



**Filling of Residual Seats - Admission (First Semester) of 6-Semester B.Sc. Hospitality & Hotel  
Administration Program Academic Session 2019-20**

<b>Vacant Seat Position</b>	
<b>2019-20</b>	
<b>Category</b>	<b>Seat</b>
<b>SC</b>	<b>8 (Eight)</b>
<b>ST</b>	<b>5 (Five)</b>

Dear Candidate,

This is to inform you that seats are vacant as mentioned above for the admission to first year of 6-semester B.Sc. Hospitality & Hotel Administration Program of the academic year 2019-20 in SIHM Kozhikode. If you are interested to take admissions in SIHM Kozhikode, please fill the admission forms and attach the required documents and send it to the Office of SIHM Kozhikode or forward to the mail id : **[sihmcalicut@gmail.com](mailto:sihmcalicut@gmail.com)**

**IMPORTANT DATES:**

- **Last Date of Submission of Application: 22<sup>nd</sup> July, 2019**
- **Publication of Merit List: 23<sup>rd</sup> July, 2019**
- **Physical Reporting, Document Verification & Deposition of Fees: 24<sup>th</sup> July, 2019**

**ELIGIBILITY CRITERIA:**

1. Candidate should have passed 10+2 or equivalent examination from recognized Board with English as one of the compulsory subject with minimum 50% marks in aggregate from a recognized Board.
2. Candidate should submit age proof certificate which is given in the secondary passed certificate. The age should not be more than 28 Years (SC/ST Category) as on 01-07-2019.
3. Category/Caste proof certificate from the competent authority as per the details given in JEE Information Brochure.
4. Candidate should submit medical certificate from registered medical practitioner in a prescribed format (As in the JEE Information Brochure).
- 5. The selection of the candidates will be purely based on the merit of aggregate marks in 12th exam.**

Sd/-  
Principal

Affix recent  
passport size  
photograph

**APPLICATION FORM FOR FILLING RESIDUAL SEATS**

- 1) Name of applicant : \_\_\_\_\_
- 2) Father's Name:  
(as per Secondary Certificate) \_\_\_\_\_
- 3) Mother's Name:  
(as per Secondary Certificate) \_\_\_\_\_
- 4) Category (Gen/SC/ST):  
(Please tick)  I  SC  ST
- 5) Date of Birth:  
(as given in the Secondary School Certificate)   (Date)   (Month)     (Year)
- 6) Age as on 1<sup>st</sup> July 2019:   (Years)   (Months)   (Days)
- 7) Marks obtained in 10+2 or equivalent examination (English + other subjects):

S.No.	Subject	Max. Marks	Marks Obtained	% of Marks	Year of Passing	Name of Board
1.	English					
2.						
3.						
4.						
5.						
<b>Total:</b>						

- 8) Hostel required (please tick):  Yes  No  
(if available)
- 9) Enclosed attested copies of testimonials: 10<sup>th</sup>  10+2 or equivalent  Category certificate   
(scanned copies) (please tick)

**Affirmation / Declaration**

That above particulars are true to the best of my knowledge and belief. I will submit proof of the same on the date of physical reporting at the Institute.

\_\_\_\_\_  
(Signature of the Candidate)

Correspondence Address: \_\_\_\_\_

Date: \_\_\_\_\_ Place: \_\_\_\_\_

Mobile: \_\_\_\_\_

e-mail: \_\_\_\_\_

