It is informed that **Special Supplementary Term-End Examination of Semester- VI** of the month of July **finals week** will be conducted in. This examination will be conducted only **IGNOU** It is being organised for the students enrolled under.

This is to inform you that the **Special Supplementary Term-End Examination for Semester VI** is scheduled to be conducted during the **last week of July** . This examination is **exclusively for students enrolled under IGNOU** .

Only those students can appear in this examination whose **There are no Reappear/Backlog papers** from **Semester- I** to **Semester- V and only Semester- VI has Reappear papers.** Only such students will be eligible to appear in this special supplementary term-end examination.

The examination is open **only to those students who have no reappear/backlog papers in Semesters I to V and have reappear papers only in Semester VI.** Such students are eligible to appear in this Special Supplementary Term-End Examination.

Special Supplementary Examination Form And **Examination Datesheet** Attached for reference.

The **Special Supplementary Examination Form** and the **Examination Datesheet** are enclosed herewith for your ready reference.

You are requested to ensure that eligible students complete their examination forms by the deadline. We solicit your cooperation in notifying concerned students promptly and ensuring that they submit their examination forms within the stipulated timeframe.

You are requested to ensure that all eligible students submit their examination forms on or before the prescribed last date i.e. 23.07.2026 through return email. Your cooperation in informing the concerned students and ensuring timely submission of the examination forms will be highly appreciated.

Important Instructions

(A) Pre-requisites for Submission of Examination Form

- The course registration must be valid and the time-bar must not have expired.
  The registration for the concerned courses must be valid and should not be time-barred.
- Fill out the examination form carefully and with correct information. No modifications will be accepted after submission.
  Examination forms must be filled carefully and accurately. No corrections or amendments will be entertained after submission.
- The prescribed last date must be strictly adhered to. Late applications will not be accepted under any circumstances.
  The prescribed deadline must be adhered to strictly. No requests for late submission will be entertained under any circumstances.

राष्ट्रीय होटल प्रबन्ध एंव केटरिंग टेक्नोलॉजी परिषद्
(पर्यटन मंत्रालय, भारत सरकार के अधीन स्वायत्तशासी निकाय)
NATIONAL COUNCIL FOR HOTEL MANAGEMENT AND CATERING TECHNOLOGY
(An Autonomous Body under Ministry of Tourism, Govt. of India)
A-34, SECTOR-62, NOIDA – 201309 (Uttar Pradesh)
e-mail: dirs-nchm@nic.in

DATE SHEET

SPL. SUPPLEMENTARY END TERM EXAMINATIONS - ACADEMIC YEAR 2025-2026

3-YEAR B.SC. HHA - SEMESTER - VI

(FOR RE-APPEAR & FAIL CANDIDATES - NCHM-IGNOU COMPONENTS ONLY)

Date & Day	Subject Code	Subject	Duration	From	To
27.07.2026 MONDAY	BHM351	ADVANCE FOOD PRODUCTION OPERATIONS –II	03 HRS.	09:30 AM	12:30 PM
28.07.2026 TUESDAY	BHM352	ADVANCE FOOD & BEVERAGE OPERATIONS –II	03 HRS.	09:30 AM	12:30 PM
29.07.2026 WEDNESDAY	BHM353	FRONT OFFICE MANAGEMENT-II	03 HRS.	09:30 AM	12:30 PM
30.07.2026 THURSDAY	BHM305	FOOD & BEVERAGE MANAGEMENT	03 HRS.	09:30 AM	12:30 PM
31.07.2026 FRIDAY	BHM306	FACILITY PLANNING	03 HRS.	09:30 AM	12:30 PM
01.08.2026	**SATURDAY**				
02.08.2026	**SUNDAY**				
03.08.2026 MONDAY	BHM354	ACCOMMODATION MANAGEMENT-II	03 HRS.	09:30 AM	12:30 PM

Dr. SATVIR SINGH
DIRECTOR (STUDIES)

Dated: 08th July 2026

National Council for Hotel Management & Catering Technology

A-34, SECTOR 62, NOIDA 201309

SEM-VI SPL. SUPPLEMENTARY EXAMINATION FORM

Academic Year 2025-2026

COURSE TITLE: **THREE-YEAR B.Sc. IN H&HA**

(FOR FAIL & RE-APPEAR CANDIDATES OF NCHM-IGNOU ONLY)

LAST DATE FOR SUBMISSION OF EXAM FORMS
IN THE INSTITUTE - **23.07.2026**

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)

Council Roll No | | | | | | | | | | |

Name of the Institute_____

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 CBSE/Board Certificate)

2. Father's / Mother's Name _____

3. Permanent residential address for correspondence

_____

_____Pin: _____ Mobile: _____

Email id: _____

4. Date of Birth (by Christian era) _____5. Sex: Male/Female

6. Give details of subject(s) reappearing for:

Sl No.	Subject Code	Subject	Please tick		
			Mid Term	**Practical**	**End-Term**
1	BHM351	ADVANCE FP OPERATIONS –II			
2	BHM352	ADVANCE F & B OPERATIONS –II			
3	BHM353	FRONT OFFICE MANAGEMENT-II			
4	BHM354	ACCOMMODATION MANAGEMENT-II			
5	BHM305	FOOD & BEVERAGE MANAGEMENT			
6	BHM306	FACILITY PLANNING			
7	BHM309	RESEARCH PROJECT	x		x

RE-APPEAR EXAMINATION FEE

- Theory @ Rs.300/- per subject (To be remitted to NCHMCT)
- Practical @ Rs.500/- per subject (retained by institute)

3-YEAR B.Sc. IN H&HA

7. Give details of examination 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: _____ (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.……
Total Fee: Rs..……...

Date: _____ Principal's signature with office seal

FOR NCHM&CT USE

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

3-YEAR B.Sc. IN H&HA