MARKS VERIFICATION FORM (For NCHM&CT Component only)	**Semester – V** **B.Sc. Program 2018-19**

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 27th February 2019
(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 for   :   _____
    Correspondence   _____
                                     _____
                            _____ Pin: _____

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

FEE: Rs.200/- (Two hundred) per subject.

Demand draft No. _____ dated _____ for Rs. _____

drawn on (Bank) _____ branch in favour of

National Council for Hotel Management & Catering Technology, Noida is attached.

Date: _____   Candidate's signature

FOR NCHM&CT USE
An amount of Rs. _____ towards the verification fee received.
Cashier