

होटल प्रबंध खानपान प्रौद्योगिकी एवं पोषण आहार संस्थान
1100 आवास गृह, भोपाल-462016

क्रं. हो.प्र.सं./प्रशि./20/1241

भोपाल, दिनांक 02.07.2020

आदेश

The last date for submission of examination form and fee has been extended till **10.07.2020**. Fee details are as follows:-

S. No.	Semester	Fee	One time fee	Centre Change
1.	II nd , IV th , VI th & V th Semester	Rs. 300/- Theory Rs. 500/- Practical	Rs. 1000/-	Rs. 500/- (for pass out student)
2.	CCK II nd semester	Rs. 300/- Theory Rs. 500/- Practical	Rs. 1000/-	

All concerned students, who have not submitted their exam form and fee in the stipulated dated in March 2020, are hereby directed to submit their exam form and above mentioned fee on or before **10.07.2020**.

Form and fee submission mode:

- Institute website: www.ihmbhopal.ac.in पर उपलब्ध HDFC Bank के शुल्क भुगतान लिंक के माध्यम से शुल्क का भुगतान कर शुल्क रसीद एवं परीक्षा फॉर्म फोटो सहित email ID: training@ihmbhopal.ac.in पर Scan कर उक्त वर्णित तिथि के अंदर भेजें।

**Sd/-
प्राचार्य**

क्रं. हो.प्र.सं./प्रशि./20/1241-1241/1-6

भोपाल, दिनांक 02.07.2020

प्रतिलिपि सूचनार्थ :-

1. श्री पी.के. मोदी, विभाग प्रमुख, हो.प्र.सं. भोपाल।
2. श्रीमती आशा कोलेकर, वरिष्ठ व्याख्याता, हो.प्र.सं. भोपाल।
3. लेखा विभाग, हो.प्र.सं. भोपाल।
4. सभी व्याख्यातागणों को सूचनार्थ
5. सभी छात्रों को सूचनार्थ (सूचना पटल)।
6. वेबसाइट प्रदर्शन।

**Sd/-
प्राचार्य**

National Council for Hotel Management & Catering Technology

A-34, SECTOR 62, NOIDA 201309

EVEN SEMESTER END TERM EXAMINATION FORM

Academic Year 2019-2020

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

(FOR RE-APPEAR CANDIDATES)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE	Paste Passport Size Photograph. (Do not staple) (Photograph to be attested by Principal)	
Without late fee		: 28.02.2020
With late fee of Rs. 500/-		: 13.03.2020
With late fee of Rs.1000/-		: 27.03.2020
Council Roll No	Name of the Institute	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text" value="IHM, BHOPAL"/>	

1. Name of the candidate in English (full name in BLOCK letters)

First name	Middle name	Surname
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Father's Name _____

3. Permanent residential address for correspondence

Pin: _____ Phone: _____

4. Date of Birth (by Christian era) _____ 5. Sex: Male/Female

6. Give details of subject(s) reappearing for (*Indicate T for Theory – P for Practical*)

S.No.	Subject Code	Subject	Tick (✓) Re-appear subject	
			Mid-Term	End-Term
1	BHM151	FC IN FOOD PRODUCTION-II		
2	BHM152	FC IN FOOD & BEVERAGE SERVICE-II		
3	BHM153	FC IN FRONT OFFICE-II		
4	BHM154	FC IN ACCOMMODATION OPERATIONS-II		
5	BHM117	PRINCIPLES OF FOOD SCIENCE		
6	BHM108	ACCOUNTANCY		
7	BHM109	COMMUNICATION		
RE-APPEAR EXAMINATION FEE				
Theory @ Rs.300/- per subject			Practical @Rs.500/- per subject	

7. Give details of examination and related fees paid: Examination Fee
 Late Fee (if any)
Total Fee

8. a) Certified that the name as written above by me is correct.
 b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
 c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&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 (Mandate Form attached) in favour of National Council for Hotel Management & Catering Technology.

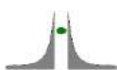
Examination Fee Rs.....
 Late Fee (if any) Rs.....
 Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ Dealing Assistant	Examination particulars Checked & Verified Executive Officer (S)	Examination Hall Admission ticket issued. Assistant Director (T)
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EVEN SEMESTER END-TERM EXAMINATION FORM
Academic Year 2019-2020

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

(FOR RE-APPEAR CANDIDATES)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE	
Without late fee	: 14.02.2020
With late fee of Rs.500/-	: 28.02.2020
With late fee of Rs.1000/-	: 13.03.2020

Paste Passport
Size Photograph.

(Do not staple)

(Photograph to be
attested by
Principal)

Council Roll No	Name of the Institute <u>IHM, BHOPAL</u>																
<table border="1" style="width: 100%;"> <tr> <td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td> </tr> </table>																	

1. Name of the candidate in English (full name in BLOCK letters)

First name	Middle name	Surname																																																			
<table border="1" style="width: 100%;"> <tr> <td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td> </tr> </table>																		<table border="1" style="width: 100%;"> <tr> <td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td> </tr> </table>																		<table border="1" style="width: 100%;"> <tr> <td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td><td style="width: 5px;"> </td> </tr> </table>																	

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Father's Name _____

3. Permanent residential address for correspondence

Pin: _____ Phone: _____

4. Date of Birth (by Christian era) _____ 5. Sex: Male/Female

6. Give details of re-appear subjects (not for regular candidates):

S.No.	Subject Code	Subject	Tick	
			Mid Term	End Term
1	BHM201	Food Production Operations		
2	BHM202	Food & Beverage Operations		
3	BHM203	Front Office Operations		
4	BHM204	Accommodation Operations		
5	BHM205	Food & Beverage Controls		
6	BHM206	Hotel Accountancy		
7	BHM207	Food Safety & Quality		
8	BHM208	Industrial Training		

REAPPEAR EXAMINATION FEE
Theory @ Rs.300/- per subject Practical @ Rs.500/- per subject

7. Give details of examination and related fees paid: Examination Fee
 Late Fee (if any)
Total Fee
8. a) Certified that the name as written above by me is correct.
 b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
 c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&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).

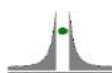
Examination Fee Rs.....
 Late Fee (if any) Rs.....
 Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ Dealing Assistant	Examination particulars Checked & Verified Executive Officer (S)	Examination Hall Admission ticket issued. Assistant Director (T)
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National Council for Hotel Management & Catering Technology

A-34, SECTOR 62, NOIDA 201309

EVEN SEMESTER END-TERM EXAMINATION FORM

Academic Year 2019-2020

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

(FOR REGULAR & RE-APPEAR CANDIDATES)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE		
Without late fee	:	14.02.2020
With late fee of Rs.500/-	:	28.02.2020
With late fee of Rs.1000/-	:	13.03.2020

Paste Passport
Size Photograph.

(Do not staple)

(Photograph to be
attested by
Principal)

Council Roll No

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Name of the Institute IHM, BHOPAL

1. Name of the candidate in English (full name in BLOCK letters)

First name	Middle name	Surname

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Father's Name _____

3. Permanent residential address for correspondence

_____ Pin: _____ Phone: _____

4. Date of Birth (by Christian era) _____ 5. Sex: Male/Female

6. Give details of re-appear subjects (not for regular candidates):

S.No.	Subject Code	Subject	Tick	
			Mid Term	End Term
1	BHM351	Adv. Food Production Operations-II		
2	BHM352	Adv. 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		

REAPPEAR EXAMINATION FEE

Theory @ Rs.300/- per subject

Practical @ Rs.500/- per subject



7. Give details of examination and related fees paid: Examination Fee
 Late Fee (if any)
Total Fee
8. a) Certified that the name as written above by me is correct.
 b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
 c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

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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).

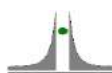
Examination Fee Rs.....
 Late Fee (if any) Rs.....
 Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ <div style="text-align: right;">Dealing Assistant</div>	Examination particulars Checked & Verified Executive Officer (S)	Examination Hall Admission ticket issued. Assistant Director (T)
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7. Give details of examination and related fees paid: Examination Fee
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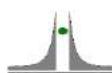
Examination Fee Rs.....
 Late Fee (if any) Rs.....
 Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.
Dealing Assistant	Executive Officer (S)	Assistant Director (T)



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

ODD SEMESTER END TERM EXAMINATION FORM

Academic Year 2019-2020

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

RE-APPEAR CANDIDATES

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE		
Without late fee	:	16.09.2019
With late fee of Rs. 500/-	:	03.10.2019
With late fee of Rs.1000/-	:	14.10.2019

Paste Passport Size Photograph. (Do not staple) (Photograph to be attested by Principal)

Council Roll No _____ Name of the Institute _____

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1. Name of the candidate in English (full name in BLOCK letters)

First name	Middle name	Surname

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Father's / Mother's Name _____

3. Permanent residential address for correspondence

 Pin: _____ Phone: _____

4. Date of Birth (by Christian era) _____ 5. Sex: Male/Female

6. Give details of subject(s) reappearing for:

S.No.	Subject Code	Subject	Please tick	
			Mid Term	End Term
1	BHM311	Advance Food Production Operations-I		
2	BHM312	Advance Food & Beverage Operations-I		
3	BHM313	Front Office Management-I		
4	BHM314	Accommodation Management-I		
5	BHM307	Financial Management		
6	BHM308	Strategic Management		
7	BHM309	Research Project		

REAPPEAR EXAMINATION FEE	
Theory @ Rs.300/- per subject (change of centre fee Rs.500/-)	Practical @ Rs.500/- per subject

Print on both sides Page 1 of 2

3-YEAR B.Sc. IN H&HA

7. Give details of examination and related fees paid: Examination Fee
 Late Fee (if any)
Total Fee
8. a) Certified that the name as written above by me is correct.
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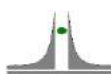
Examination Fee Rs.....
 Late Fee (if any) Rs.....
 Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ Dealing Assistant	Examination particulars Checked & Verified Executive Officer (S)	Examination Hall Admission ticket issued. Assistant Director (T)
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7. Give details of examination and related fees paid: Examination Fee
- Total Fee**
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Date: _____

(Signature of the candidate)

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Examination Fee: Rs.....

Total Fee: Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ <p style="text-align: right;">Dealing Assistant</p>	Examination particulars Checked & Verified <p style="text-align: center;">Executive Officer (S)</p>	Examination Hall Admission ticket issued. <p style="text-align: center;">Assistant Director (T)</p>
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