होटल प्रबंध केटरिंग एवं पोषाहार संस्थान, पूसा, नई दिल्ली—110012

आई.एच.एम. / बी-16 / 2024-25 / 1 75. 03 मार्च 2025

सूचना NOTICE

संस्थान के बी.एस.सी. छठे सत्र के सभी विद्यार्थियों को सूचित किया जाता है कि उन्हें अपनी रिसर्च प्रोजेक्ट विषय की रिपोर्ट निम्नलिखित दस्तावेजों सहित

- > Synopsis
- > Filled Questionnaire Data
- Research Project Report (2 Hard Bound Copies)

डा. अंशु सिंह, विभागाध्यक्ष को 19 मार्च 2025 तक जमा करना अनिवार्य है, जिससे कि वह रिपोर्ट इग्नू विश्वविद्यालय को समय पर भेजी जा सकें। उपरोक्त तिथि के बाद कोई भी रिसर्च प्रोजेक्ट रिपोर्ट स्वीकार नहीं की जाएगी, जिसका प्रभाव आपके रिजल्ट एवं प्लेसमेंट पर होगा।

कमल कांत पंत

प्रधानाचार्य

AM 35-21 121

RESEARCH PROJECT PROPOSAL PROFORMA

| Candidate's Information (to be filled by the candidate) Date: | | | | |
|---|----------------------|--|--|--|
| Name: Programme Code: BHM | Course Code: BHM-309 | | | |
| Enrolment No.: | Regional Centre: | | | |
| Complete Postal Address: | Study Center: | | | |
| Mobile No. Email ID: | Study Center Code: | | | |
| Title of the Dissertation: (Enclose the proposal/synopsis) | | | | |
| | | | | |
| LETTER/CERTIFICATE OF APPROVAL (by the supervisor) I hereby certify that the proposal for the Dissertation entitled ' by (Candidate's Name) has been prepared after due consultation with me. The proposal has my approval and has, to my knowledge, the potential of developing into a comprehensive Dissertation Work. I also agree to | | | | |
| supervise the above mentioned Dissertation til | | | | |
| | Address | | | |

COVER PAGE OF RESEARCH PROJECT REPORT

(Title of Research Project)

| Under the Supervision | n of |
|-----------------------|------|
| (Supervisor's Na | ame) |

RESERCH PROJECT REPORT SUBMITTED TO INDIRA GANDHI NATIONAL OPEN UNIVERSITY IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF BSC. IN HOSPITALITY AND HOTEL ADMINISTRATION (BHM)

STUDENT NAME :
ENROLLMENT NUMBER :
STUDY CENTRE :
REGIONAL CENTRE :

| ANNEXURE C | | | | | |
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| FIR | FIRST PAGE OF THE RESEARCH PROJECT REPORT | | | | |
| Programme Code: | : BHM | Enrolment No. | : | | |
| Course Code: | : BHM-309 | Study Centre Code | : | | |
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| requirements for the aw | to the Indira Gar ard of the BSc in H | Hospitality and Hotel Admi on submitted or copied from | ersity in partial fulfilment of th nistration (BHM). I hereby declar | | |
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| | | CERTIFICATE | | | |
| Certified that the Disser (Candidate's Name) under my supervision. | tation entitled (Top | sic) is h | submitted by sis/her own work and has been done | | |
| It is recommended that t | his Dissertation be p | placed before the examiner | for evaluation. | | |
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