

Application No :

Application Fees Paid Receipt No..... & Date :.....

APPLICATION FOR ADMISSION TO
1 ½ Year DIPLOMA COURSE IN FOOD PRODUCTION /
BAKERY & CONFECTIONERY / FRONT OFFICE /
HOUSEKEEPING / FOOD & BEVERAGE SERVICE/
CERTIFICATE COURSE IN PROFESSIONAL BAR
TENDING

AT THE INSTITUTE OF HOTEL MANAGEMENT CATERING
TECHNOLOGY & APPLIED NUTRITION, TARAMANI,
CHENNAI 600 113.

For the Academic Year-2024-25

(Separate Application should be registered for each Course)

(Self attested copies of the Certificates only to be enclosed)

(Latest Passport size
Photograph to be affixed)

1.	Course Applied for (Block Letters)		
2.	Name of Candidate (Block Letters) (As entered in SSLC / HSC Certificate)		
3.	Date of Birth and Age (Self attested copies of Certificate to be enclosed)		
4.	Community (Whether SC/ST) If yes, Self Attested copies of Certificate to be enclosed		
5. a)	Father's Name & Occupation:	
b)	Father's Phone Number :	
c)	Father / Mother email ID :	
6. (a)	Prescribed qualifying examination passed with Total marks and percentage of marks. (Attested copy of mark list of HSC to be enclosed)	Minimum Marks	Maximum Marks
		HSC (10+2)	
		Appearing Year	
(b)	Whether passed the qualifying examination in First Attempt	10+2 / H.Sc: Yes / No	
7.	Nationality		
8.	Aadhar Card No of the Student: (Self attested copy of Aadhar Card to be enclosed)		

Contd.,

9.	Permanent Address of Candidate for Communication	Pin Code: Telephone No: Mobile No:
10.	Candidate Mobile No. & Email ID

DECLARATION

I hereby declare that the above particulars furnished in the application are true and correct to the best of my knowledge.

Place: Signature of Applicant.....

Date: Name in BLOCK Letters.....

ENCLOSURES

- 1) 12th standard Mark sheet Copy
- 2) Transfer Certificate copy
- 3) Aadhar Card Copy
- 4) Community & Income Certificate (SC / ST Candidate Only)
- 5) Nativity Certificate (SC/ST Candidate only)
- 6) Medical Certificate
- 7) Bank Passbook

Note :

- Candidate has to send print out of the filled in online application form along with fees of Rs.400/- (Rs.200/- for SC/ST) through Demand draft drawn in favour of "THE PRINCIPAL, IHM CHENNAI" and relevant documents, must reach IHM, CHENNAI
- Candidates will be intimated about the reporting date, in the Institute website www.ihmchennai.org for certificate verification process.

होटल प्रबंधन खानपान प्रौद्योगिकी और अनुप्रयुक्त पोषण संस्थान

INSTITUTE OF HOTEL MANAGEMENT CATERING TECHNOLOGY & APPLIED NUTRITION

(Ministry of Tourism, Govt. of India) (Affiliated to NCHMCT, Noida & IGNOU, New Delhi)

IV Cross Street, C.I.T. Campus, TTTI-Taramani PO : Chennai.600 113

(Next to MGR Govt. Film Institute & opp. Indira Nagar Rly. Station on Tidel Park Road)

Off: 044-22542029 Tel/ Fax: 044-22541615

Email: ihmchen@dataone.in, ihmtaramani@gmail.com : Website. www.ihmchennai.org



MEDICAL CERTIFICATE

(To be completed and signed by a registered MBBS Doctor and presented by the candidate at the time of admission)

Certified that I have in general and also in regard to following infectious diseases examined

Mr / Ms..... (whose signature is given below) Son /

Daughter of Sh..... Resident of

Disease	Finding
a. Infectious skin diseases	
b. Psoriasis Foliate	
c. Tuberculosis	
d. Trachoma	
e. Venereal disease	
f. HIV	
g. Allergies if any	

and find that he / she is not suffering from any of the above diseases.

I also certify that after examination I find that Mr. / Ms..... is fit to

undergone course of study in

(Signature of Candidate)

Signature of Registered Medical Practitioner

Seal _____

Registration No. _____