

APPLICATION FORM

USE CAPITAL LETTERS ONLY

Please affix your
latest stamp
size Colour
photograph here
with signature

Course Applied for ☐ BHM ☐ MHM ☐ MBAHM ☐ DHM
Stream : ☐ Hotel Management ☐ Hospital Management ☐ Hospitality Management
☐ BBA (H) ☐ BTM ☐ BMS (Media Science)

Full Name (Applicant)

Father's Name

Mother's Name

Date of Birth : DD MM YYYY Blood Group :

Aadhar Card No. : Passport No. :

Correspondence Address

..... Pin

Student's Ph No.: Guardians' Ph No. :

WhatsApp No.: E-mail Id

Any Visible Identification Mark : Any Physical Disabilities :

Caste Category : (Put ✓ Tick Mark) General ☐ ST ☐ SC ☐ OBC ☐ Others ☐

Status of 10th Examination (Put ✓ Tick Mark) For Diploma

Passed ☐ Appeared ☐ Year

Status of 10 + 2 Examination (Put ✓ Tick Mark) For Bachelor Degree

Passed ☐ Appeared ☐ Year

Status of Graduation Examination (Put ✓ Tick Mark) for Master Degree

Passed ☐ Appeared ☐ Year

Sex (Put ✓ Tick Mark) Male ☐ Female ☐

Academic Stream (Put ✓ Tick Mark)

Science ☐ Commerce ☐ Arts ☐ Vocational ☐

Hostel Required (Put ✓ Tick Mark): Yes ☐ No ☐

Declaration : I hereby declare that, the particulars furnished above are true and correct to the best of my knowledge and belief. After carefully going through the entire content of the prospectus and fees structure, I agree to abide by the terms and conditions imposed for taking admission in the aforesaid course.

Signature of Candidate Date

Signature of Guardian Date

REMARKS (Office Use only)

Name and Sign of Official

