

INSTITUTE OF HOTEL MANAGEMENT

(An Autonomous Body under Ministry of Tourism, Government of India)

RAJBAGH, SRINAGAR – 190008

APPLICATION FOR DIRECT ADMISSION IN 3 YEARS B. SC. H&HA

(Provisional admission till final confirmation from NCHM,
Institute reserves the right to cancel the admission without assigning any reason whatsoever)

A. Personal Details:

Name _____

Date of Birth:

D	D	M	M	Y	Y	Y	Y

Gender: M F

Paste a recent
passport size
photograph

B. Permanent Address:

_____ Pin Code: _____

Email: _____ Mobile: _____

C. Parents/Guardians:

Father Name: _____ Occupation: _____

Phone No. Mobile: _____

Mother Name: _____ Occupation: _____

Phone No. Mobile: _____

D. Educational Background:

List all degree/diplomas from the last qualification to 10+2. Please indicate "Result Awaited" if you have just appeared for class 10+2 examination or equivalent examination:

Qualification	Name of the School/College	Name of the board	Completion Year	Marks/Grade
10 th				
10 + 2				

Your admission will be confirmed only after receipt of the authenticated certificates or marks sheets. Original documents to be furnished at the time of admission.

E. Work Experience (Optional):

List any job including summer employment during the past three years:

Organization Name	Duration	Designation	Job Responsibility

F. Source of Information:

Please tick one or more sources through which you learnt about this course:-

- Social Media: Facebook, Instagram, etc (please specify name) _____
- From newspaper/magazine article (please specify name) _____
- From family, friends etc _____
- From other sources (please specify) _____

G. Please attach the following Documents:

- Copy of class 10th & 12th marks sheet (Original & Xerox)
- 12th Character Certificate (Original & Xerox)
- Aadhaar Card (Xerox)
- 5 Passport Size photographs
- Rs. 20,000/- towards fee (To be transferred online/UPI)
- Copy of other qualifications
- Experience Certificate if applicable

I certify that all the information provided in the application is true, accurate and complete. I understand that withholding information or giving false information will invalidate my application.

Date:- _____

Signature of the Applicant: _____ Signature of Father/Mother/Guardian _____

Name of the Applicant: _____ Name of Father/Mother/Guardian _____

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FOR OFFICE USE ONLY

Mr./Ms. _____ S/o, D/o _____

R/o _____

Admitted in the Programme _____

For batch starting from _____

Admission Coordinator