

INSTITUTE OF HOTEL MANAGEMENT

Tilyar Lake, Rohtak-124001

Affiliated to National Council for Hotel Management & Catering Technology

(an autonomous body under Department of Tourism, Govt. of Haryana)

E-mail Principal.ihmrohtak@gmail.com; Website www.ihmrohtak.com

Application Form for 6 months job oriented hospitality courses

1. **Food Production**
2. **Food & Beverage Service**
(Tick appropriate box)

Passport
size
photograph

1. Name : _____

2. Father's Name: _____

3. Permanent Address: _____

4. Present Address: _____

5. Contact Phone: _____

6. E-mail: _____

7. Date of Birth :

8. Age : years

9. Educational Qualifications:

(to be supported by a certificate issued by the school attended)

Course Title	Duration	School/University	% Marks	Year of Passing

10. Experience :

Organization	Post Held	Department	Date from	Date to	Total duration D/M/Y

Certified that the above details are true and that if found incorrect my admission is likely to be cancelled.

(Signature of the Candidate)

Date: _____

Note: Principal reserves the right to cancel or postpone the courses if there are not sufficient numbers of candidates.

Ph. No. 01262-215533/34