



B. N. INSTITUTE OF INTERNATIONAL STUDIES

(A UNIT OF VIDYA PRACHARINI SABHA)

APPLICATION & ENROLMENT FORM 20 - 20

CERTIFICATE IN HOTEL OPERATIONS / LANGUAGES : FRENCH/GERMAN/ENGLISH

Form No :

Passport
Size Photo to
be cross signed
by candidate

(To be filled in by the candidate in his/her own handwriting in capital letters in English)

1. Name of the Applicant :

2. Father's Name :

Occupation : Annual Income

3. Mother's Name :

Occupation : Annual Income

4. Present Address :

City / District Pin code

Phone No : Mobile No.

E- mail

5. Permanent Address :

City / District Pin code

6. Date of Birth : Sex : Male Female

7. Language known : _____

8. EDUCATIONAL QUALIFICATIONS :

Examination	School/ College	Board or University	Year	% Secured
Graduation				
12th				

9. EXTRA CURRICULAR ACTIVITIES :

Please give a brief Account of your Hobbies and Interest _____

10. MENTION YOUR :

STRENGTH

1. _____
2. _____
3. _____

WEAKNESS

1. _____
2. _____
3. _____

11. CHECKLIST OF CERTIFIED TESTIMONIALS

- Certified copy of Birth Certificate
- Certified copy of Senior Secondary examination's marksheet
- Certified copy of ID proof (Passport / Driving Licence / Other)

12. PROGRAMME FEE CHEQUE / DD IN FAVOUR OF BN GROUP OF INSTITUTES.

PARENT'S / GUARDIAN'S CONSENT

I propose my ward to join the Certificate in Hotel Operations/Languages : French/German/English at BNIIS. In this regard, I undertake full responsibility towards his/ her conduct and discipline. I also certify that the information given by my ward in the above application is correct to the best of my knowledge. In the event my ward is admitted to the said course, I will be responsible for payment of fees and other dues from time to time.

Date _____ Name of the Parent/ Guardian _____

SIGNATURE

DECLARATION

1. I solemnly declare that all the fact stated herein, are true to the best of my knowledge and belief.
2. I will abide by the rules and code of conduct of B. N. Institute of International Studies(A Unit of Vidya Pracharini Sabha), Udaipur.
3. I am fully aware that the certificate of completion of this course would be issued by Vidya Pracharini Sabha on the basis of evaluation of my skills by them (V.P. Sabha)
4. I am fully aware that my attending of any class without paying the full tuition fees will be treated as breach of B. N. Institute of International Studies policy, and in such case B. N. Institute of International Studies, Udaipur will have all the right to recover the outstanding fees.
5. I understand that my fees will not be refunded once the programme/ course is joined.
6. As specified in this enrolment form and in accordance with the guidelines about the use of personal information, I authorize B.N. Institute of International Studies, Udaipur to contact organizations in relation to the information provided by me.
7. I agree that in case of any change in my address, personal details or emergency contact numbers, I will immediately inform the B.N. Institute of International Studies, Udaipur.
8. I understand that programme listed will be taught subject to final approval or adequate number of enrolments. In case of any unforeseen circumstances such as students demand and / or resource availability, B.N. Institute of International Studies, Udaipur reserves the right to cancel or change the content, timing, method or place of delivery of any programme / course.
9. I will keep myself informed of, and will comply with, the provision, policies, and regulation of B.N. Institute of International Studies.

Applicant's Signature _____ Date: _____

Parent / Guardian's Signature _____ Place _____

FOR OFFICE USE

Checked _____ Complete _____ Receipt No _____ Enrol No _____

DIRECTOR

PROGRAMME COORDINATOR



B. N. INSTITUTE OF INTERNATIONAL STUDIES

(A UNIT OF VIDYA PRACHARINI SABHA)

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