NATIONAL COUNCIL FOR HOTEL MANAGEMENT & CATERING TECHNOLOGY A-34, Sector- 62, NoIDA - 201 309

MARKS VERIFICATION FORM

COURSE TITLE: DIPLOMA COURSE IN:

F & E HOU FROM	D PRODUCTI SERVICE SEKEEPING NT OFFICE O ERY & CONF	PERATIONS					
		(FOR NO	СНМСТ	СОМРС	NENTS	ONLY)	
		DATE FOR FO	31st A	August 2	023		
	(23	ppireutions rece	ived uite	tile last	date will	not be de	copicar
1.	Name in BLOCK letters (As in ADMIT CARD)		:				
2.	NCHM&CT Roll No. Institute Name		:				
3.4.	Student's Address		:				
						Pin:	
5.	Email id		:				
6.	Mobile No.		:				
S.No.		r Verification			Marks Marks after		
	Subject Subject Na Code		ne	Theory	Practical	obtained	verification (For NCHM use only)
1							
2							
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7							
FEE	: Rs.300/-per su	ıbject (Forwarded	l to NCHN	ИСТ)	•		
Candidate's signature						Princ	ipal's Signature with stamp
Date	:						