

Manyawar Kanshiram Institute of Tourism Management

HSRT- Hospitality Training Programme

Institute of Hotel Management, (Sponsored by Ministry of Tourism, Government of India and affiliated to National Council for Hotel Management & Catering Technology)

Application Form

Course Offered (Please tick any one)

S No	Course	Duration in Hours	Tick Any One
01	Room Attendant	500	<input type="checkbox"/>
02	Tour Guide	430	<input type="checkbox"/>
03	Front Office	540	<input type="checkbox"/>

Paste Recent Photo

1. Name:- _____ Gender: Male Female
2. Father's Name:- _____ Mob No _____
2. Mother's Name:- _____ Mob No _____
3. Permanent Address:- _____

4. Candidate's Contact Phone:- _____
5. Category (SC/ST/OBC/Gen) _____
6. E-Mail:- _____
7. Candidates Adhaar No : _____
8. Family Monthly Income:- _____
9. Date of Birth: / /
10. Age as on Current Date _____ years
11. Educational Qualifications:-
(To be supported by a certificate issued by the school attended)

Examination	Duration	School/University	% Marks	Year of Passing
5th	One Year			
10th	One Year			
12th	One Year			

12. Experience

Organization	Post Held	Department	Date From	Date To	Total Duration D / M / Y

I certify that the above details are correct and if found incorrect, my admission is likely to be cancelled.

Date: _____

Signature of Candidate

Manyawar Kanshiram Institute of Tourism Management
Hunar Se Rozgar Tak Scheme

Two References

<p>1. Name.....</p> <p>2. Father's Name.....</p> <p>Address.....</p> <p>.....</p> <p>.....</p> <p>Mobile No.....</p> <p>Relation with Candidate.....</p> <p>.....</p>	<p>1. Name.....</p> <p>2. Father's Name.....</p> <p>Address.....</p> <p>.....</p> <p>.....</p> <p>Mobile No.....</p> <p>Relation with Candidate.....</p> <p>.....</p>
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OFFICE WORK

<p>Eligibility.....</p> <p>Batch No.....</p> <p>Principal Seal</p>	<p>Coordinator HSRT Signature & Seal</p>
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BANK DETAILS

Paste Pass Port
Size Photo
here

The following details to be filled by the Candidates. Also attach documentary proof

Name of Bank Account Holder.....
Name of Bank
Bank A/C No.....
Bank IFSC Code.....
Branch Name.....
Aadhar No.

Documents attached

1. Copy of Bank Pass-Book.
2. Copy of Adhar Card
3. Copy of Certificates

Dated:

Signature of Candidate

Verified by Project In-charge

Manyawar Kanshiram Institute of Tourism Management Hospitality Training Programme

Course..... Roll No..... Batch No.
Name.....
Father's Name.....
Permanent Address.....
Area of Training.....
Training Centre/Name of Hotel.....
Duration of Training.....
Employment Status.....

Dated:.....

(Signature of Candidate)

Mob .No.....