

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

SEM VI of B.Sc. Program  
Regular & re-appear students  
EVEN TEE – April/May 2014

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

**THIS FORM IS REQUIRED TO BE SENT TO NATIONAL COUNCIL  
LATEST BY 31<sup>st</sup> JULY 2014**

(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<br>(For NCHM use only) |
|------|-----------------------------|--------------|----------------|---|
|      | Subject Code                | Subject Name |                |   |
| 1    |                             |              |                |   |
| 2    |                             |              |                |   |
| 3    |                             |              |                |   |
| 4    |                             |              |                |   |
| 5    |                             |              |                |   |
| 6    |                             |              |                |   |

**FEE:** ₹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 ₹ \_\_\_\_\_ towards the verification fee received.

Cashier

