

ENROLMENT NO. \_\_\_\_\_  
(To be given by the University)

**JAWAHARLAL NEHRU UNIVERSITY**

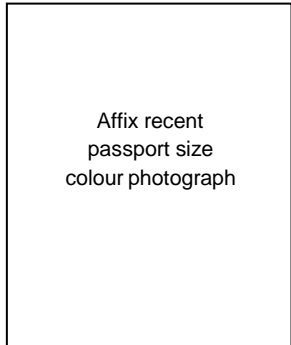
**ENROLMENT FORM**  
(to be filled up by the Student in duplicate)

Year of Admission: **2024-25**

Name of the Institute: **National Council for Hotel Management & Catering Technology, Noida**

Name of the Chapter: **Institute of Hotel Management, Catering Technology and Applied Nutrition, Mumbai**

Programme of Study: **BSC IN Hospitality and Hotel Administration**



1. Name of the Student : \_\_\_\_\_  
(in Block Capital Letters)  
(as in High School/High Secondary Certificate)
2. Father's Name : \_\_\_\_\_
3. Name of the Guardian : \_\_\_\_\_  
(if father is deceased)
4. Local address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Permanent address : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
6. Date of Birth : \_\_\_\_\_
7. State of Domicile : \_\_\_\_\_
8. Nationality : \_\_\_\_\_
9. Whether SC / ST / OBC : \_\_\_\_\_

10. Educational Record:

Name of the Examination Passed	Name of the Board/University	Year of Passing	Class/Division	Subjects

Signature of the Student

Certified that the particulars given by the Student at the time of admission have been verified by the Institute/Chapter from the original records.

Signature of the Principal  
of the Chapter