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

ODD SEMESTER END TERM EXAMINATION FORM Academic Year 2023-2024

COURSE TITLE: THREE-YEAR B.Sc. (HHA) – SEMESTER V (RE-APPEAR CANDIDATES ONLY)

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Council Roll No Institute Name										(Photograph to be attested by Principal)									
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 2. 3. 4. 5. 	Student Father's	's Mobile No 's Email id : s / Mother's N ent residentia	Name _																- -
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6.	Date of Birth (by Christian era) 7. Sex: Ma										ale/	Fem	nale						
8.	Give de	tails of subject	ct(s) re	eappe	aring	g for	:												
	Code									Please tick Mid End Term Theory Proctical									

	S.No.	Subject	Subject	Please tick				
		Code		Mid	End	Term		
				Term(T)	Theory	Practical		
	1	BHM311	Advance Food Production Operations-I					
Ī	2	BHM312	Advance Food & Beverage Operations-I					
Ī	3	BHM313	Front Office Management-I					
Ī	4	BHM314	Accommodation Management-I					
	5	BHM307	Financial Management					
	6	BHM308	Strategic Management					

REAPPEAR EXAMINATION FEE

- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)

9.	Give	details of examinati	Examination Fee						
10.	a) b)	a) Certified that the name as written above by me is correct.							
	c)	Certified that I National Counci		ood the Examination Rules of the					
	Date:		_	(Signature of the candidate)					
		CE	RTIFICATE BY PRINC	IPAL					
1.	Certif	ied that admission t	to the semester was grante	d as per NCHM&CT Rules.					
2.	studei	ned that Mr./Msnt of this institution as as laid down by the	n and has satisfactorily o	is/was a bonafide full time isfactorily completed the prescribed course of					
3.	Certified that Examination Rules have been explained to the candidate and undertaking obtained for having understood the same.								
4.	satisf	ying that he/she ful		be issued to the candidate only after ments as laid down in Examination					
5.	Rs		remitted to the Coun	ate is included in the amount of cil through RTGS vide UTR/IMPS in favour of National Council andate form attached).					
	Exam	ination Fee Rs Fee (if any) Rs							
Date	:		Pi	rincipal's signature with office seal					
			FOR NCHM&CT US	E					
1.E 2.L	ate Fee:	Rs Rs Rs	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.					
		Dealing Assistant	Executive Officer (S) Assistant Director (T)					