CHANDIGARH INSTITUTE OF HOTEL MANAGEMENT & CATERING TECHNOLOGY, SECTOR 42- D, CHANDIGARH-160036

Application Form for Teaching Associate

Passport size Photograph	

1.		of Candidate pital Letters)			
2.		of Birth m/yyyy)			Age as on (30.11.2023)
3.	Father Name	r's Name/ Husband's			
4.	Nationality				
5	Gender (Male/Female)				
6	Marita	l Status			
7	Categ	ory	Gen SC others	(please specify	()
8	Addre	ss with pin code			
9	Mobile No.				
10	E-mai	lid			
11	Educa	tional Qualification :			
	SI. No.	Name of the Exam passed	ame of the Exam Name of the Board Year of		% of Marks up to two decimals/Division
	a)	10 th			
	b)	12 th			
	c)	3 Year Bachelor's Degree in HM / Hotel Administration			
	d)	Masters' Degree in Hotel Management/Hotel Administration			
	e)	Any other relevant qualification			

12	NHTET detail	ls:								
	Sl. No.	Roll No.	Max Marks	Marks of	otained	Qualified/N qualified	ot	Date of qualification		
						•		-		
13.	Work Experie		ogical order begi Organization		e present		Total E	- - - -		
	SI. 1NO.	Designation & Pay scale	Organization	From	T		Total Exper			
		., .,		1 10111		o ma	usti y	Teaching		
Tota	l Il Years of Exp	l erience								
	· ·									
14. I	Present post w	ith scale of pay	& pay drawn:							
15. I	Disclosure abo	ut disciplinary p	roceedings, if an	y:Δdd addi	tional sh	eet if required				
				(Add addi	tional sin	cct ii required,	,			
16 E	etails regardin	g legal detentio	n/conviction if an	ıv:						
							quired)		
17	Any other infor	mation desired t	to be furnished		(Δ	dd additional s	hoot if	required)		
17.7	any other inion	mation desired	o be furnished		(٨١	ad additional s	iiicet ii	required)		
Date	<u>)</u> :				Signatu	re of the appli	cant			
					_					
Plac	e:				Name					
Dec	laration:									
I hereby declare that all the particulars furnished by me in this application are true to the best of my knowledge and belief. If any of the information/particulars furnished by me is found to be false at any stage, I am aware that my candidature/selection is liable to be rejected / cancelled by the appropriate authority without assigning any reason.										
					Signatu	re of the appli	cant			
Plac										
Date) :				Name:					