M	ale/	Fen	nale			
8.	Give de	tails of subject	ct(s) re	eapp	pea	ring	g for	:												
	S.No.	Subject					Sı	ıbje	ct							Pl	ease	tick	ζ.	
		Code												т	Mid `erm('			End T	erm Practi	cal

#### 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

### 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 d	etails of examination	n and related fees paid:	Examination Fee
10.	a)	Certified that the na	ame as written above by	
10.	b)		at the statements made in	n the application are true to the best
	c)	Certified that I h National Council.	ave read and understo	ood the Examination Rules of the
	Date:		-	(Signature of the candidate)
		CER	TIFICATE BY PRINC	CIPAL
1.	Certifi	ed that admission to	the semester was grante	d as per NCHM&CT Rules.
2.	studen	ed that Mr./Mst of this institution s as laid down by the	and has satisfactorily of	is/was a bonafide full time completed the prescribed course of
3.		ed that Examination ed for having unders	_	ned to the candidate and undertaking
4.	satisfy	ing that he/she fulfil		be issued to the candidate only after ements as laid down in Examination
5.	Rs No		remitted to the Coun dated	ate is included in the amount of cil through RTGS vide UTR/IMPS in favour of National Council
	Exami	nation Fee Rs ee (if any) Rs	Catering Technology (ma	andate form attached).
Date	»:		P	rincipal's signature with office seal
			FOR NCHM&CT US	E
1.E 2.L	ate Fee:	Rs Rs Rs	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.
		Dealing Assistant	Evecutive Officer (	S) Assistant Director (T)

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

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

## COURSE TITLE: 1 ½ YEAR CRAFTSMANSHIP CERTIFICATE COURSE IN FOOD PRODUCTION & PATISSERIE – SEMESTER-I

### (RE-APPEAR CANDIDATES ONLY)

L	LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE										Paste Passport						
	Withou	ut late fee			: 09	9/10	/202	24				Size Photograph.					
	With 1	ate fee of R	s. 500/-		: 24	4/10	/202	24					(D		1 - \		
	With 1	ate fee of R	s. 1000/-		: 08	8/11	/202	24					(Do no	)t Sta	apie)		
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C	ouncil Roll	No	Insti	tute Na	ıme_							_	attested by				
												Prir	cipa	ıl)			
1.	1. Name of the candidate in English (full name in BLOCK letters)																
	First name			Midd	lle na	ame							S	urna	ıme		
	(Please note	that the name	written abov	e should	be s	ame	as g	iven i	n you	r +2	CBS	E/Boa	rd Cer	tific	ate)		
2.	(Please note that the name written above should be same as given in your +2 CBS Student's Mobile No.																
3.	Student's Email id :																
_																	
4.	Father'	s / Mother's	Name														
5.	Permar	nent resident	ial address	for cor	resp	ono	lenc	e _									
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6.	Date of	f Birth (by C	hristian era	a)					7.	Se	x: N	[ale/]	Femal	e [			
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8.	Give d	etails of subj	ject(s) reap	pearing	g foi	<b>:</b> :											
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	2						л y-1										
		CFPP12	Cookery														
	3	CFPP13	Larder Pı	actical-	-l												

### REAPPEAR EXAMINATION FEE

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

Hygiene

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

Bakery & Patisserie Theory-I

**Equipment Maintenance** 

Bakery & Patisserie Practical-I

4

5

6

CFPP14

CFPP15

CFPP16

CFPP17

9.	Give deta	ils of examina	tion and related fees paid:	Examination Fee  Late Fee (if any)  Total Fee						
10.	<ul> <li>a) Certified that the name as written above by me is correct.</li> <li>b) I hereby declare that the statements made in the application are true to the be of my knowledge and belief.</li> <li>c) Certified that I have read and understood the Examination Rules of the National Council.</li> </ul>									
		ational Coun		(Signature of the candidate)						
		C	ERTIFICATE BY PRINC	IPAL						
1.	Certified	that admission	to the semester was grante	d as per NCHM&CT Rules.						
2. Certified that Mr./Ms is/was a bonafide full t student of this institution and has satisfactorily completed the prescribed course studies as laid down by the Council.										
3.			ation Rules have been r having understood the san	explained to the candidate and ne.						
4.	after satis	sfying that h ion Rules of	e/she fulfils the attendance	ill be issued to the candidate only ce requirements as laid down in otel Management (mandate form						
5.	Rs No		remitted to the Counc	te is included in the amount of cil through RTGS vide UTR/IMPS in favour of National Council andate form attached).						
	Examinat Late Fee ( Total Fee	(if any) R	SS							
Date:			Pı	rincipal's signature with office seal						
			FOR NCHMCT USE							
1.Exa	e Fee: Rs		Examination particulars Checked & Verified	Examination Hall Admission ticket issued.						
	De	ealing Assistant	Executive Officer (S)	Assistant Director (T)						

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

# **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2024-2025

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

### (RE-APPEAR CANDIDATES ONLY)

LAST DATE	LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE									Paste Passport			
Without	t late fee		:	09/10/2	2024				Size Photograph.				
	te fee of R			24/10/2					(Do not staple)				
With lat	te fee of R	s. 1000/-	:	08/11/2	2024				(DO IIC	n stapie)			
									(Photograph to be				
Council Roll N	No	Inst	titute Nan	ne					attested by Principal)				
									1 1111	cipai)			
								_					
1. Name of	the candid	ate in Eng	lish (full	name in	BLO	OCK	C lette	rs)					
First name			Middle	name		,			S	urname			
(Please note t	hat the name	written abo	ve should b	e same as	s give	n in :	your +2	CBSE/E	Board Cert	ificate)			
2. Student'	s Mobile N	lo.											
3. Student'	s Email id	:											
4. Father's	/ Mother's	Name											
5. Permane	ent resident	ial addres	s for corr	esponde	ence								
		Pin:		A	Alter	nate	/Land	line No	•				
6. Date of 1	Birth (by C	Christian e	ra)				7. S	ex: Mal	e/Femal	e			
8. Give det	ails of sub	iect(s) rea	nnearing	for									
o. Give det	مانه ۱۵ منان	ject(s) reaj	ppcaring .	101.									
S.No.	Subject		Sub	ject				P	lease tic	k			
	Code						ľ	Aid Term		d Term			
									Theory	Practic	al		
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2	AOM12	Front Of	fice Opera	ations									
3	AOM13	Superviso	ory Mana	gement									
4	AOM14	Accounta	ancy										
5	AOM15	Commun	nication								$\exists$		

### REAPPEAR EXAMINATION FEE

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

**Industrial Training** 

AOM31

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

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9.	Give	details of examina	tion and related fees paid:	Examination Fee		
10.	<ul> <li>a) Certified that the name as written above by me is correct.</li> <li>b) I hereby declare that the statements made in the application are true to the of my knowledge and belief.</li> <li>c) Certified that I have read and understood the Examination Rules of the control of the contr</li></ul>					
	Date:	National Coun		(Signature of the candidate)		
		C	ERTIFICATE BY PRINC	IPAL		
1.	Certif	ned that admission	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.					
5.	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).  Examination Fee Rs					
Date				rincipal's signature with office seal		
			FOR NCHMCT USE			
1.Exa	e Fee: F	Rs Rs Rs	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.		
		Dealing Assistant	Executive Officer (S)	Assistant Director (T)		

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

## **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 FEES – Rs.500/- ONE TIME (This form must be routed through institute concerned only)			Paste Passport Size Photograph.			
			(Do not staple)			
Council Roll No	Institute Name		(Photograph to be attested by Principal)			
1. Name of the candidate in	English (full name in BLOC)	K letters)				
First name	Middle name		Surname			
(Please note that the name writter	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	e					
	dress for correspondence :					
	Pin: Alternate					
6. Date of Birth (by Christia	Date of Birth (by Christian era) 7. Sex: Male/Female					
	Centre opted for appearing in					
Candidate's signature						
Date:	Princ	cipal's signatı	are with office seal			
	FOR NCHMCT USE					
Fee received	Examination particulars Checked & Verified		mination Hall ion ticket issued.			
Dealing Assistant	Executive Officer (S)		Assistant Director (T)			