

Application form No.

Reg. No.

ORIENTAL
SCHOOL OF HOTEL MANAGEMENT
[A Unit of Malabar Hotel Management & Catering Promotion Trust Calicut]
 Lakkidi, Vythiri - 673 576, Wayanad Dist., Kerala State, India.
 Tel: 04936 255355, 255716 - 719. Fax: 04936 255720
Affiliated to University of Calicut, Kerala
B Sc. HOTEL MANAGEMENT & CATERING SCIENCE
SESSION 2011-2014

APPLICATION FORM

(TO BE FILLED IN CAPITAL LETTERS ONLY)

1. Name of the applicant
(as in the 10th class or equivalent certificate)

2. Age & Date of Birth

| Age | Day | Month | Year |
|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

3. Sex (tick which is applicable)

Male Female

4. Nationality

5. Religion

Community

6. Caste and sub caste

SC ST OBC OEC LC

| | |
|-------------------|----------------------|
| Name of caste | <input type="text"/> |
| Name of sub caste | <input type="text"/> |

(Please attach the Community Certificate and Income Certificate issued by competent authority for Reserved Category)

7. Reserved Category

Ex-Service Men Widows Children of Jawan NSS/NCC

8. Father's/Guardian's name

Occupation

9. Full home address to which communications are to be sent

Pin:

Phone No. with STD code :

Mobile No:

Email :

10. Emergency contact

Name

relation

Address

Pin:

Phone No. with STD code :

Mobile No:

Email :

11. Annual family income

Paste one passport size photograph here

12. Educational qualifications:

| Title of Course/ Examination | Name of the Institution | Board / University | Year of Passing | % of Marks / Grade |
|---------------------------------|-------------------------|--------------------|--------------------|-----------------------|
| | | | | |

13. Record of performance at the Plus 2 or equivalent examination

| Subject | Marks obtained | | Minimum marks | Maximum marks |
|----------------------|----------------|----------|------------------|------------------|
| | In figures | In words | | |
| Part I English | | | | |
| Part II (Language) | | | | |
| Part III (Optionals) | | | | |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| Total for Part III | | | | |
| Grand Total | | | | |

| | | | |
|---|----------------|---------------------------|----------|
| 14. No. of chances taken for passing the qualifying examination and the year of passing with Reg. No. | No. of chances | Year and month of passing | Reg. No. |
| | | | |

15. Languages known

16. Mother tongue

17. Did you work in illiteracy eradication programme? Yes No

18. Do you have previous hotel or related experience? Yes No (If yes, please attach copies of certificates)

19. Hobbies

20. Special achievements, if any

21. How did you learn about our courses / Institution (You may tick which all are applicable)

- Newspaper/Magazine/TV Advertisement (Please specify).....
- Recommended by friends / relatives Exhibition / Seminar OGHMI Student
(Please specify the name.....)
- Recommended by school counsellor Direct enquiry
- Others (Please specify)

22. What factors most effected your decision to study at Oriental (You may tick which all are applicable)

- Facilities Location Course contents Course fee Recommendation Others (Please specify)

Declaration

I hereby declare that the particulars furnished above are complete and correct to the best of my knowledge and belief. I understand that giving false or incomplete information may lead to the refusal of my application or cancellation of enrolment. I also understand that my admission is subject to rules and regulations of University of Calicut.

Date : Signature of the applicant :

Place : Signature of the parent / guardian:

Duly filled-in application form with photocopies of certificates and 2 stamp size and 2 passport size colour photographs shall be sent to:
Director, Oriental Group of Hotel Management Institutions, Admn. Office: 2888 B/5, 2nd Floor,
 Emil & Eric Towers, Arayadathupalam Mini Bypass Road, Near Sarovaram Park, Kozhikode-673004, Kerala, INDIA.
 Tel : 0495 – 2725984, 85, 86 Fax : 0495 – 2721028, Email : admin@orientalschool.com

| For Office use only | | |
|---------------------|--|------------------------|
| Admission granted | <input type="checkbox"/> Yes <input type="checkbox"/> No | Signature of Principal |
| Batch No. | Registration No. | |