## MARKS VERIFICATION FORM (For NCHM&CT Component only)

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

THIS FORM IS RE	QUIRED TO I	BE SENT 1	<b>FO NATIO</b>	NAL COUNCIL
	LATEST BY	13 <sup>th</sup> Augus	st 2021	

(Applications received after the last date will not be accepted) 1. Name in BLOCK letters : (As in ADMIT CARD) 2. NCHM&CT Roll No. : IHMCT & AN 3. Institute : 4. Student's Address :

:

:

\_\_\_\_\_Pin: \_\_\_\_\_

- 5. Email id
- 6. Mobile No.

S/No	Subject(s) for Verification		Marks	Marks after verification
	Subject Code	Subject Name	obtained	(For NCHM use only)
1				
2				
3				
4				
5				
6				
7				

FEE: Rs.300/- (Three hundred) per subject.

A total sum of Rs. \_\_\_\_\_ sent via

a) Demand Draft No. \_\_\_\_\_ dated \_\_\_\_\_ drawn on (Bank) \_\_\_\_ branch in favour of "National

Council for Hotel Management & Catering Technology, NOIDA" OR

b) NEFT/RTGS to Saving Bank Account No. 2886101000127 Bank - Canara Bank, Address- 1A/40, H Block, Sector -63, NOIDA (U.P)- 201301, IFSC - CNRB0002886, UTR No. dated

Date:

Candidate's signature

## FOR NCHM&CT USE

An amount of Rs.\_\_\_\_\_ received as per above UTR No./DD No.

Accountant/Cashier

National Council for Hotel Management & Catering Technology, Noida.