Form	No.	The order	



BHUBANESWAR SCHOOL OF HOTEL MANAGEMENT & TOURISM

Approved by Govt. of Odisha, Affiliated to UTKAL UNIVERSITY OF CULTURE & Recognised by UGC Govt. of India

Campus:

391, Near Lakheswar Temple, Pahala, Bhubaneswar, Odisha, India Ph: 0674 - 6574091, Mob: 9861290107 E-mail: bshmt_global@yahoo.co.in, Website: www.bshmtodisha.org

Application Form

Name :		***
Contact:	Admission No. :	
Programme :	Scheme :	
Session:		

APPLICATION FOR PROVISIONAL ADMISSION Subject to fulfillment of terms and conditions of the Institutel Instruction to fillup this Form: Please paste Information must be filled in with legible hand writing in Capital letters only except E-mail ID. photograph DO NOT STAPLE · recent passport size coloured photograph of the candidate, Parents & Local guardians should be affixed at the space provided in the form. Student · Mention 'NA' against the columns not required. ADMISSION SOUGHT FOR: (Put / Mark) (A) University Programme. (B) Certificate Programme. **CCFBS** DIPLOMA **BHM** Signature CCHK **PGDHM CCFBP** (B) CATEGORY: Residential Day Scholar **PERSONAL DATA OF STUDENT:** First Name Middle Name Surname Date of Birth: (in words) Nationality Sex: Female Male Religion: OBC GEN Category: SC ST Languages spoken at home: Mother tongue: Student's Passport No.: **Expiry Date** Date & Place of Issue: Aadhar No: PERMANENT PRESENT ADDRESS: Plot No/Street No. & At: Plot No/Street No. & At: PS. PO.: PO.: City: City: **PIN Code** PIN Code: **HOME** - Tel Fax Fax HOME - Tel Mobile: Mobile: E-mail: E-mail: (A) ACADEMIC RECORD: Board / Council / Subject Taken **Total Mark** % of Mark Year of Passing Mark Securd SI No Course University 1. 2. 3. (B) SCHOOL PERFORMANCE: Aggregate percentage/grade in the last Examination (True copy of the marksheet of qualifying Examination must be submitted)

5.	PROFICIENCY RECORD:
	Please provide details of achievement in :
	Sports
	Performing Art, Music, Dance, Drama, Debates etc.
	Position or responsibility held in School of community
	Other
6.	PARENT'S/GUARDIAN'S INFORMATION:
	Father's Name
	Guardian's Name (In case the father is not alive)
	Mother's Name
	Student residing with at present Parents Guardian Other
7.	PROFESSION/OCCUPATION:
	FATHER/GUARDIAN
	Profession/Occupation
	Ph.:
	Email:
	MOTHER
	Profession/Occupation
8.	LOCAL GUARDIAN'S INFORMATION: (For Residential Students only)
	Local Guardian's Name Signature
	Name of Organisation Designation
	Off. Address
	Ph.:
	Email
	Local Guardian's relationship with Student

Name and address of the person to whom accounts for fees should be sent.					
Name and address of the person to whom accounts for fees should be sent. Name					
Name Address	Name				
Address I/We certify that the information furnished in this form is true to the best of my knowledge and be incorrect information if supplied in this application can jeopardize selection and enrolment. I have the prospectus and having satisfied myself want to get my son/daughter/ward admitted in this program. Father/Mother/Guardian of					
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do hereby declare that I will cooperate with the BSHMT Management by following the instruauthorities in terms of financial, academic and administrative policies from time to time. I will decisions the Management if taken against my ward for deviation of rules and regulations of the Institute Date:	nent. I have gone through n this programme				
authorities in terms of financial, academic and administrative policies from time to time. I will decisions the Management if taken against my ward for deviation of rules and regulations of the Institute 11. ANTI-RAGGING UNDERTAKING I do here by give an undertaking that I will never be directly or indirectly, Physically or an alibi be a part form of ragging. in case the management find me involve they are free to take action according rules of the Institute Student Signature Parents/Guardian Signature 12. DOCUMENTS TO BE SUBMITTED AT THE TIME OF PROVISIONAL: a. True copy of the markssheet / Progress report of the last qualifying examination. b. True copy of the certificates of merit, if any. c. Birth certificate (photocopy) or Passport copy or Xth Board Certificate or +2 Certificate / +3 Cert d. Photographs: Student (four nos), Parents (two nos), Local guardians (two nos) e. Conduct certificate from the Head of the Institution last attended. f. Registration Fee. g. Copy of caste certificate wherever applicable. h. Migration Certificate (ICSE, CBSE, NCERT) 13. REFERENCES: (DETAIL OF ONE PERSONS WHO CAN VOUCHER FOR YOU NOT RELATED TO YOU) Name Occupation Tel # Address PIN code Country					
11. ANTI-RAGGING UNDERTAKING I do here by give an undertaking that I will never be directly or indirectly, Physically or an alibi be a part form of ragging, in case the management find me involve they are free to take action according rules of the Institute Student Signature Parents/Guardian Signature 12. DOCUMENTS TO BE SUBMITTED AT THE TIME OF PROVISIONAL: a. True copy of the markssheet / Progress report of the last qualifying examination. b. True copy of the certificates of merit, if any. c. Birth certificate (photocopy) or Passport copy or Xth Board Certificate or +2 Certificate / +3 Certificate describing the photographs: Student (four nos), Parents (two nos), Local guardians (two nos) e. Conduct certificate from the Head of the Institution last attended. f. Registration Fee. g. Copy of caste certificate wherever applicable. h. Migration Certificate (ICSE, CBSE, NCERT) 13. REFERENCES: (DETAIL OF ONE PERSONS WHO CAN VOUCHER FOR YOU NOT RELATED TO YOU) Name Occupation Tel # Address PIN code Country	time. I will abide by the ons of the Institute/hostel.				
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Name Occupation Tel # Address PIN code Country	ate / +3 Certificate				
Address PIN code Country	ED TO YOU)				
FOR OFFICE USE ONLY	ry				
1. Application Fee paid : Yes No 2. Appeared Admission Test : Yes No					
3. Qualified in Admission test : Yes No 4. Recommended for admission in as Boarder/	as Boarder/Day scholar.				
5. Admission : 6. Received (Rs /USD)					
Vide Cash / Cheque / DD No. towards registration. Receipt No.					

Verified By

Secretary

Principal