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

**THIS FORM IS REQUIRED TO BE SENT TO NATIONAL COUNCIL
LATEST BY FRIDAY THE 17TH JULY 2015**
(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   :   IHMCT & AN _____

4. Student's Address for   :   _____
   Correspondence   _____
                                       _____
                                       _____ Pin: _____

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

FEE: Rs.200/- (Two hundred) per subject.

Demand draft No. _____ dated _____ for ` _____

drawn on (Bank) _____ branch in favour of

National Council for Hotel Management & Catering Technology, Noida is attached.

Date: _____   Candidate's signature

FOR NCHM&CT USE

An amount of Rs. _____ towards the verification fee received.

Cashier