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

SUPPLEMENTARY EXAMINATION

SEM-V SEMESTER END TERM EXAMINATION FORM
Academic Year 2019-2020

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

RE-APPEAR CANDIDATES

ONE-TIME FEE: Rs.1000/-

Council Roll No ____________________________ Name of the Institute ____________________________

(Paste Passport Size Photograph. Do not staple)

(Photograph to be attested by)

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:

<table>
<thead>
<tr>
<th>Sl No.</th>
<th>Subject Code</th>
<th>Subject</th>
<th>Mid Term</th>
<th>Practical</th>
<th>End Term</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>BHM311</td>
<td>Advance Food Production operations-I</td>
<td></td>
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<tr>
<td>2</td>
<td>BHM312</td>
<td>Advance Food &amp; Beverage operations-I</td>
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<tr>
<td>3</td>
<td>BHM313</td>
<td>Front Office Management-I</td>
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<td>4</td>
<td>BHM314</td>
<td>Accommodation Management-I</td>
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<tr>
<td>5</td>
<td>BHM307</td>
<td>Financial Management</td>
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<td>6</td>
<td>BHM308</td>
<td>Strategic Management</td>
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REAPPEAR EXAMINATION FEE

Theory @ Rs.300/- (remitted to NCHMCT)  Practice @ Rs.500/- (retained by Institute)
Mid-Term fee @Rs.300/- (remitted by Institute)  Charge of Centre fee Rs.500/- (remitted to NCHMCT)
7. Give details of examination and related fees paid:
   Examination Fee ………………….
   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 fulfills the attendance requirements as laid down in Examination

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. ____________
   Total Fee: Rs. ________________

   Date: __________________________   Principal’s signature with office seal

FOR NCHM&CT USE

<table>
<thead>
<tr>
<th>Fee received</th>
<th>Examination particulars</th>
<th>Examination Hall</th>
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<tbody>
<tr>
<td>1. Exam Fee: Rs. ________________</td>
<td>Checked &amp; Verified</td>
<td>Admission ticket issued.</td>
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<td>2. Late Fee: Rs. ________________</td>
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<td>Total Fee: Rs. ________________</td>
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Dealing Assistant: __________________________   Executive Officer (S): __________________________   Assistant Director (T): __________________________