STATE INSTITUTE OF HOSPITALITY MANAGEMENT

VARAKAAL BEACH KOZHIKODE

(Jointly Sponsored by Government of India and Government of Kerala)

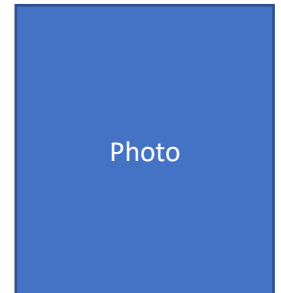**(Affiliated to National Council for Hotel Management and Catering Technology, Noida)**

NCHMCT

ON LINE APPLICATION FOR ADMISSION TO DIPLOMA COURSE

Academic Year: 2020-2021

Please Tick the course	FP	BC	FBS	HK	FO

Photo

(refer to page-2 for the expansion of course abbreviation)

Name of the Applicant: Mr/Ms …………………………………………

…………………………………………. (in Capital letters)

Date of Birth: ---------------------------------(d/m/y)

Age as on 1.7.2020:   ----------------------------- Community: _____

Father's Name   and Occupation: _____

_____

Permanent Address with

Pincode: _____

_____

_____

Parents Mobile Number: _____

Local Guardian's address
With Pincode: _____

_____

_____

_____

Educational Qualification

Qln	Board	Name of the School	Year Passed	Marks Scored/ out of	% of Marks
10+2					

Languages Known

Languages	Read	Write	Speak

Contact Number of the Candidate --------------------------------------

Email id of the candidate (active mail id is mandatory)

Aadhar No of the candidate:

Bank Account Number of the candidate:

(**Code: FP:** *Food Production,* **BC:** *Bakery and Confectionery,* **FBS:** *Food and Beverage Service,* **HK:** *Housekeeping Operation,* **FO:** *Front Office Operation*)

DECLARATION

1) By the Applicant:

I am submitting application for admission to Diploma in

_____. I meet all the eligibility

criteria. I hereby certify that the information furnished is true to the best of my knowledge. I also understand that if any of the documents/information furnished proved to be false, my application will be rejected or I will be dismissed from the Institute and the fee paid will be forfeited.

I will abide by the rules and regulations of the Institute in force, if admitted.

Date: Signature of the Applicant

2) By the Parent

I have understood the fee structure and the mode of payment of fee. I shall be responsible for the payment of all fees/dues of my son/daughter Mr/Ms._____ on time.

Date: Signature of the Parent

APPLICATION FEE PAYMENT DETAILS

(To be filled in by the candidate. Application feeRs.200 for SC/ST categories and Rs 400/ for other categories)

Amount Paid: NEFT Payment details

                                                             Transaction Number

                                                             Date

Status of Application: Complete   / Incomplete

(Pls tick)

Remarks:

The candidate is eligible/ not eligible for admission. (If not eligible, please specify the

reason)_____

Check list:

1. Application form: All information called for is furnished and signed by the Candidate and the Parent
2. Mark sheet of 12th Std
3. Transfer certificate
4. Medical Certificate
5. Community Certificate
6. NEFT payment details

Name of the Scrutiny Staff: Signature

                                                            Date

Office Superintendent   Principal

Date   Date