

# Clarks Center for Hotel Management Studies (CCHMS)



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 www.cchms.com



## APPLICATION FOR ADMISSION

|             |  |
|-------------|--|
| Form Number |  |
|-------------|--|

|      |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|
| Date |  |  |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|--|--|

### Instructions

- Application should be filled by the applicant in his/her own handwriting.
- Attested copies of all certificates should be sent along with this form & original certificates should be produced at the time of admission.
- All details should be filled in Block Letters.
- Incomplete application will not be considered.
- Non-Indians & NRIs should attach attested copy of Passport/Visa.

### Course Applying for (Please Tick)

| CERTIFICATE COURSES (DUAL CERTIFICATIONS FROM CCHMS & THSC)                        |  | Please paste one passport size photograph and clip the other four |
|--|--|---|
| <input type="checkbox"/> 6 Months Certificate Course in Food & Beverage Operations | <input type="checkbox"/> 6 Months Certificate Course in House-Keeping Operations       |   |
| DIPLOMA COURSES (THREE CERTIFICATIONS FROM CCHMS, THSC, CITY & GUILDS)             |  |   |
| <input type="checkbox"/> 18 Months Diploma Course in Food & Beverage Services      | <input type="checkbox"/> 18 Months Diploma Course in Reception (Front Office) Services |   |
| <input type="checkbox"/> 18 Months Diploma Course in House-Keeping Services        | <input type="checkbox"/> 18 Months Diploma Course in Food Preparation & Culinary Arts  |   |

### Personal Information

|  |                         |   |           |
|--|-------------------------|---|-----------|
| Full Name :  | Surname                 | First Name  | Last Name |
| Name in Devanagari Script :  |                         |   |           |
| Mobile :   | Email:                  |   |           |
| Name & Address of Local Guardian :<br>(Address for Correspondence) .....                           |                         |   |           |
| Pin Code :   | Phone :                 | Email :   |           |
| Permanent Address : .....  |                         |   |           |
| Pin Code :   | Phone :                 | Email :   |           |
| Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other | Date of Birth :         | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Age :     |
| Marital Status :   | Nationality :           | Religion :  |           |
| Mother Tongue :  | Other Languages Known : |   |           |
| Blood Group :  | Height :                | Weight :  |           |
| Past Medical History (if any) :  |                         |   |           |
| Computer Literacy :  |                         |   |           |

## Academic Record

| Examination Passed/Appeared | Board/University & Place | Year of Passing | % of Marks | Subjects |
|-----------------------------|--------------------------|-----------------|------------|----------|
|                             |                          |                 |            |          |
|                             |                          |                 |            |          |
|                             |                          |                 |            |          |
|                             |                          |                 |            |          |

## Family Details

|          | Name | Occupation | Phone |
|----------|------|------------|-------|
| Father   |      |            |       |
| Mother   |      |            |       |
| Siblings |      |            |       |

Annual Family Income :

Work Experience (if applicable) : .....

What are your hobbies & other leisure interests? .....

## UNDERTAKING

- 1) I have filled this Application Form for admission after reading and understanding the rules and regulations given in this e-Prospectus/Prospectus.
- 2) I have noted that registration does not guarantee admission, and that I would need to go through the selection procedure accordingly in this matter.
- 3) If selected, I shall pay all fees as per the Course I am selected for, on or before the due dates. I am fully aware that tuition fees once paid are non-refundable.
- 4) The information given by me in this Registration Form is true and correct to the best of my knowledge and belief. I am aware of and agree that if any information herein turns up false, I would be liable to be expelled from CCHMS, with no consequential liability on it.
- 5) I hereby undertake, if admitted, to attend lectures and internal assessment programs regularly at CCHMS. If I fail to do so, my admission is liable to be cancelled.
- 6) I hereby agree, if admitted, to conform to the rules and regulations in force, or as may hereafter be made for the governance of CCHMS and I undertake that so long as I am student of the Center, I will do nothing either inside or outside CCHMS that will interfere with its orderly governance and discipline, I further declare that I shall not take part in any movement or activities which are likely to be subversive of law and order, or which will or are likely to bring CCHMS into disrepute.
- 7) I hereby submit to the disciplinary jurisdiction of the officers and the other authorities of CCHMS, and shall observe and abide by the rules made in that behalf, and the rules in force or as may be hereafter made by the Directors of CCHMS.
- 8) I understand that if admitted, my admission will be confirmed only on my production of the Transfer Certificate / Migration Certificate from my previous educational institution.
- 9) I undertake to take an Identity Card immediately and carry it with me while on the CCHMS premises (including The Clarks Hotel during practical training and/or on-the-job training), and to produce it when demanded by the staff.
- 10) I am aware that mobile phones or like instruments have to be switched off in classrooms, library and during any activity in the Center/Clarks Hotel, and that such instruments must be kept away during classes. If such instrument rings or is used during classes, in the library or during practical classes or activities, the instrument is liable to be confiscated by the center's authorities.
- 11) I am aware that storage of or smoking cigarettes or any tobacco device, or chewing or using tobacco, gutkha, panmasala, snuff, or any other such substance in the Center premises including the cafeteria, mess etc. is prohibited and if found doing these, I will be liable for disciplinary action. In any case, I understand that use of such substances is extremely harmful for my health and Life.
- 12) I am also aware that it is my responsibility to keep CCHMS premises clean at all time.
- 13) I undertake that I will not involve myself in any form of 'RAGGING' activity in or outside the Center premises. I will abide by the provisions of the relevant Act passed by the Government in this regard.
- 14) I agree to follow fully and properly all instructions, rules and regulations, and policies of CCHMS, as may be brought to my notice from time to time.
- 15) I am aware that queries or disputes, if any, will be subject to the legal jurisdiction of the courts at Varanasi only.

Date

Signature of Applicant

Signature of Parent/Guardian

Name of Parent/Guardian

Relation with the Applicant