



AISSMS

COLLEGE OF HOTEL MANAGEMENT
AND CATERING TECHNOLOGY

NEW BEGINNINGS, ENDLESS POSSIBILITIES



Approved by AICTE, New Delhi, Recognized by the Government of Maharashtra
An Autonomous College Under Savitribai Phule Pune University, Pune
NAAC Accredited "A" Grade

APPLICATION FORM FOR FIRST YEAR OF BACHELOR OF SCIENCE CULINARY STUDIES (B.Sc.-C.S.)

Enter Name Details: (BLOCK LETTERS)

Surname :

First Name :

Father's Name :

Mother's Name :

Gender : Male Female

Date of Birth :

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Nationality : Indian Foreigner

Whether a Non Resident Indian: Yes / No

Student's Mobile No.: Parent's Mobile No:

Email:

Religion :

Caste and Sub Caste:

Category: SC/ST/DT/NT...../VJ/SBC/OBC/SEBC Others

Admission claimed under any reserved category shall be confirmed only after submission and verification of relevant documents as per Govt. requirements; otherwise, the admission will automatically be considered under the Open Category.

Address for Correspondence (PERMANENT):

.....
.....

City: State: Pin Code



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Details of Academic Profile:

Board	Name of Institution	Name of Examining Body	Month & Year of Passing	Max Marks	Marks Obtained	% Marks	Number of Attempts	Pass
SSC								
HSC								

Attested True Copies of the following Certificates:

- I. Statement of marks for SSC.
- II. Statement of marks for HSC.
- III. College Leaving Certificate / Transfer Certificate.
- IV. Category students to provide the necessary documents as per office requirements. (list of documents available with the administration office)

I hereby declare that:

I have not been debarred from appearing at any examination held by any Government constituted or statutory examination authority in India.

I further declare that I have not been involved in any prosecution pending against me in connection with copying, or for any other case of misconduct, at any college / University Examinations.

The information given above is true to the best of my knowledge and belief.

Additional non-refundable fee for Uniforms, Blazer, Toolkit, Books, Journals, etc. will be levied, at the time of admission.

Date:

Place:

Signature of Parents

Signature of Candidate

For Office Use

Scrutinized by: _____

Challan No. _____

Remarks of the Principal: Admitted / Not Admitted

PRINCIPAL