MARKS VERIFICATION FORM (For NCHM&CT Components only)	SEM III of 3-year B.Sc. (HHA) ODD SEM ETE – 2022-23 (Regular & Reappear Students)

NATIONAL COUNCIL FOR HOTEL MANAGEMENT & CATERING TECHNOLOGY
A-34, Sector 62, NOIDA 201309.

THIS FORM IS REQUIRED TO BE SENT TO NATIONAL COUNCIL
LATEST BY 06TH FEBRUARY 2023
(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 : _____
   _____
   _____PIN: _____
5. Email id : _____
6. Mobile No. : _____

(Please write **T/P** to indicate Theory/Practical subject in the "Subject Code" Column below)

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.300/- (Three hundred) per subject.

A total sum of Rs._____ transferred to Saving Bank **Account No. 2886101000127,** Account Holder Name: National Council for Hotel Management & Catering Technology, NOIDA, Bank Name: **CANARA BANK**, Branch address: 1A/40, H BLOCK, SECTOR-63, NOIDA (U.P) - 201301, **IFSC- CNRB0002886,** MICR Code:110015178. (Please attach screenshot of the payment)

Candidate's Signature   Principal's Signature with stamp

Date :_____

FOR NCHMCT USE ONLY
An amount of Rs._____ received as per above UTR/DD No._____ towards the verification fee.   Accountant /Cashier