

**MARKS VERIFICATION FORM**  
(For NCHM&CT Component only)

SEM IV of B.Sc. Program  
REGULAR STUDENTS  
EVEN SEMESTER TEE – 2016-2017

**NATIONAL COUNCIL FOR HOTEL MANAGEMENT & CATERING TECHNOLOGY**  
**A-34, Sector 62, NOIDA 201 309.**

**THIS FORM IS REQUIRED TO BE SUBMITTED TO THE INSTITUTE  
LATEST BY MONDAY THE 17<sup>TH</sup> JULY 2017**  
(Applications received after the last date will not be accepted)

1. Name in BLOCK letters : \_\_\_\_\_  
(As in ADMIT CARD)
2. NCHM&CT Roll No. : \_\_\_\_\_
3. Institute : IHMCT & AN \_\_\_\_\_
4. Student's Address for Correspondence : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ Pin: \_\_\_\_\_

S/No	Subject(s) for Verification		Marks obtained	Marks after verification (For NCHM use only)
	Subject Code	Subject Name		
1				
2				
3				
4				
5				
6				
7				

**FEE:** Rs.200/- (Two hundred) per subject.

Demand draft No. \_\_\_\_\_ dated \_\_\_\_\_ for ₹ \_\_\_\_\_

drawn on (Bank) \_\_\_\_\_ branch in favour of

National Council for Hotel Management & Catering Technology, Noida is attached.

Date: \_\_\_\_\_

Candidate's signature

**FOR NCHM&CT USE**

An amount of Rs. \_\_\_\_\_ towards the verification fee received.

Cashier

