

Institute of Hotel Management Catering Technology and Applied Nutrition, Mumbai

(An Autonomous Body under Ministry of Tourism, Govt. of India)

Post Applied for Teaching Associate

1	Name of Candidate (in Capital letters)					A recent Passport sized colored Photograph to be pasted here and Signed Across
2	Date of Birth	Day	Month	Year	Age(as on 29 th May, 2023)	
3.	Father's Name/Husband's Name					
4.	Nationality					
5.	Gender (Male/Female)					
6.	Marital Status	Married	Single			
7.	Category (Please tick in appropriate box)	Gen	SC	ST	OBC	
8.	Address with Pin Code	Correspondence		Permanent		
9.	Tel. No.					
10.	Mobile No.					
11.	E-mail Id.					

12. Details of Application fee:

Demand Draft No. : _____ Date: _____ Amount: _____



13	Educational Qualifications : (in ascending order) (All attested copies of testimonials to be attached)				
Sl.	Name of the Exam passed	Name of the Board/ University	Name of the Institute	Month & Year of passing	% of Marks up to two decimals
a)	10 th / Secondary				
b)	12 th standard / Higher Secondary				
c)	3 Year Diploma/Degree in Hotel Management / Degree in Hotel Administration				
d)	Any other higher Qualification				
e)	NHTET Exam Qualified	National Council for Hotel Management, Noida	NA		

14	Teaching and Work Experience (post qualification) of 3 yrs Degree/4 yrs Degree program in chronological order beginning from the present job : (copy of documents to be attached)				
Sl No.	Designation & Pay Scale	Organization	Period of service		Reason For leaving
			From	To	
1.					
2.					
3.					
4.					

15. Area of specialization in relation with

1) INDUSTRY: _____

2) TEACHING: _____

16. Present post with scale of pay & pay drawn: _____

17. Discloser about past disciplinary proceedings, if any _____

18. Details regarding legal detention / conviction, if any _____

19. Any other information desired to be furnished _____

(Add additional sheets, if required)

Place :

Date :

(Signature of the applicant)



Declaration

I hereby certify that the information furnished above is correct to the best of my knowledge and belief. I have not suppressed any material fact or factual information in the above statement. I am aware that, in case, I have given wrong information or suppressed any material fact or factual information, or I do not satisfy the eligibility criteria according to the advertisement, then my candidature will be rejected/services terminated in between the selection process and even after employment without giving any notice or reason thereof.

Name :

(Signature of the applicant)

Place :

Date :



Annexure I

**FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES
APPLYING FOR APPOINTMENT TO POSTS UNDER THE GOVERNMENT OF INDIA**

This is to certify that Shri/Smt./Kumari _____ son/daughter of _____ of village/town _____ in District/Division _____ in the State/Union Territory _____ belongs to the _____ community which is recognised as a backward class under the Government of India, Ministry of Social Justice and Empowerment's Resolution No. _____ dated ____*. Shri/Smt./Kumari _____ and/or his/her family ordinarily reside(s) in the _____ District/Division of the _____ State/Union Territory. This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Schedule to the Government of India, Department of Personnel & Training O.M. No. 36012/22/93 – Estt.(SCT) dated 8.9.1993**

District Magistrate
Deputy Commissioner etc.

Dated:

Seal

*- The authority issuing the certificate may have to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC. **- As amended from time to time.

Note:- The term "Ordinarily" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.