## INSTITUTE OF HOTEL MANAGEMENT \& CATERING SCIENCE

## Course Applied for

B.sc. Hotel Management and Catering Sciences
B.sc. Tourism \& Hospitality Management
M.sc. Hotel Management and Catering Sciences
M.sc. Hotel Management and Catering Sciences
M.sc. Tourism \& Hospitality Management
M.B.A. (Tourism \& Hotel Management)
M.A. (Tourism Management)
P.G. Diploma in Hotel Management
P.G. Diploma in Tourism Management

Diploma in Catering Operation
Diploma in Front Office and Accommodation Management
Diploma in Food and Beverage Service Management

## PERSONAL DETAILS :

1. Name of the student:
2. Date of Birth and Age :
3. Father's/Mother's Name :
4. Address for correspondence :
and Telephone Number
5. Permanent Address and Tel. No :
6. E-mail Address of the candidate :
7. E-mail Address of the parents :

## EDUCATIONAL QUALIFICATIONS :

| Examination <br> Passed | Name of the Institute Passed | Year of <br> Passing | Marks <br> Percentage | Remarks |
| :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## Fluency in English:1. Excellent

Other Language(S) Known to Speak / Read / Write

1. $\qquad$ 2. $\qquad$ 3. $\qquad$

## FAMILY BACKGROUND:

| Relationship | Name |  <br> Designation | Contact Phone Number |
| :--- | :--- | :--- | :--- |
| Father |  |  |  |
| Mother |  |  |  |
| Brother/Sister |  |  |  |
| Brother/Sister |  |  |  |
| Brother/Sister |  |  |  |

EXTRA CURRICULAR ACTIVITIES AND CERTIFICATES/PRIZES WON:
1.
2.
3.

## ADDITIONAL INFORMATION YOU WISH TO GIVE:

Date:
Signature of the Candidate:

