

APPLICATION FORM FOR DIRECT ADMISSION QUOTA (B.Sc.in H&HA)

**CHANDIGARH INSTITUTE OF HOTEL MANAGEMENT AND CATERING TECHNOLOGY,
SECTOR 42-D, CHANDIGARH - 160036**
Tel: 9779998086 E-mail: cihail.com
Website: www.cihmct.com

Affix recent passport
size photograph

1) Name of applicant: _____
2) Father's Name:
(as per Secondary Certificate) _____

3) Mother's Name:
(as per Secondary Certificate) _____

4) Category
(Please tick)

 GEN SC ST PwD

5) Date of Birth:
(as given in the Secondary School Certificate issued by the Board)

 (Date) (Month) (Year)

6) Age as on 1st July 2022:

 (Years) (Months) (Days)

7) Gender:

 (Male) (Female) (Others)

8) Marks obtained in 10+2 or equivalent examination (English + best of 4 subjects):

S.No.	Subject	Max. Marks	Marks Obtained	% of Marks	Year of Passing	Name of Board
1.	English					
2.						
3.						
4.						
5.						
Total:						

9) Enclosed attested copies of testimonials: 10th 10+2 or equivalent Category certificate

(scanned copies) (please tick)

Affirmation / Declaration

That above particulars are true to the best of my knowledge and belief. I will submit proof of the same on the date of physical reporting at the Institute.

(Signature of the Candidate)

Correspondence Address: _____

Date: _____

Place: _____ Mobile: _____ e-mail: _____

Please enclose the attested copies of scanned copies of testimonial