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

THIS FORM IS REQUIRED TO BE SENT TO NATIONAL COUNCIL
LATEST BY 14th OCTOBER 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. : _____
3. Institute : IHMCT & AN _____
4. Student's Address : _____
   _____
   _____ Pin: _____
5. Email id : _____
6. Mobile No. : _____

(Please write T/P to indicate Theory/Practical subject in the 'Subject Code' Column below)

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

FEE: Rs.300 - (Rupees Three Hundred only) 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 to Saving Bank Account No. **2886101000127** Bank – **Canara Bank,** Account Holder Name – **NCHMCT,** Address- 1A/40, H Block, Sector -63, NOIDA (U.P)- 201301, IFSC - **CNRB0002886** bearing UTR No. _____ dated _____.

Date: _____   Candidate's signature

FOR NCHM&CT USE ONLY

An amount of Rs. _____ received as per above UTR DD No. _____ towards the verification fee.

Accountant Cashier