

Paste your photograph here

INSTITUTE OF HOTEL MANAGEMENT, CATERING TECHNOLOGY & APPLIED NUTRITION

S V S MARG, DADAR (W), MUMBAI – 400 028 (AN AUTONOMOUS BODY UNDER THE MINISTRY OF TOURISM, GOVERNMENT OF INDIA)
Ph- 022-45284100 e-mail: info@ihmctan.edu_Website: www.ihmctan.edu

ADMISSION FORM 2024 FOR M.Sc in H.A.

| JEE R | Roll No | _ JEE Centre: | AIR | | | |
|-------|-------------------------------|-------------------|-------------|--|--|--|
| Categ | ory: GEN / SC / ST / OBC / PI | H/KM/EWS | | | | |
| 1. | Applicant's Name: Mr./Ms | | | | | |
| | | (AS PER DEGREE M. | ARKSHEET) | | | |
| 2. | Academic Bank of Credits No |) | | | | |
| 3. | Present Residential Address: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Pin Code: | | | | | |
| | Tel No. with STD Code: | Mob | ile No | | | |
| | E-mail ID : | | | | | |
| | Permanent Address | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | _ Pin Code: | | | |

(Nearest Railway Station for outstation students – for Railway concession purpose)

| 4. | Ag | ge as on July 1, 2024 | Years | Months | Days | | | | |
|----|--|---|----------------|-------------------|------------------|--|--|--|--|
| | Da | ate of Birth | Day | Month | Year | | | | |
| 5. | Det | Details of qualifying exam: | | | | | | | |
| | a. | Name of Board : | | | | | | | |
| | b. | Total Marks secured: | Out of | (%)` | Year of Passing: | | | | |
| | c. | c. Name and address of college/school from which qualifying exam was passed as a regular | | | | | | | |
| | Stı | Student: | | | | | | | |
| | | | | | | | | | |
| | d. | d. Number of attempts to pass qualifying exam : | | | | | | | |
| 6. | Cer | Certificate details (in case of OBC/SC/ST/PH/KM/EWS candidates): | | | | | | | |
| | a. Category : OBC/SC/ST/PH/KM/EWS | | | | | | | | |
| | b. | b. Issued by (Name and designation of issuing authority): | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | c. | Date & Place of issue : _ | | | | | | | |
| 7. | | Whether belong to Religious minority: YES / NO. Please specify: Parsi / Jain / Sikh / Buddhist / Muslim / Christian | | | | | | | |
| 8. | Particulars of work experience, if any : | | | | | | | | |
| | | | | | | | | | |
| 9. | Par | ticulars of Craft Course/s | passed from IH | M/FCI, if any (At | tach proof): | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

| | Occupation: | | | | | |
|------|--|--|--|--|--|--|
| (| Office Address: | | | | | |
| - | | | | | | |
| (| Office Tel. No. With STD Code: Mobile No | | | | | |
| I | E-mail ID: | | | | | |
| (| (E-mail Id is highly desirable for communicating important/urgent/fees related Information/confidential messages) | | | | | |
| I | Father's annual income from all sources: | | | | | |
| 1. M | Nother's name: | | | | | |
| | Occupation: | | | | | |
| (| Office Address: | | | | | |
| _ | | | | | | |
| - | Office Tel. No. With STD Code: Mobile No | | | | | |
| I | E-mail ID: | | | | | |
| (| (E-mail Id is highly desirable for communicating important/urgent/fees related | | | | | |
| | Information/confidential messages) Mother's annual income from all sources: | | | | | |
| | for out-station applicants only-Local Guardian means a relative/family friend staying in Mumb Local guardian's name: | | | | | |
| Ι | Address: | | | | | |
| I | Address: | | | | | |

DECLARATION

1. We hereby declare that to the best of our knowledge the information given above is true and factual.

In case, any information is proved to be inaccurate, we shall be liable for suitable action. 2. We have read and understood the examination rules which are displayed on the website of the Institute. 3. We have especially gone through the rules regarding eligibility, attendance requirements, carryovers, promotion etc. Signature of Student Signature of Father/Mother/Guardian Date: Place: Mumbai **FOR OFFICE USE (Not to be filled by applicant)** Qualifying exam details checked & found in order: By _____ Date of birth checked & found in order: By _____ Category GEN/SC/ST/OBC/PH/KM/EWS details checked & found in order: By _____ Date : _____ ADMIT / DO NOT ADMIT

(PLEASE ATTACH COPIES OF MARKS SHEETS, CASTE CERTIFICATE- IN CASE OF OBC/SC/ST, RELEVANT CERTIFICATE- IN CASE OF KM/PH/EWS & ORIGINAL SCHOOL LEAVING CERTIFICATE/TRANSFER CERTIFICATE/MIGRATION CERTIFICATE)

Principal