National Council for Hotel Management & Catering Technology A-34, SECTOR 62, NOIDA 201309

APPLICATION FOR CHANGE OF CENTRE

Academic Year 2022-2023

(Please ensure that you are eligible for change of centre before filling up this form)

Γ)	CHANGE OF CENTRE FE		
Council Roll No Institute Name 1. Name of the candidate in English (full name in BLOCK letters)			(Photograph to be attested by Principal)
1.	Name of the candidate in Ei	nglish (full name in BLOCK Middle name	Surname
	iist name	Wildle hame	Summe
	(Please note that the name written a	bove should be same as given in yo	our +2 CBSE/Board Certificate)
2.	Student's Mobile No.		
3.	Student's Email id :		
4.	Father's / Mother's Name		
5.	Permanent residential address for correspondence :		
	ė, P	in: Alternate/	Landline No
6.	Date of Birth (by Christian era) 7. Sex: Male/Female		
8.	Give details of the exam C	entre opted for appearing in	
	didate's signature	Princi	pal's signature with office seal
_		FOR NORMACT LIST	
		FOR NCHMCT USE	
Fe	e received	Examination particulars Checked & Verified	Examination Hall Admission ticket issued.
	Dealing Assistant	Executive Officer (S)	Assistant Director (T)