## National Council for Hotel Management & Catering Technology A-34, SECTOR 62, NOIDA 201309

## SEM-VI SUPPLEMENTARY EXAMINATION FORM

(Only such candidates are eligible to appear in these exams who have NO reappear in their SEM I, II, III/IV subjects)

Academic Year 2021-2022

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

(FOR FAIL & RE-APPEAR CANDIDATES ONLY)

Last date for submission of exam forms in the institute - 20.06.2022

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)

Cou	Council Roll No Name of the Institute			Principal)		
1.	Name of the can	didate in English (full name in	BLOCK letters)			
	First name	Middle name		Surname		
	(Please note that the n	ame written above should be same as	given in your +2 CBSE/Bo	oard Certificate)		
2.	Father's / Moth	er's Name				
3.	Permanent residential address for correspondence					
		D,	N. 1.1			
		Pin:	Mobile:			
	Email id:					
4.	Date of Birth (b	y Christian era)	5. Sex: Male/F	Female		
6.	Give details of	subject(s) reappearing for:				

Sl	Subject	Subject	Please tick		
No.	Code		Mid	Practical	End-
			Term		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)

7.	Give o	letails of examina	tion and related fees paid:	Examination Fee Supl exam fee <b>Total Fee</b>	+ 1000/-	
8.	<ul><li>a) Certified that the name as written above by me is correct.</li><li>b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.</li></ul>					
	c)	National Counc	I have read and understocil.	ood the Examinat	ion Rules of the	
	Date:		(Sign	nature of the candid	date)	
		C	ERTIFICATE BY PRINC	IPAL		
1.	Certifi	ed that admission	to the semester was grante	d as per NCHM&0	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).					
	Exami Total l		S			
Date:			Princi	pal's signature witl	n office seal	
			FOR NCHM&CT USI	E		
1.Exa	Fee: R	S S S	Examination particulars Checked & Verified		ition Hall icket issued.	
		Dealing Assistant	Executive Officer (S)	A	ssistant Director (T)	