

HOSPITALITY TRAINING PROGRAMME

(Hunar se Rozgar)

Institute of Hotel Management, Shillong

(sponsored by the Ministry of Tourism, Government of India and affiliated to
National Council for Hotel Management & Catering Technology)

Application Form Skill Testing And Certification

1. Cooks - 6 days
2. Bakers - 6 days
3. Waiters - 6 days
4. Housekeeping - 6 Days
(Tick appropriate box)

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Passport
size
Photograph

1. Name: _____

2. Permanent Address: _____

3. Present Address: _____

4. Contact Phone : _____

5. E-Mail : _____

6. Date of Birth:

7. Age: Years

8. Educational Qualifications:
(If any to be supported by a certificate issued by the school attended)

Sl. No.	Course Title	Duration	School/University	% Marks	Year of Passing

9. Experience:

Sl. No.	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.

Date: _____

(Signature)