

होटेल प्रबंध और खान-पान प्रौद्योगिकी तथा अनुप्रयुक्त पोषाहार संस्थान
भुवनेश्वर

INSTITUTE OF HOTEL MANAGEMENT
CATERING TECHNOLOGY & APPLIED NUTRITION
BHUBANESWAR

सूचना / NOTICE

दिनांक / Date: 30.01.2026

एनसीएचएमसीटी द्वारा सूचित किए अनुसार, यह सभी 3 वर्षीय बी.एससी. इन हॉस्पिटैलिटी एंड होटल एडमिनिस्ट्रेशन के पास-आउट छात्रों को सूचित किया जाता है कि परिषद (काउंसिल) सेमेस्टर-V (2025-26) की सप्लीमेंट्री परीक्षा (केवल IGNOU-NCHM कार्यक्रम) का आयोजन 25 मई 2026 से 1 जून 2026 तक कर रही है।

As communicated by NCHMCT, It is hereby informed to the **Pass out** students of 3 Yr. B.Sc. in Hospitality and Hotel Administration that, council is conducting the **Supplementary Examination for Semester- V - 2025-26 (IGNOU-NCHM Programme only)** from 25th May 2026 to 1st June, 2026.

Students are required to submit the attached examination form (physically or through mail i.e. examination@ihmbbs.org) with complete information and photograph (to be paste in the space provided) on or before **24/04/2026** at the examination section.


Students filling the form are required to transfer the amount as per the following manner along with **Supplementary Examination Fee Rs.1000/-** through NEFT/RTGS to the following Institute bank account or by scanning the QR code of the Institute.

Subject Type	Amount for per Subject
Theory	Rs.300/-
Practical	Rs.500/-

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



Applications received after the last date will not be accepted.


प्रधानाचार्य /Principal

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

राष्ट्रीय होटल प्रबन्ध एवं केटरिंग टेक्नोलॉजी परिषद्
(पर्यटन मंत्रालय, भारत सरकार के अधीन स्वायत्तशासी निकाय)
NATIONAL COUNCIL FOR HOTEL MANAGEMENT AND CATERING TECHNOLOGY
(An Autonomous Body under Ministry of Tourism, Govt. of India)
A-34, SECTOR-62, NOIDA - 201309 (Uttar Pradesh)
e-mail: dirs-nchm@nic.in

DATE SHEET

SUPPLEMENTARY END TERM EXAMINATIONS - ACADEMIC YEAR 2025-26

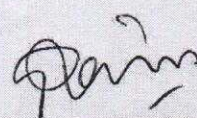
3-YEAR B.Sc. HHA - SEMESTER - V

(FOR RE-APPEAR & FAIL CANDIDATES - NCHM-IGNOU COMPONENTS ONLY)

Date & Day	Subject Code	Subject	Duration	From	To
25.05.2026 MONDAY	BHM311	ADVANCE FOOD PRODUCTION OPERATIONS-I	03 HRS.	09:30 AM	12:30 PM
26.05.2026 TUESDAY	BHM312	ADVANCE FOOD & BEVERAGE OPERATIONS-I	03 HRS.	09:30 AM	12:30 PM
27.05.2026 WEDNESDAY	BHM313	FRONT OFFICE MANAGEMENT-I	03 HRS.	09:30 AM	12:30 PM
28.05.2026 THURSDAY	BHM314	ACCOMMODATION MANAGEMENT-I	03 HRS.	09:30 AM	12:30 PM
29.05.2026 FRIDAY	BHM308	STRATEGIC MANAGEMENT	02 HRS.	09:30 AM	11:30 AM
30.05.2026	SATURDAY				
31.05.2026	SUNDAY				
01.06.2026 MONDAY	BHM307	FINANCIAL MANAGEMENT	03 HRS.	09:30 AM	12:30 PM

Dated: 29th January 2026




Dr. SATVIR SINGH
DIRECTOR (STUDIES)

7. Give details of examination and related fees paid: Examination Fee
Total Fee
8. 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.

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