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

EVEN SEMESTER END-TERM EXAMINATION FORM
Academic Year 2020-2021

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

(FOR RE-APPEAR CANDIDATES ONLY)

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE
Without late fee : 09.04.2021
With late fee of Rs. 500/- : 23.04.2021
With late fee of Rs.1000/- : 07.05.2021

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

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: ___________ Mobile: ___________

   Email id:

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>Tick (✓) Re-appear subject</th>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Mid Term (T)</td>
</tr>
<tr>
<td>1</td>
<td>BHM351</td>
<td>Adv. Food Production Operations-II</td>
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<tr>
<td>2</td>
<td>BHM352</td>
<td>Adv. F&amp;B Operations-II</td>
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<tr>
<td>3</td>
<td>BHM353</td>
<td>Front Office Management-II</td>
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<td>4</td>
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<td>Accommodation Management-II</td>
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<td>5</td>
<td>BHM305</td>
<td>Food &amp; Beverage Management</td>
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<td>6</td>
<td>BHM306</td>
<td>Facility Planning</td>
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<td>7</td>
<td>BHM309</td>
<td>Research Project</td>
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REAPPEAR EXAMINATION FEE

Theory @ Rs.300/- (remitted to NCHMCT)
Mid-Term fee @ Rs.300/- (retained by Institute)
Practical @ Rs.500/- (retained by institute)
Change of centre fee Rs.500/- (remitted to NCHMCT)
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

<table>
<thead>
<tr>
<th>Fee received</th>
<th>Examination particulars</th>
<th>Examination Hall</th>
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<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):