MARKS VERIFICATION FORM
(For NCHM&CT Component only)

SEM II of B.Sc. Program
REGULAR CANDIDATES
EVEN SEMESTER TEE – 2014-2015

NATIONAL COUNCIL FOR HOTEL MANAGEMENT & CATERING TECHNOLOGY
A-34, Sector 62, NOIDA 201 309.

THIS FORM IS REQUIRED TO BE SENT TO NATIONAL COUNCIL
LATEST BY THURSDAY THE 16TH JULY 2015
(Applications received after the last date will not be accepted)

1. Name in BLOCK letters (As in ADMIT CARD) : 
2. NCHM&CT Roll No. : 
3. Institute : IHMCT & AN 
4. Student’s Address for Correspondence : 
   
   Pin: 

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FEE: Rs.200/- (Two hundred) per subject.

Demand draft No. ____________________ dated _______________ for ‘__________________’

drawn on (Bank) ____________________ branch in favour of

National Council for Hotel Management & Catering Technology, Noida is attached.

Date: ____________________

Candidate’s signature

FOR NCHM&CT USE

An amount of Rs. ____________________ towards the verification fee received.

Cashier

National Council for Hotel Management & Catering Technology, Noida.

30/06/15