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

# ODD SEMESTER END TERM EXAMINATION FORM Academic Year 2019-2020

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

### **REGULAR CANDIDATES**

Withou With la	LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE Without late fee : 16.09.2019 With late fee of Rs. 500/- : 03.10.2019 With late fee of Rs.1000/- : 14.10.2019										Paste Passport Size Photograph.  (Do not staple)													
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1.	Name	e of	the	can	ndid	ate:	in E	ngl		•			in B	LO	CK	let	ters	s)						
Firs	First name Middle name										Sur	nam	ie											
																					i			
2.	Father	er's	/ M	Ioth	ier's	Na	me								·									
										_Pi	n: _							Ph	one:					_
4.	Date	of ]	Birt	h (t	эу С	hris	stiar	era	a) _						_ 5	5.	Se	x: N	Iale/	Fem	ıale			
6.	Give	det	ails	of	exa	min	atio	n aı	nd ro	elat	ed f	ees	paic		Lat	e F	Fee	(if a	Fee ny)					

a)	Certified that	the name as written above by me is correct.									
b)	I hereby dec	lare that the statements made in the application are true to the best									
	of my know	edge and belief.									
c)	Certified t	at I have read and understood the Examination Rules of the									
	National C	ouncil.									
Date:		(Signature of the candidate)									
		CERTIFICATE BY PRINCIPAL									
Certif	ied that admis	sion to the semester was granted as per NCHM&CT Rules.									
		Is is/was a bonafide full time									
		tution and has satisfactorily completed the prescribed course of									
staare	s us luid dowl	by the council.									
Certified that Examination Rules have been explained to the candidate and undertaking											
obtain	led for naving	inderstood the same.									
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.											
		ollowing fee of the candidate is included in the amount of remitted to the Council through RTGS vide UTR/IMPS									
		dated in favour of National Council									
for Hotel Management & Catering Technology (mandate form attached).											
-		<b>D</b>									
		Rs									
Total	• • •	Rs									
I Otal	1 66	N3									
	b) c) Certificatuder studie Certification Ce	c) Certified the National Co  Date:  Certified that admiss  Certified that Mr./M student of this instituted sas laid down  Certified that Examinobtained for having the Certified that Admit satisfying that he/she Rules of National Co  Certified that the for Rs									

### FOR NCHM&CT USE

Fee received	Examination particulars	Examination Hall
1.Exam Fee: Rs	Checked & Verified	Admission ticket issued.
2.Late Fee: Rs		
Total Fee Rs		
Dealing Assistant	Executive Officer (S)	Assistant Director (T)

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

# ODD SEMESTER END TERM EXAMINATION FORM Academic Year 2019-2020

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

#### **RE-APPEAR CANDIDATES**

ithout late fee ith late fee of	out late fee : 14.10.2019   Si late fee of Rs.500/- : 28.10.2019									Paste Passport Size Photograph.  (Do not staple)							
C	Council Roll No Name of the Institute(P							(Photograph to be attested by Principal)									
Name of First name	the candid	ate in	n Eng		•			LO	CK	lett	ers)	)			C		
First name	Middle name								Surname								
(Please note t																	
	Birth (by C	Christ	ian er	ra) _												_	
S.No.	Subject						Subject	ct							Ple	ase	tick
	Code														Mid `erm		End Term
1	BHM111		FC IN FOOD PRODUCTION-I														
2	BHM112	FC	CINI	FOO	D 8	ξ BI	EVERA	ΔGE	SE	RV	ICE	E-I					
3	BHM113	FC	FC IN FRONT OFFICE-I														
4	BHM114	FC	FC IN ACCOMMODATION OPERATIONS-I														
5	BHM105	(A)	APPLICATION OF COMPUTERS														
6	BHM106	Н	OTEI	L EN	GII	NEE	RING										
7	BHM116	N	UTRI	TIO	N												
Theory	@ Rs.300/- 1	ner sul		REAF	PE	AR E	XAMII	NAT	ION			ical	@ R	s 500	)/- n	er sii	ıbject

7.	Examination Fee												
				Total Fee									
8.	a)	Certified that the	name as written above by	me is correct.									
	b)	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 understo	od the Examination Rules of the									
	National Council.												
	Date:		_	(Signature of the candidate)									
		CI	ERTIFICATE BY PRINC	IPAL									
1.	Certifi	ed that admission	to the semester was grante	d as per NCHM&CT Rules.									
2.	Certifi	ed that Mr./Ms.		is/was a bonafide full time									
	student of this institution and has satisfactorily completed the prescribed course of												
	studie	s as laid down by t	he Council.										
2	Certified that Examination Rules have been explained to the candidate and undertaking												
3.		ed for having unde	<u> </u>	led to the candidate and undertaking									
	Ootam	ca for having and	istood 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.	Certifi	Certified that the following fee of the candidate is included in the amount of											
٥.	Rs remitted to the Council through RTGS vide UTR/IMPS												
	No		dated	in favour of National Council									
	for Ho	tel Management &	c Catering Technology (ma	andate form attached).									
•													
	Exami	ination Fee Rs	S										
	Late F	Gee (if any) Rs	S										
	Total 1	Fee Rs	S										
Data			T).	singinal's signature with office soal									
Date:			r.	rincipal's signature with office seal									
			FOR NCHM&CT USI	Ξ									
Fee r	eceived		Examination particulars	Examination Hall									
	am Fee:	Rs	Checked & Verified	Admission ticket issued.									
2.Lat	te Fee:	Rs											
1 Ota			1	1									

Executive Officer (S)

Dealing Assistant

Assistant Director (T)

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

# ODD SEMESTER END TERM EXAMINATION FORM Academic Year 2019-2020

### COURSE TITLE: THREE-YEAR B.Sc. IN H&HA- SEMESTER- III NOT APPLICABLE FOR SEM-IV CANDIDATES

#### **RE-APPEAR CANDIDATES**

Withou	LAST DATE FOR SUBMISSION without late fee of Rs. 500/- with late fee of Rs.1000/-						OF FORMS IN THE INSTITUTE : 16.09.2019 : 03.10.2019 : 14.10.2019									Paste Passport Size Photograph.  (Do not staple)  (Photograph to be			
	Council Roll No Name of the Institute										attested by Principal)				7				
1. Firs	Name of the candidate in English (full name in BLOCK letters)  First name Middle name Surname																		
(P 2.	(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)  Father's / Mother's Name																		
3.	Permanent residential address for correspondence																		
						_Piı	ı: _						Pho	ne:					
4.	Date of 1	Birth (by C	Christia	n er	a) _					_	5.	Sex	: M	ale/	Fen	ıale			
6.	Give det	ails of subj	ject(s)	reap	pea	ring	for	:											
	S.No.	Subject	Code					S	ubje	ct						Plea	ase	tick	
																Mid Term		End Term	
	1	BHM			Food Production Operations														
	2	BHM			Food & Beverage Operations														
	3	BHM	203		Front Office Operations														
	4	BHM	204		Accommodation Operations														
	5	BHM	205					verage		itrol	S								
	6	BHM	206		Hote	el Ā	cco	untanc	y										
	7	BHM	207				•	/ & Qı		y									
	8	BHM	208		Industrial Training									1	· <u>-</u>				

Theory @ Rs.300/- per subject

Practical @ Rs.500/- per

A-34, Sector-62, Institutional Area, NOIDA – 201 309 e-mail: dirs-nchm@nic.in Telefax: 0120-2590605

7.	Give details of examination	on and related fees paid:	Examination Fee  Late Fee (if any)  Total Fee						
<ul> <li>a) Certified that the name as written above by me is correct.</li> <li>b) I hereby declare that the statements made in the application are true t of my knowledge and belief.</li> <li>c) Certified that I have read and understood the Examination Ru</li> </ul>									
	c) Certified that I National Counc		ood the Examination Rules of the						
	Date:		(Signature of the candidate)						
	CE	ERTIFICATE BY PRINC	IPAL						
1.	Certified that admission	to the semester was grante	d as per NCHM&CT Rules.						
2.		n and has satisfactorily of	is/was a bonafide full time completed the prescribed course of						
3.	Certified that Examination obtained for having under		ned to the candidate and undertaking						
4.	satisfying that he/she ful		be issued to the candidate only after ments as laid down in Examination mandate form attached).						
5.	Rs	remitted to the Counc	ate is included in the amount of cil through RTGS vide UTR/IMPS in favour of National Council						
	for Hotel Management &	Catering Technology (ma	andate form attached).						
	Late Fee (if any) Rs								
Date:		P	rincipal's signature with office seal						
		FOR NCHM&CT USI	E						
1.Ex	received am Fee: Rs re Fee: Rs I Fee Rs	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.						
	Dealing Assistant	Executive Officer (S	S) Assistant Director (T)						

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

### **ODD** SEMESTER END TERM EXAMINATION FORM Academic Year 2019-2020

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

#### **RE-APPEAR CANDIDATES**

LAST DATE I Without late fee With late fee of I With late fee of I	Rs. 500/-	ON OF FORMS IN THE INSTITUTE : 16.09.2019 : 03.10.2019 : 14.10.2019	Paste Passport Size Photograph.  (Do not staple)							
Co	ouncil Roll No	Name of the Institute	(Photograph to be attested by Principal)							
1. Name of First name	the candidate in	English (full name in BLOCK letters)  Middle name	Surna	ame						
(Please note the	(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)									
2. Father's	/ Mother's Nam	e								
3. Permane	Permanent residential address for correspondence									
		Pin: Phone	e:							
4. Date of I	Birth (by Christi	an era) 5. Sex: Male	e/Female [							
6. Give det	ails of subject(s	reappearing for:								
S.No.	Subject Code	Subject	Pleas	e tick End Term						
	DHM211	Advance Food Production Operations-I								
1	BHM311	1								
1 2	BHM311 BHM312	Advance Food & Beverage Operations-I								
		1								
2	BHM312	Advance Food & Beverage Operations-I								
2 3	BHM312 BHM313	Advance Food & Beverage Operations-I Front Office Management-I Accommodation Management-I Financial Management								
2 3 4	BHM312 BHM313 BHM314	Advance Food & Beverage Operations-I Front Office Management-I Accommodation Management-I								

Theory @ Rs.300/- per subject (change of centre fee Rs.500/-) Practical @ Rs.500/- per subject

Print on both sides

7.	Give details of examina	tion and related fees paid:	Examination Fee									
8.	a) Certified that the	e name as written above by										
·.		<u> </u>	the application are true to the best									
	•		the approarion are true to the best									
	of my knowledge and belief.  Cortified that I have read and understood the Evamination Pules of the											
	c) Certified that I have read and understood the Examination Rules of the National Council.											
	Date:		(Signature of the candidate)									
	C	ERTIFICATE BY PRINC	IPAL									
1.	Certified that admission	to the semester was grante	d 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.	satisfying that he/she fu		be issued to the candidate only after ments as laid down in Examination									
5.	Certified that the following fee of the candidate is included in the amount of											
			cil through RTGS vide UTR/IMPS									
			in favour of National Council									
		& Catering Technology (ma										
	Examination Fee R	ks										
		ls										
	• • •	As										
Date:		_ Pı	rincipal's signature with office seal									
		FOR NCHM&CT USI	E									
Fee	received	Examination particulars	Examination Hall									
	am Fee: Rs	Checked & Verified	Admission ticket issued.									
	te Fee: Rs 1 Fee Rs											
	Dealine Assistant											
	Dealing Assistant	Executive Officer (S	Assistant Director (T)									