**INSTITUTE OF HOTEL MANAGEMENT, CATERING TECHNOLOGY AND APPLIED NUTRITION, GANDHINAGAR**

(An autonomous body under Ministry of Tourism, Government of India)

Ahmedabad-Gandhinagar Highway (between Koba and Infocity), Bhaijipura Patia,

P.O. Koba, Gandhinagar – 382426

Phone: 079-23276657 E-mail: principal@ihmahmedabad.com

**Post Applied for HOSTEL WARDEN**

|  |  |  |  |
| --- | --- | --- | --- |
| 1 | Name of Candidate(in Capital letters) |  | A recent Passport sized colored Photograph to be pasted here and Signed Across |
| 2 | Date of Birth(birth certificate/leaving certificate) | Day | Month | Year | Age as on 1/2/2020 |
|  |  |  |  |
| 3. | Father’s Name/Husband’s Name |  |
| 4. | Nationality |  |
| 5. | Gender (Male/Female) |  |
| 6. | Marital Status | Married Single |
| 7. | Category | GEN OBC SC ST |
| 8. | Address with Pin Code | Correspondence | Permanent |
|  |  |
| 9. | Tel. No. |  |
| 10. | Mobile No. (Active) |  |
| 11. | E-mail Id. |  |
| 12. | Educational Qualifications **(All attested copies of testimonials to be attached)** |
| SI. | Name of the Exam passed | Name of the Board/University | % of Marks up to two decimals |
| a) | 12th standard / Higher Secondary |  |  |
| b) |  Graduation  |  |  |
| c) | Any other higher Qualification |  |  |
| **13** | **Job Experience, if any** |
| SINo. | Name of the Organisation | Salary drawn | Period of service | ReasonForleaving |
| From | To |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **14** | **Details of payment** |
| Name of the Bank & Demand Draft No. | Date of Demand Draft | Amount |
|  |  |  |

**Place :**

**Date : (Signature of the applicant)**

**……………………………………………………………………………………………………………………….......**

**Declaration**

I hereby declare that all the particulars furnished by me in this application are correct 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, my candidature / selection is liable to be rejected / cancelled by the appropriate authority without assigning any reason.

Place :

Date : (Signature of the applicant)

Name :……………………………