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**APPLICATION FORM FOR B.Sc .HOSPITALITY AND HOTEL ADMINISTRATION PROGRAM  
 ( RESIDUAL SEATS)**

- 1) Name of applicant: \_\_\_\_\_
- 2) Father's Name: \_\_\_\_\_  
 (as per Sr. Secondary Certificate)
- 3) Mother's Name: \_\_\_\_\_  
 (as per Sr. Secondary Certificate)
- 4) Category (Gen/SC/ST/PH/KM):  GEN  SC  ST  KM  PH
- (Please tick)
- 5) Date of Birth:        
 (Date) (Month) (Year)  
 (as per Secondary School (10<sup>th</sup>) Certificate issued by the Board)
- 6) Age as on 1<sup>st</sup> July 2024 :      
 (Years) (Months) (Days)
- 7) Whether JEE given Yes No ( If yes Rank-----)  
 (please tick)
- 8) Marks obtained in 10+2 or equivalent examination (English + best of 4 subjects):

S.No.	Subject	Max. Marks	Marks Obtained	% of Marks	Year of Passing	Name of Board
1.	English					
2.						
3.						
4.						
5.						
<b>Total:</b>						

- 9) Hostel required (please tick): Yes  No

**Declaration:** We hereby declare that particulars furnished above are true and correct to the best of our knowledge. We have gone through and understood the conditions of admission.

Signature of Applicant

Signature of Parent

Address:

Address:

M.No:

M.No:

Email:

Email:

Place:

Place:

Date:

Date:

Self-attested copies to be attached:

- 1) 10<sup>th</sup> Marksheet
- 2) 12<sup>th</sup> Marksheet
- 3) Address Proof
- 4) Aadhar Card