



F.No.4/12/2011/ACA/2023/DIHM/603

Date:-17/07/2023

NOTICE

As per guidelines of the NCHMCT for the academic session 2023-24 for B.Sc.(HHA) 1st Semester, the students are hereby informed that the photocopies of following documents duly self-attested are required during physical reporting on 1st, 2nd and 3rd August, 2023 between 10.00 AM to 4.00 PM along with original certificates:

1. NCHM JEE Online Document Verification Certificate/Allotment letter
2. 10th Class Marksheet and Certificate
3. 12th Class Marksheet and Certificate
4. Category Certificate (if any) SC/ST/OBC/EWS issued by the competent authority
5. PwD Certificate (if any)
6. Two latest pass-port size photographs
7. Two affidavits
 - (i) Anti-Ragging by student
 - (ii) Anti-Ragging by parents

(The formats for the affidavits are attached as Annexure-I & II)
8. Medical Fitness Certificate that was submitted during counselling attested by a Registered MBBS doctor (in the Prescribed format as given on www.nchmcounselling.nic.in)
9. Registration form duly filled (Attached)
10. ID form (Attached)

(SEEMA BHATIA)
OFFICIATING PRINCIPAL/H.O.O.

ANNEXURE I
AFFIDAVIT BY THE STUDENT

I, (Name of Student) admission/registration enrollment/No. S/o Mr. (Father's Name) having been admitted to DIHM&CT, Lajpat Nagar-IV Delhi have received or a download copy of the UGC Regulation on curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulation") carefully read and fully understood the provisions contained in the said Regulations.

- 1) I have, in particular, perused clause 3 of the Regulation and am aware as to what constitutes ragging.
- 2) I have, also, in particular, perused clause 7 & clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 3) I hereby solemnly aver and undertake that
 - a). I will not indulge in any behavior or act may that may be constituted as ragging under clause 3 of the Regulations.
 - b). I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 4) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under penal law or any law for the time being in force.
- 5) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.
- 6) Along with the above mentioned points I do hereby declare that
 - a) I will obey the code of conduct of the institute and do not indulge in any kind of in-disciplined activity while in and off the institution campus.
 - b) I will be solely responsible for any kind of accident/mishap caused on account of the above mentioned clause (6.a).

Declared on this _____.

(Signature for Deponent)

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at Delhi on this the _____.

(Signature of Deponent)

Solemnly affirmed and signed in my presence on this the _____ reading the contents of this affidavit.

ANNEXURE II
AFFIDAVIT BY PARENT /GUARDIAN

I, Mr. (Full Name of Parent/guardian) father of (Student's Name) admission/registration/enrolment No having been admitted to DIHM&CT, Lajpat Nagar-IV Delhi have received or downloaded a copy of the UCG Regulations on Curbing the Menace of Ragging in Higher Education Institution, 2009, (hereinafter called the "Regulation") carefully read and fully understood the provisions contained in the said Regulations.

- 1) I have, in particular, perused clause 3 of the Regulation and am aware as to what constitutes ragging.
- 2) I have also, in particular perused clause 7 & clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 3) I hereby solemnly aver and undertake that:-
 - a) My ward will not indulge in any behavior or act that may be constituted as ragging under clause 3 of the Regulations.
 - b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 4) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulation, without prejudice to any other criminal action that may be taken against my ward under penal law of any law for the time being in force.
- 5) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of abetting or being part of a conspiracy to promote, ragging; further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.
- 6) Along with the above mentioned points I do hereby declare that
 - a) My ward will obey the code of conduct of the institute and do not indulge in any kind of in-disciplined activity while in and off the institution campus.
 - b) My ward will be solely responsible for any kind of accident/mishap caused on account of the above mentioned clause (6.a).

Declared this _____

(Signature for Deponent)

Name:

Address:

Mobile No.:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____.

(Signature of Deponent)

Solemnly affirmed and signed in my presence on this _____ after reading the content of this affidavit.

DELHI INSTITUTE OF HOTEL MANAGEMENT & CATERING TECHNOLOGY

(Govt. of NCT of Delhi)
Lajpat Nagar-IV, New Delhi-110024

Ph:- 91-9711922320, email:- principaldihm@yahoo.com

Paste Passport
Size Photo

Registration Form

Course:- B.Sc. in Hospitality & Hotel Administration Session:- 2023-26

Semester:-

1. Name: _____
2. JEE Roll No.: _____
3. NCHM&CT Roll No. _____
4. JNU Enrollment No.: _____
5. Permanent Address: _____

6. Present Address: _____

7. Telephone No.(with STD Code): _____
Mobile No & Email: _____
8. Father/Mother/Guardian Name: _____
 - (i) Designation/Occupation: _____
 - (ii) Office Address:- _____
 - (iii) Telephone No.(Off.): - _____
 - (iv) Mobile No.: _____
 - (v) E-mail: _____
9. Father's Annual Income: _____

10. Mother's Annual Income: _____
(in case she is in job/Business)
11. Local Contact &Address: _____
(For use in case of emergency outstation candidates)
- Telephone No.: _____
- Mobile No.: _____
12. Details of any major illness/ _____
Accident/operation/allergy/
Physical disability if any
13. Blood Group: _____

Declaration:

I agree to abide by rules and regulation of DIHM&CT. All statements made herein are true to the best of my knowledge and in case they are found to be not, the admission may be cancelled at any stage during the course. I assure that my ward must fulfill requisite eligibility norms, and a minimum 75% aggregate attendance to as per the semester End Examinations.

Signature of parent/guardian

signature of student

Date:- _____

Place:- _____

FOR OFFICE USE ONLY

Fee Receipt No. _____

Date:- _____

Checked By

**DELHI INSTITUTE OF HOTEL MANAGEMENT & CATERING
TECHNOLOGY
(GOVT. OF NCT OF DELHI)
LAJPAT NAGAR-IV, NEW DELHI-110024
Ph:- 91-9711922320, email:- principaldihm@yahoo.com**

IDENTITY CARD

PASTE PASSPORT
SIZE PHOTO

Name:- _____

Designation:- _____

Card No.:- _____

Signature _____

Validity	
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Blood Group: _____

Husband Name: _____

Mother's Name: _____

E-mail: _____

Contact person's Name & Address:- _____

Tel. No./Mobile No. (If any): _____

**(Seema Bhatia)
Officiating Principal**