

होटल प्रबन्ध व्यवस्था भोजन भण्डार एवं पौषाहार संस्थान, गुरदासपुर
बरियार, जी.टी.रोड, गुरदासपुर 143521



(An Autonomous Body under Ministry of Tourism, Government of India) (पर्यटन मंत्रालय भारत सरकार के अधीन स्वयत्तशासी निकाय)
दुरभाष/Tel No. 01874-222501, 222502 Fax 222505

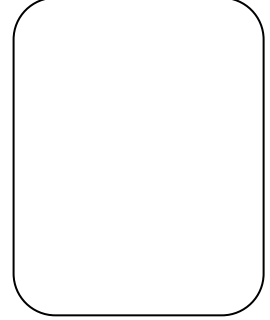
ईमेल/E-mail: mail.ihmgsp@gmail.com, वैब साईट / Web Site: www.ihmgurdaspur.org

HUNAR SE ROZGAR – THROUGH HOTELS PROGRAM

होटल द्वारा हुनर से रोजगार तक प्रोग्राम

APPLICATION FORM / आवेदन फार्म

- 1) Food & Beverage Service (Steward) – 500 Hours
- 2) Room Attendant – 500 Hours
- 3) Craft Baker - 240 Hours
- 4) Multi Cuisine Cook – 700 Hours
- 5) Front Office Associate – 540 Hours
- (Tick appropriate box)



1.	Name/ नाम	Marital Status: _____
2.	Father's Name/पिता का नाम:	
3.	Permanent Address/ स्थायी पता: Village/City _____ PO _____ Tehsil _____ Distt. _____ Pin _____ Domicile State _____	
4.	Present Address वर्तमान पता /:	
5.	Contact Phone/संपर्क फ़ोन: Self _____ Father _____	
6.	Date of Birth जन्मतिथि (DD/MM/YYYY): ____/____/____	Category:- _____
7.	Age/आयु ____ Years/साल	Uniform size: Waist size _____ inch, Shirt size _____ वर्दी आकार : कमर का साइज़ शर्ट का साइज़
8.	Identification Type (✓) (Adhaar/PAN/Voter ID)	ID Number:-
9.	Annual Income (Father) :- _____	Student Blood Group: _____
10.	E-mail/ ईमेल:	Nationality / राष्ट्रीयता :- _____
11.	<u>BANK A/C DETAILS OF APPLICANT (AADHAR LINKED BANK ACCOUNT) - MANDATORY</u> Name of Account Holder _____ Bank Account No. _____ Bank Name _____ Branch Name _____ IFSC Code _____	

12. Educational Qualifications/ शैक्षिक योग्यता:-

(to be supported by a certificate issued by the school attended.)

Course Title पाठ्यक्रम शीर्षक	Duration/ अवधि	School/University स्कूल / विश्वविद्यालय	% Marks/ % अंक	Year of Passing पास होने का वर्ष

10. Details regarding legal detention /conviction if any: (Add Additional Sheets if Required)
Undertaking:-

1. I hereby declare that all the information furnished above by me is true to the best of my knowledge and if found otherwise I will be liable for appropriate action.
2. I fully understand that my candidature is subjected to being found medically fit and verification of Character and Antecedents.
3. I hereby undertake to abide by the instructions given by the Training Providers and IHM&CT –Gurdaspur. In case of violation of instructions or misconduct on my part, my candidature will be cancelled.

Date/तिथी: _____

(Student Signature/छात्र के हस्ताक्षर)

Essential documents to be attaché:-

- 1) 4 Nos. of photographs without attestation
- 2) Attested copy of education qualification
- 3) Medical Fitness certificate form MBBS Doctor
- 4) Character Certificate verified by Police Department/MC/Sarpanch
- 5) Photocopy of AADHAR Card , Age Proof (Birth Certificate/10th Marks Sheet)
- 6) Applicant bank account passbook (**Linked with AADHAR Card- Mandatory**)