

DESH BHAGAT INSTITUTE OF HOTEL MANAGEMENT & CATERING TECHNOLOGY

Amloh Road, Mandi Gobindgarh (Punjab)



Sr. No.

ADMISSION FORM SESSION 20 -20

Note : This form is to be filled by the student in CAPITAL letters only

1. Course applied for _____

2. Type of Course : Diploma Craft

3. Preference 1st _____ 2nd _____ 3rd _____ 4th _____ 5th _____

4. Name of the Student

As per matric certificate

5. Tick the appropriate (✓) Boxes

Male Female Urban Rural

NRI Handicapped S.C. S.T. B.C. Gen.

Sports Person Others _____

6. Date of Birth

7. Nationality

8. Father's /Guardian's Name

9. Occupation

10. Mother's Name

11. Mother's Occupation

12. State of Residence/Domicile

13. Mailing/Address _____

14. Permanent Address _____

_____ Mobile No. _____ Phone No. _____

15. Do you need Hostel Facility Yes No

16. Eligibility A : Matriculation B : 10+2 C : Graduation

13. Qualification Details :

Qualification	Main Subjects	Session	% age Marks/Grades	Board/University	University Regd. No./ Board Roll No.

DECLARATION FROM STUDENT AND PARENTS

1. I am responsible for the information given above by me and it is true to the best of my knowledge and belief and nothing has been concealed there in.
2. I hereby agree to confirm to all Rules, Acts and Laws enforced by Government/Council and Institute. Further I, hereby undertake that if I disobey any of the rule or regulation of the Institute, any disciplinary action can be taken against me, even to the extent of expulsion from the Institute.
3. I know that at any stage of my course, if any, discrepancy is found in my Testimonials / Documents / Eligibility by the university or any other Authority, the Institute will not be held responsible. I will own the responsibility.
4. I hereby agree to pay the full fee of the course even if, I discontinue at any time during the course, as I am fully aware that the seat vacated by me (my son/daughter) will be a loss to the Institute.
5. I hereby agree to fulfill the 75% attendance condition.

Date :

Signature of Father/Mother

Signature of Student

DECLARATION FROM FATHER/MOTHER/GUARDIAN

1. I undertake and bind my self to pay by due date on behalf of my son/daughter/ward such fee/fines/charges etc. Which the Institute may levy upon him/her from time to time and in the event of failure to perform this duty, the Principal of the Institute may take such action against my son/daughter/ward as he/she may deem fit.
2. That I being the father/guardian of Ms./Mr.do under-take the entire responsibility of his/her good behavior and he/she will maintain proper discipline during his/her stay in the college and or Hostel.
3. That I will pay any difference in college fee/dues from time to time on account of enhancement.
4. That the college authorities have explained to me about the eligibility criteria & status of the Institute regarding National Council for Hotel Management. I am admitting my ward after thorough consideration and to my full satisfaction.

Date :

Signature of Father/Mother/Guardian

FOR OFFICE USE ONLY

1. Date of Form Submission :
2. List of original certificates received :

(a) Matric	(d) Migration
(b) 10+2	(e) Character
(c) Graduation	(f) Any Other

(Admission Person)

(Member of Admission Committee)

(Office Executive)

DECLARATION

(To be filled by the candidate and attached with the Application Form)

I.....

Son/daughter of Shri.....

Seeking admission in the Trade Diploma/Craft Course in Food Production/Bakery and Confectionery/Food & Beverage Service in Desh Bhagat Institute of Hotel Management & Catering Technology do hereby undertake to arrange for 'On the job training' in Hotel and catering establishment of repute, duly approved by the Principal of the Institute for the period of six months, of my own, after the final examination.

I promise to submit the proposed name of the hotel/establishment for undergoing on the job Training upto 1st December in all circumstances for the approval of the Principal.

Trade _____

Dated _____

Signature of Applicant

(Attach in Original with Application)

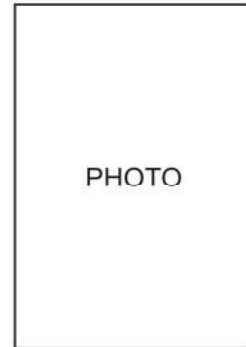
Desh Bhagat Institute of Hotel Management & Catering Tech.
Mandi Gobindgarh

Admit Card

Roll No.....

Name

Father's Name.....



Signature of Students (To be signed in Front of Checking Officer)

Signature Checking Officer

Note: Please Carry the Admit Card while appearing for the Counseling

To.....
.....
.....
.....
.....PIN.....

From:
Desh Bhagat Institute of Hotel Management & Catering Technology
Amloh Road, Mandi Gobindgarh - 147301(Pb.)

Desh Bhagat Institute of Hotel Management & Catering Technology

Mandi Gobindgarh

Phone: 01765-520521, 520522

MEDICAL CERTIFICATE

(To be filled in by Student's Medical Practitioner)

Name of Student :

Address :

Signature of the Students :

I certify that the above student is not suffering form any of the following diseases: -

- | | |
|----------------------------------|------------------------|
| (a) Infectious skin diseases | (b) Psoriasis Follicle |
| (c) Tuberculosis | (d) Trachome |
| (e) Typhoid | (f) Venereal Disease |
| (g) Epilepsy | (h) Leucoderma |
| (i) Convulsions due to any cause | (j) Hepatitis |

MEDICAL HISTORY

.....has not suffered from the above disease or any other major disorder during the past. He/She has been vaccinated for Typhoid.

His/Her Blood Group is.....

Signature of the Medical Practitioner

Name and Address.....

.....

(Attach in original with application)

Registration Number.....

IDENTIFICATION

(To be signed by Gazetted Officer/Municipal Commissioner/Tehsildar/ Sarpanch)

To

The Principal

Desh Bhagat Institute of Hotel Management & Catering Technology.

Mandi Gobindgarh (Pb.)

Subject: Admission

Sir,

**I certify that Mr./Miss/Mrs.....
Son/Daughter/wife ofis known to me
since.....year and he/she bears moral Character. I undertakes his/her
responsibility for the period of his/her study in your Institute.**

Yours faithfully,

Signature

Dated.....

Name.....

Designation.....

Office.....

(Attach in original with application)