



FORM NO.

**INSTITUTE OF HOTEL MANAGEMENT
CATERING & NUTRITION, KUFRI, SHIMLA
HIMACHAL PRADESH-171012**

Phone: 0177- 2735901 • Tele Fax: 0177- 2735903

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E-mail: admissionihm22@gmail.com

Website: www.ihmshimla.org

APPLICATION FORM

FOR

**DIRECT ADMISSION INTO B.Sc. HOSPITALITY & HOTEL ADMINISTRATION
2022-25 BATCH**

Affix Recent Passport Size Colour Photograph	(for office use only)	Please tick (√)
	<input type="checkbox"/> Scheduled Caste <input type="checkbox"/> Scheduled Tribe
	<input type="checkbox"/> OBC (NCL) <input type="checkbox"/> General
	<input type="checkbox"/> General EWS
	<input type="checkbox"/> Physically Handicap (PH)
		(Please enclose Certificate appropriate authority)

NAME OF THE CANDIDATE : _____

FATHER'S NAME : _____

FATHER'S PROFESSION : _____

PERMANENT ADDRESS : _____

_____ **PINCODE** _____

MOBILE NO. Self : _____ Father: _____

E-mail Address :

DATE OF BIRTH & AGE : _____ **AGE** _____

NATIONALITY : _____

MARITAL STATUS : MARRIED / SINGLE

EDUCATIONAL QUALIFICATION (Please mention the examination starting with 10th Class)

EXAMINATION PASSED/APPEARED	NAME OF THE BOARD	YEAR	SUBJECTS TAKEN	TOTAL MARKS	%

ANY OTHER INFORMATION : _____

DECLARATION

The above information provided by me is true to the best of my knowledge. In case of information provided by me is false, I am solely responsible for the same any admission may be cancelled. I have gone through all the rules and procedures and shall undertake to abide by the same.

PLACE : _____

DATE : _____

(SIGNATURE OF THE APPLICANT)

**PLEASE ENCLOSE THE FOLLOWING ALONG WITH THE APPLICATION FROM
(All documents to be self attested)**

- 10th Class Passed Mark sheet
- 12th Class Passed Mark sheet
- Aadhar Card
- Certificated true copies of Educational Qualification
- Medical Certificate
- Caste Certificate for SC/ST Category
- Caste Certificate EWS Category
- Caste Certificate OBC –NCL Category As Per Central Government format

Please Note : Incomplete application forms will not be accepted.