

# ADMISSION FORM 2025

(for Office use)

e-Chat Reg. No..... Form No..... / 2025

Affix  
coloured  
passport  
size photo

(Please tick)

- |                                    |                                    |                                    |                                    |
|------------------------------------|------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> KOLKATA   | <input type="checkbox"/> DELHI     | <input type="checkbox"/> PUNE      | <input type="checkbox"/> JAIPUR    |
| <input type="checkbox"/> BANGALORE | <input type="checkbox"/> HYDERABAD | <input type="checkbox"/> GOA       | <input type="checkbox"/> AHMEDABAD |
| <input type="checkbox"/> SILIGURI  | <input type="checkbox"/> BANGKOK   | <input type="checkbox"/> SAMARKAND |                                    |

Name

Middle Name  Surname

Gender Male  Female  Date of Birth 

D	D	M	M	Y	Y
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Place of Birth

Nationality  Religion

Guardian Name

Father's Mob.  Mother's Mob.

## CONTACT DETAILS

(Please fill-up the form in capital letters only)

Permanent Address   
  
 Pin

Correspondence Address   
  
 Pin

Phone  STD  Mob.

E-mail ID

## ACADEMIC QUALIFICATION

	School Name	Board	Year	% of Marks
Class X level	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>
<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>
Any other	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>

I am enclosing a sum of Rs..... Cash/Bank Draft No. .... drawn .....

On..... (Bank) dated ..... towards the fees for the above Course for 1st Year.

I have read the Rules & Regulations contained overleaf and agree to abide by them.

I understand that fees paid by me is NOT refundable.

.....  
**Full Signature of the Candidate with Date**

.....  
**Full Signature of the Guardian with Date**

Receipt No..... Amount.....

Date..... Batch.....

.....  
**Full Signature with Name/Date/Seal**

**NB:** Please send the filled in application form to the respective Campus address  
International Institute of Hotel Management mentioned in the Back cover of the brochure

.....  
**Authorised Signatory.**