

होटल प्रबंधन खानपान प्रौद्योगिकी तथा अनुप्रयुक्त पोषाहार संस्थान
वीर सुरेन्द्र साई नगर भुवनेश्वर, ओडिशा -751010
INSTITUTE OF HOTEL MANAGEMENT
CATERING TECHNOLOGY & APPLIED NUTRITION
BHUBANESWAR

सूचना / NOTICE

दिनांक / **Date: 22.08.2025**

एनसीएचएमसीटी द्वारा सूचित किए जाने के अनुसार, निम्नलिखित पाठ्यक्रमों के पुनः उपस्थित होने वाले छात्रों को नीचे उल्लिखित कार्यक्रम के अनुसार अपना केंद्र परिवर्तन फॉर्म, ओडीडी सेमेस्टर (सेमेस्टर-I, III और V) बीएससी एचएचए, एमएससी एचए (सेमेस्टर-1 और 3), पीजीडीएओएम (सेमेस्टर-1), सीसीएफपीपी (सेमेस्टर-1) टर्म एंड परीक्षा 2025-26 के लिए परीक्षा फॉर्म भरना आवश्यक है।

As communicated by NCHMCT, re-appear students of following courses are required to fill up their Centre Change Form, Examination Form for **ODD Semester (Semester-I, III & V) B.Sc. HHA, M.Sc. HA (Semester-1&3) , PGDAOM (Semester-1), CCFPP (Semester-1) Term End Examination 2025-26** as per the below mentioned schedule.

Sl. No.	Course/Semester	Without Late Fee till	With Late Fee of ₹500 till	With Late Fee of ₹1000 till
1	B.Sc. HHA (Semester-3, 5) JNU & IGNOU And M.Sc. HA (Semester-3) JNU & IGNOU	10.09.2025	26.09.2025	10.10.2025
2	B.Sc. HHA (Semester-1) JNU & IGNOU	15.10.2025	29.10.2025	12.11.2025
3	M.Sc. HA (Semester-1) JNU PGDAOM, CCFPP (Semester-1)	08.10.2025	23.10.2025	07.11.2025

Students are required to submit the attached Examination Form with complete information and photograph (to be paste in the space provided) on or before above mentioned date physically at the examination section.

Students having re-appear subjects are required to transfer the amount as per the following manner through NEFT/RTGS to the following Institute bank account or by scanning the QR code of the Institute.

Subject Type	Amount for Each Subject Without Midterm Exam	Amount for Each Subject With Midterm Exam
Theory	Rs.300/-	Rs.600/-
Practical	Rs.500/-	

Students desire to change the examination centre is required to fill Centre Change Form by paying Centre Change Fee Rs.500/-.


Name of A/c. Holder : PRINCIPAL, IHMCT&AN
A/c No : 091502000001017
IFSC Code : IOBA0000915
Type of A/c : Current



After the transfer of fee students should submit the following information at the account section: **1. Name of Student 2. NCHMCT Roll No. 3. UTR No./Transaction No. 4. Amount Transferred 5. Date of Transfer and 6. Mobile No.**

Students who submit form without Fee will not be taken for consideration.

Important: The re-appear examination will be conducted in offline mode at the Institute or at the centre change city.


प्रधानाचार्य /Principal

Copy to: Website/ Student Notice Board /UDC (Cash)/
Students WhatsApp Group/Concerned file.

A-34, SECTOR 62, NOIDA-201309

Academic Year 2025-2026

**COURSE TITLE: THREE-YEAR B.Sc. (HHA) – SEMESTER- V
(RE-APPEAR CANDIDATES OF IGNOU-NCHMCT ONLY)**

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE Without Late fee : 10/09/2025 With Late fee of Rs.500/- : 26/09/2025 With Late fee of Rs.1000/- : 10/10/2025									Paste Passport Size Photograph. (Do not staple)
Council Roll No								Institute Name _____	(Photograph to be attested by Principal)

1. Name of the candidate in English (full name in BLOCK letters)

First name										Middle name										Surname									

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Student's Mobile No.

3. Student's Email id : _____

4. Father's / Mother's Name _____

5. Permanent residential address for correspondence _____

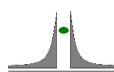
_____ Pin: _____ Alternate/Landline No. _____

6. Date of Birth (by Christian era) _____ 7. Sex: Male/Female

8. Give details of subject(s) reappearing for: _____

S.No.	Subject Code	Subject	Please tick		
			Mid Term(T)	End Term	
				Theory	Practical
1	BHM311	Advance Food Production Operations-I			
2	BHM312	Advance Food & Beverage Operations-I			
3	BHM313	Front Office Management-I			
4	BHM314	Accommodation Management-I			
5	BHM307	Financial Management			
6	BHM308	Strategic Management			

- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee
10. a) Certified that the name as written above by me is correct.
b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&CT Rules.
2. Certified that Mr./Ms. _____ is/was a bonafide full time student of this institution and has satisfactorily completed the prescribed course of studies as laid down by the Council.
3. Certified that Examination Rules have been explained to the candidate and undertaking obtained for having understood the same.
4. Certified that Admit Card for the Examination will be issued to the candidate only after satisfying that he/she fulfils the attendance requirements as laid down in Examination Rules of National Council for Hotel Management.
5. Certified that the following fee of the candidate is included in the amount of Rs. _____ remitted to the Council through RTGS vide UTR/IMPS No. _____ dated _____ in favour of National Council for Hotel Management & Catering Technology (mandate form attached).

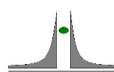
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHM&CT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ <div style="text-align: right;">Dealing Assistant</div>	Examination particulars Checked & Verified <div style="text-align: right;">Executive Officer (S)</div>	Examination Hall Admission ticket issued. <div style="text-align: right;">Assistant Director (T)</div>
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A-34, SECTOR 62, NOIDA-201309

Academic Year 2025-2026

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE		Paste Passport Size Photograph. (Do not staple) (Photograph to be attested by Principal)
Without Late fee	: 10/09/2025	
With Late fee of Rs.500/-	: 26/09/2025	
With Late fee of Rs.1000/-	: 10/10/2025	
Council Roll No _____ Institute Name _____		

Council Roll No

Institute Name

[illegible]

- First name

Middle name

Surname

[illegible]

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Student's Mobile No.

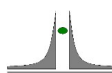
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3. Student's Email id : _____
4. Father's / Mother's Name _____
5. Permanent residential address for correspondence _____

Pin: Alternate/Landline No.

6. Date of Birth (by Christian era) _____ 7. Sex: Male/Female ☐
8. Give details of subject(s) reappearing for: _____

S.No.	Subject Code	Subject	Please tick		
			Mid Term(T)	Theory	Practical
1	BHM201	Food Production Operations			
2	BHM202	Food & Beverage Operations			
3	BHM203	Front Office Operations			
4	BHM204	Accommodation Operations			
5	BHM205	Food & Beverage Controls			
6	BHM206	Hotel Accountancy			
7	BHM207	Food Safety & Quality			
8	BHM208	Industrial Training			

- Theory @ Rs.300/- per subject (Forwarded to NCHM)
- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee
10. a) Certified that the name as written above by me is correct.
b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&CT Rules.
2. Certified that Mr./Ms. _____ is/was a bonafide full time student of this institution and has satisfactorily completed the prescribed course of studies as laid down by the Council.
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4. Certified that Admit Card for the Examination will be issued to the candidate only after satisfying that he/she fulfils the attendance requirements as laid down in Examination Rules of National Council for Hotel Management (mandate form attached).
5. Certified that the following fee of the candidate is included in the amount of Rs. _____ remitted to the Council through RTGS vide UTR/IMPS No. _____ dated _____ in favour of National Council for Hotel Management & Catering Technology (mandate form attached).

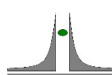
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ <div style="text-align: right;">Dealing Assistant</div>	Examination particulars Checked & Verified <div style="text-align: right;">Executive Officer (S)</div>	Examination Hall Admission ticket issued. <div style="text-align: right;">Assistant Director (T)</div>
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9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee
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c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&CT Rules.
2. Certified that Mr./Ms. _____ is/was a bonafide full time student of this academic chapter and has satisfactorily completed the prescribed course of studies as laid down by the Council.
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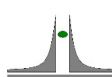
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

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A-34, SECTOR 62, NOIDA 201309

Academic Year 2025-2026

**COURSE TITLE: TWO-YEAR M.Sc. (HA) – SEMESTER-III
(RE-APPEAR CANDIDATES OF IGNOU-NCHMCT ONLY)**

LAST DATE FOR SUBMISSION OF FORMS IN THE INSTITUTE

Without late fee : 10/09/2025

With late fee of Rs. 500/- : 26/09/2025

With late fee of Rs. 1000/- : 10/10/2025

Paste Passport
Size Photograph.

(Do not staple)

(Photograph to be
attested by
Principal)

Council Roll No

Institute Name

[illegible]

1. Name of the candidate in English (full name in BLOCK letters)

First name

Middle name

Surname

[illegible]

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Student's Mobile No.

[illegible]

3. Student's Email id :

4. Father's / Mother's Name

5. Permanent residential address for correspondence

Pin:

Alternate/Landline No.

6. Date of Birth (by Christian era)

7. Sex: Male/Female

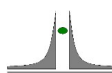
8. Give details of subject(s) reappearing for:

S.No.	Subject Code	Subject	Please tick	
			Mid Term	End Term
1	MHA-11	Marketing Services & Consumer Behaviour		
2	MHA-12	International Marketing		
3	MHA-15	Managing Change in Organisations		
4	MHA-16	Social Processes & Behavioural Issues		

REAPPEAR EXAMINATION FEE

- Theory @ Rs.300/- per subject (Forwarded to NCHM)

- Mid Term IC (Theory) @ Rs.300/- per subject (Retained by Institute)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee

10. a) Certified that the name as written above by me is correct.
b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

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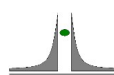
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

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A-34, SECTOR 62, NOIDA-201309

Academic Year 2025-2026

LAST DATE FOR SUBMISSION OF FORMS IN THE ACADEMIC CHAPTER

With Late fee of Rs.1000/- : 10/10/2025

(Photograph to be
attested by
Principal)

Name of Academic Chapter

[illegible]

- Surname

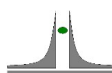
[illegible][illegible]

- Pin: Alternate/Landline No.

8. Give details of subject(s) reappearing for:

S. No.	Subject Code	Subject	Please tick	
			IE	ESE
1	MHA901	Research Methodology		
2	MHA902	Research Ethics & Publication		
3	MHA903	Data Collection, Analysis and Decision Making		
4	MHA904	Writing Literature Review		
5	MHA905	Data Analysis Practical - I		
6	MHA906	Research Seminar Presentation		

- Practical @ Rs.500/- & IE @ Rs.300/- per subject (Both retained by Academic Chapter)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee

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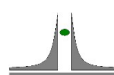
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ <div style="text-align: right;">Dealing Assistant</div>	Examination particulars Checked & Verified <div style="text-align: right;">Executive Officer (S)</div>	Examination Hall Admission ticket issued. <div style="text-align: right;">Assistant Director (T)</div>
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Date: _____

(Signature of the candidate)

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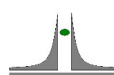
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

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(Signature of the candidate)

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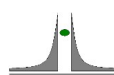
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ Dealing Assistant	Examination particulars Checked & Verified Executive Officer (S)	Examination Hall Admission ticket issued. Assistant Director (T)
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Late Fee (if any)
Total Fee

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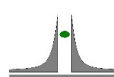
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

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A-34, SECTOR 62, NOIDA 201309

Academic Year 2025-2026

(RE-APPEAR CANDIDATES ONLY)

Without late fee : 08/10/2025

With late fee of Rs. 500/- : 23/10/2025

With late fee of Rs. 1000/- : 07/11/2025

(Do not staple)

(Photograph to be
attested by
Principal)

Council Roll No

Institute Name

[illegible]

1. Name of the candidate in English (full name in BLOCK letters)

First name

Middle name

Surname

[illegible]

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Student's Mobile No.

[illegible]

3. Student's Email id :

4. Father's / Mother's Name

5. Permanent residential address for correspondence

Pin: Alternate/Landline No.

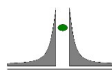
6. Date of Birth (by Christian era) 7. Sex: Male/Female

8. Give details of subject(s) reappearing for:

S.No.	Subject Code	Subject	Please tick		
			Mid Term	End Term	
				Theory	Practical
1	AOM11	Accommodation Operations			
2	AOM12	Front Office Operations			
3	AOM13	Supervisory Management			
4	AOM14	Accountancy			
5	AOM15	Communication			
6	AOM31	Industrial Training			

- Theory @ Rs.300/- per subject (Forwarded to NCHM)

- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee
10. a) Certified that the name as written above by me is correct.
b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&CT Rules.
2. Certified that Mr./Ms. _____ is/was a bonafide full time student of this institution and has satisfactorily completed the prescribed course of studies as laid down by the Council.
3. Certified that Examination Rules have been explained to the candidate and undertaking obtained for having understood the same.
4. Certified that Admit Card for the Examination will be issued to the candidate only after satisfying that he/she fulfils the attendance requirements as laid down in Examination Rules of National Council for Hotel Management.
5. Certified that the following fee of the candidate is included in the amount of Rs. _____ remitted to the Council vide bank draft no: _____ dated _____ drawn on _____ branch in favour of National Council for Hotel Management & Catering Technology (mandate form attached).

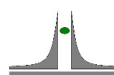
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____ Dealing Assistant	Examination particulars Checked & Verified Executive Officer (S)	Examination Hall Admission ticket issued. Assistant Director (T)
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A-34, SECTOR 62, NOIDA-201309

Academic Year 2025-2026

(RE-APPEAR CANDIDATES ONLY)

Without late fee : 08/10/2025

With late fee of Rs. 500/- : 23/10/2025

With late fee of Rs. 1000/- : 07/11/2025

(Do not staple)

(Photograph to be
attested by
Principal)

Council Roll No

Institute Name

[illegible]

1. Name of the candidate in English (full name in BLOCK letters)

First name

Middle name

Surname

[illegible]

(Please note that the name written above should be same as given in your +2 CBSE/Board Certificate)

2. Student's Mobile No.

[illegible]

3. Student's Email id :

4. Father's / Mother's Name

5. Permanent residential address for correspondence

Pin: Alternate/Landline No.

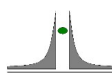
- | | | |
|-------------------------------------|---------------------|--|
| 6. Date of Birth (by Christian era) | 7. Sex: Male/Female | |
|-------------------------------------|---------------------|--|

8. Give details of subject(s) reappearing for:

S.No.	Subject Code	Subject	Please tick	
			Mid Term	End Term
1	CFPP11	Cookery & Larder Theory-I		
2	CFPP12	Cookery Practical-I		
3	CFPP13	Larder Practical-I		
4	CFPP14	Bakery & Patisserie Theory-I		
5	CFPP15	Bakery & Patisserie Practical-I		
6	CFPP16	Hygiene		
7	CFPP17	Equipment Maintenance		

- Theory @ Rs.300/- per subject (Forwarded to NCHM)

- Practical @ Rs.500/- & Mid-term IC (Theory) @ Rs.300/- per subject (Both retained by Institute)



9. Give details of examination and related fees paid: Examination Fee
Late Fee (if any)
Total Fee
10. a) Certified that the name as written above by me is correct.
b) I hereby declare that the statements made in the application are true to the best of my knowledge and belief.
c) **Certified that I have read and understood the Examination Rules of the National Council.**

Date: _____

(Signature of the candidate)

CERTIFICATE BY PRINCIPAL

1. Certified that admission to the semester was granted as per NCHM&CT Rules.
2. Certified that Mr./Ms. _____ is/was a bonafide full time student of this institution and has satisfactorily completed the prescribed course of studies as laid down by the Council.
3. Certified that Examination Rules have been explained to the candidate and undertaking obtained for having understood the same.
4. Certified that Admit Card for the Examination will be issued to the candidate only after satisfying that he/she fulfils the attendance requirements as laid down in Examination Rules of National Council for Hotel Management (mandate form attached).
5. Certified that the following fee of the candidate is included in the amount of Rs. _____ remitted to the Council through RTGS vide UTR/IMPS No. _____ dated _____ in favour of National Council for Hotel Management & Catering Technology (mandate form attached).

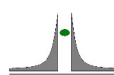
Examination Fee Rs.....
Late Fee (if any) Rs.....
Total Fee Rs.....

Date: _____

Principal's signature with office seal

FOR NCHMCT USE

Fee received 1.Exam Fee: Rs. _____ 2.Late Fee: Rs. _____ Total Fee Rs. _____	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.
Dealing Assistant	Executive Officer (S)	Assistant Director (T)



A-34, SECTOR 62, NOIDA-201309

Academic Year 2025-2026

CHANGE OF CENTRE FEES – Rs.500/- ONE TIME
(This form must be routed through institute concerned only)

(Photograph to be
attested by
Principal)

Institute Name

[illegible]

- Surname

[illegible][illegible]

5. Permanent residential address for correspondence :

Pin: Alternate/Landline No.

8. Give details of the exam Centre opted for appearing in the exams:

IHM/FCI

Candidate's signature

Date:

Principal's signature with office seal

FOR NCHMCT USE

Fee received	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.
Dealing Assistant	Executive Officer (S)	Assistant Director (T)

