

A-34, SECTOR 62, NOIDA-201309

Academic Year 2025-2026

**COURSE TITLE: THREE-YEAR B.Sc. (HHA) – SEMESTER- IV
(RE-APPEAR CANDIDATES OF JNU-NCHMCT ONLY)**

[illegible]

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. Student's Mobile No.

--	--	--	--	--	--	--	--	--	--
3. Student's Email id : _____
4. Father's / Mother's Name _____
5. Permanent residential address for correspondence _____
-
- Pin: _____ Alternate/Landline No. _____

6. Date of Birth (by Christian era) _____ 7. Sex: Male/Female/Others
8. Give details of subject(s) reappearing for: _____

8. Give details of subject(s) reappearing for:

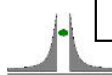
S. No.	Subject Code	Subject	Please tick	
			IE	ESE
1	BHA301	Indian Culinary Arts (Theory)		
2	BHA302	Indian Culinary Arts (Practical)		
3	BHA303	Banquet Operations (Theory)		
4	BHA304	Banquet Operations (Practical)		
5	BHA305	Rooms Division Management-I (Theory)		
6	BHA306	Rooms Division Management-I (Practical)		
7	BHA307	Facility Management		
8	BHA308	Retail Management		
9	BHA309	Food Science, Nutrition & Hygiene		
10	BHA310	Business Communication		
11	BHA311	Hotel Accounting Skills		
12	BHA401	Industrial Training Feedback Appraisal		
13	BHA402	Industrial Training Project Report		

REAPPEAR EXAMINATION FEE

*IE – Internal Evaluation, *ESE - End Semester Examination

- Theory @ Rs.300/- per subject (Forwarded to NCHM)

- Practical @ Rs.500/- & IE @ Rs.300/- per subject (Both retained by Academic Chapter)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee

10. 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 academic chapter 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 (mandate form attached).
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 NCHMCT USE

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

