

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)

## ON LINE APPLICATION FOR ADMISSION TO POST GRADUATE DIPLOMA IN ACCOMMODATION OPERATIONS AND MANAGEMENTCOURSE

Academic Year: 2020-2021

Photo

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 Occ	cupation:					
Permanent Address with						
Pincode:						

**Parents Mobile Number:** 

Local Guardian's address With Pincode:

## **Educational Qualification**

Qln	Board/University	Name of the School/College	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:** 

## DECLARATION

#### 1) By the Applicant:

I am submitting application for admission to Post Graduate Diploma accommodation Operations and Management .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

# FOR OFFICE USE ONLY

(to be filled in by the scrutiny staff)

## 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. Degree Certificate
- 3. Transfer certificate
- 4. Medical Certificate
- 5. Community Certificate
- 6. NEFT payment details

Name of the Scrutiny Staff:

Date

Principal

Date

Signature

Office Superintendent

Date