

**Institute of Hotel Management Catering Technology and Applied Nutrition, Yamunanagar  
Village Bhamboli, Distt. Yamunanagar- 133103**

**Application Form for Teaching Associate**

1.	Name of Candidate (in Capital letters)					A recent Passport Sized coloured Photograph to be pasted here and signed across
2.	Date of Birth	Day	Month	Year	Age as on 27.08.2019	
3.	Father's Name/ Husband's Name					
4.	Nationality					
5.	Gender (Male/ Female)					
6.	Marital Status	<input type="checkbox"/>	Married	<input type="checkbox"/>	Single	
7.	Category (Please tick in appropriate box)	Gen <input type="checkbox"/>	SC <input type="checkbox"/>	ST <input type="checkbox"/>	OBC <input type="checkbox"/>	
8.	Address with Pin Code					
9.	Mobile No.					
10.	E-mail Id.					
11.	Educational Qualifications: (in ascending order)					
Sr. No.	Name of the Exam Passed	Name of the Board/ NCHMCT/ IGNOU/ SBTE/ University		Year of passing	% of Marks up to two decimals	
a)	10 <sup>th</sup>					
b)	12 <sup>th</sup>					
c)	Graduation (Please specify stream)					
d)	3 Year Diploma/ Degree in Hotel Management/ Degree in Hotel Administration (fulltime)					
e)	Masters (Please specify Stream)					
f)	Any other relevant qualification					

12.	NHTET Details:-				
Sr. No.	Roll no.	Max. Marks	Marks Obtained	Qualified/ Not Qualified	Date of Qualification
13	Work Experience (in chronological order beginning from the present job):				
Sr. No.	Designation & Pay Scale	Organization	Period of service		Reason for leaving the job
			From	To	

14. Present post with scale of pay & pay drawn: .....
15. Disclosure about past disciplinary proceedings, if any.....  
 ..... (Add additional sheets if required)
16. Details regarding legal detention/ conviction if any: .....
- ..... (Add additional sheets if required)
17. Any other information desired to be furnished: .....
- ..... (Add additional sheets if required)

Date: \_\_\_\_\_ (Signature of the applicant)  
 Place: \_\_\_\_\_

**Declaration:**

I hereby declare that all the particulars furnished by me in this application are true to the best of my knowledge and belief. If any of the information/ particulars furnished by me is found to be false at any stage, I am aware that my candidature/ selection is liable to be rejected/ cancelled by the appropriate authority without assigning any reason.

Date: \_\_\_\_\_ (Signature of the applicant)  
 Place: \_\_\_\_\_

❖ **Note:** Please use additional sheets for item 11 and 13, if required. Enclose self-attested copies for educational qualification and work experience.