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)  

<table>
<thead>
<tr>
<th>Last Date for Submission of Forms in the Institute</th>
<th>Paste Passport Size Photograph.</th>
<th>(Do not staple)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Without late fee: 28.02.2020</td>
<td></td>
<td></td>
</tr>
<tr>
<td>With late fee of Rs. 500/-: 13.03.2020</td>
<td></td>
<td></td>
</tr>
<tr>
<td>With late fee of Rs.1000/-: 27.03.2020</td>
<td></td>
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</tbody>
</table>

Council Roll No: __________________________ Name of the Institute: __________________________

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 subject(s) reappearing for (Indicate T for Theory – P for Practical)

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Subject Code</th>
<th>Subject</th>
<th>Mid-Term</th>
<th>End-Term</th>
<th>Tick (✔) Re-appear subject</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>BHM151</td>
<td>FC IN FOOD PRODUCTION-II</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>BHM152</td>
<td>FC IN FOOD &amp; BEVERAGE SERVICE-II</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>BHM153</td>
<td>FC IN FRONT OFFICE-II</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>BHM154</td>
<td>FC IN ACCOMMODATION OPERATIONS-II</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>BHM117</td>
<td>PRINCIPLES OF FOOD SCIENCE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>BHM108</td>
<td>ACCOUNTANCY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>BHM109</td>
<td>COMMUNICATION</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

RE-APPEAR EXAMINATION FEE  

Theory @ Rs.300/- per subject  
Practical @ Rs.500/- per subject
7. Give details of examination and related fees paid:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Examination Fee</td>
<td>Rs. ..........</td>
</tr>
<tr>
<td>Late Fee (if any)</td>
<td>Rs. ..........</td>
</tr>
<tr>
<td><strong>Total Fee</strong></td>
<td>Rs. ..........</td>
</tr>
</tbody>
</table>

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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**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.

<table>
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<td>Rs. ..........</td>
</tr>
</tbody>
</table>

Date: ___________________ Principal's signature with office seal

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**FOR NCHM&CT USE**

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