



(Deemed to be University) (Accredited by NAAC in 'A' category), Hamdard Nagar, New Delhi-110062

## HAMDARD VOCATIONAL KNOWLEDGE CENTRE

**MORADABAD, 244001** 

(An off-campus centre of JAMIA HAMDARD, New Delhi)

## **ADMISSION FORM**

PROGRAMME: DIPLOMA

| APPLICATION   |                                   |              |  |  |  |
|---|-----------------------------------|--------------|--|--|--|
|   |                                   |              |  |  |  |
| DATE (DD/MM/YYYY)   |                                   |              |  |  |  |
| DIPLOMA:  |                                   |              |  |  |  |
| FOOD TECHNOLOGY (DFT)   | PLEASE AFIX YOUR                  |              |  |  |  |
| FOOD TECHNOLOGY SPECIALIZATION IN BAKERY AND CONFECTIONERY TECHNOLOGY (DBT)  PLEASE AFIX TOUR PHOTO |                                   |              |  |  |  |
| FOOD TECHNOLOGY SPECIALIZATION IN DAIRY TECHNOLOGY (DDT)  |                                   |              |  |  |  |
| FOOD TECHNOLOGY SPECIALIZATION IN MEAT, POLUTRY AND FISH TECHNOLOGY (DMT)                           |                                   |              |  |  |  |
| FOOD TECHNOLOGY SPECIALIZATION IN FRUITS AND VEGE   | TABLE PROCESSING TECHNOLOGY (DFV) |              |  |  |  |
| MERCHANDISING (DMZ) FOR OFF   |                                   | ICE USE ONLY |  |  |  |
| SUPPLY CHAIN MANAGEMENT (DSM)   | APPLICATION NO.                   |              |  |  |  |
| EXPORT IMPORT MANAGEMENT (DEX)  | HVKC ROLL NO.                     |              |  |  |  |
| COMPUTER APPLICATION (DCA)  | HVKC ADMISSION NO.                |              |  |  |  |
| FOOD NUTRITION & DIETETICS (DND)  |                                   |              |  |  |  |
| GRAPHIC DESIGN (DGD)  | JH ENROLLMENT NO.                 |              |  |  |  |
| PERSONAL BASIC DETAILS  |                                   |              |  |  |  |
| NAME (Mr/Ms/Mrs) (as per 10 <sup>th</sup> marksheet)  |                                   |              |  |  |  |
| DATE OF BIRTH (DD/MM/YYYY) CATE   | GORY GEN OBC SC                   | ST           |  |  |  |
| AGEMARITAL STATUS   | SPOUSE NAME                       |              |  |  |  |
| NATIONALITY RELIGION  | GENDER MALE                       | FEMALE OTHER |  |  |  |
| PERMANENT<br>ADDRESS  |                                   |              |  |  |  |
|   |                                   |              |  |  |  |
|   |                                   |              |  |  |  |
| CORRESPONDANCE ADDRESS  |                                   |              |  |  |  |
|   |                                   |              |  |  |  |

| IDENTIFICATIO   | ON                               |             |          |                |          |          |         |                   |           |          |
|---|----------------------------------|-------------|----------|----------------|----------|----------|---------|-------------------|-----------|----------|
| GOVERNMENT IDENTIFICATION (Aadhaar/pan/passport/voter Id) |                                  |             |          |                |          |          |         |                   |           |          |
| ID CARD NO.   |                                  |             |          |                |          |          |         |                   |           |          |
| IDENTIFICATIO   | N MARI                           | ζ (if any)  |          |                |          |          |         |                   |           |          |
| ACADEMIC DE   | TAILS                            |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
| CLASS   | BOAR                             | RD/UNIVERSI | SCHOOL/  | STREAM/        |          | ROLL     | FROM    | ТО                | %         | DIVISION |
|   |                                  | TY          | COLLEGE  | SUBJECTS       | 3        | NO.      | (YEAR)  | (PASSING<br>YEAR) | /CG<br>PA |          |
| MINIMUM ET 14   | MINIMUM ELIGIBILTY QUALIFICATION |             |          |                |          |          |         |                   |           |          |
|   | GIBILI                           | 1 QUALIFICA | HON      |                |          |          |         |                   |           |          |
| 10 <sup>TH</sup>  |                                  |             |          |                |          |          |         |                   |           |          |
| 12 <sup>TH</sup>  |                                  |             |          |                |          |          |         |                   |           |          |
| OTHER QUALI   | FICATION                         | ON          |          |                |          |          |         |                   |           |          |
| GRADUATION  |                                  |             |          |                |          |          |         |                   |           |          |
| POST  |                                  |             |          |                |          |          |         |                   |           |          |
| GRADUATION  |                                  |             |          |                |          |          |         |                   |           |          |
| ANY OTHER   |                                  |             |          |                |          |          |         |                   |           |          |
| EVEDIENCE   | (TEL A NIX                       | Z) XVEQ     | <b>.</b> |                |          | <u> </u> |         |                   |           |          |
| EXPERIENCE PROFILE  | (IF AN)                          |             | N        |                | TOTALINA | C DATE   | I EAVIN | C DATE 1          | DA CIZA   | CE       |
| PROFILE   |                                  | COMPANY     | YEAR     | RIENCE IN<br>S | JOININ   | G DATE   | LEAVIN  | GDAIE             | PACKA     | GE       |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
| PARENTS DETA  | ATT C                            |             |          |                |          |          |         |                   |           |          |
| TAKENIS DEIF  | ILS                              |             |          |                |          |          |         |                   |           |          |
| FATHER'S NAM  | E                                |             |          |                |          |          |         |                   |           |          |
| FATHER'S OCCU   | UPATIO1                          | N           |          |                |          |          |         |                   |           |          |
| ANNUAL INCOME CONTACT NO.                                 |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
| MOTHER'S NAM  | 1E                               |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
| MOTHER'S OCCUPATION                                       |                                  |             |          |                |          |          |         |                   |           |          |
| ANNUAL INCOME CONTACT NO.                                 |                                  |             |          |                |          |          |         |                   |           |          |
| PARENT'S PERM   | //ANENT                          | Γ           |          |                |          |          |         |                   |           |          |
| ADDRESS DETA  | ILS                              |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |
|   |                                  |             |          |                |          |          |         |                   |           |          |

| STUDENT'S CURRENT ADDRESS                  |
|--|
| MORADABAD OUTSIDE                          |
| ADDRESS DETAILS                            |
|  |
|  |
|  |
| PHONE NO.                                  |
| LOCAL GUARDIAN DETAILS                     |
| LOCAL GUARDIAN NAME                        |
| GUARDIAN 'S OCCUPATION                     |
| CONTACT NO.                                |
| GUARDIAN'S                                 |
| ADDRESS DETAILS                            |
|  |
|  |
| EMERGENCY CONTACT                          |
| NAME                                       |
| RELATION                                   |
| CONTACT NOADDRESS                          |
|  |
|  |
| FEE SUBMISSION DETAILS                     |
| AMOUNT SEMESTER I II BOTH I&II             |
| AMOUNT (In words)                          |
|  |
| DATE                                       |
| PAYMENT MODE QR SCAN BANK DEPOSIT UPI NEFT |
| TRANSACTION ID (RR/UTR/UPI/DD/NEFT)        |
| FEE PAYMENT PROOF ATTACHED                 |
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| DOCUMENTS ATTACHED   |   |   |   |  |
|--|---|---|---|--|
| Following documents as   | re attached with the fo   | rm-   |   |  |
| <ol> <li>12<sup>th</sup> Marksheet.</li> <li>Graduation Marksheet.</li> <li>Graduation Marksheet.</li> <li>Post-Graduation</li> <li>Aadhar Card (or</li> <li>Income certification</li> <li>Fee payment prospection</li> <li>Application form</li> <li>Dully filled enro</li> </ol> | ksheet marksheet any other identity car te oof document n   | d)  |   |  |
| DECLARATIONS   |   |   |   |  |
| registration of this application d institution. If I am given admiss provide selection or placement  | oloma and declare that to the oes not confer any right on m sion, I affirm I will be subject in any company. However, I | best of myknowledge and be<br>to in respect of selection for admit<br>to and follow all the regulations<br>will participate in the training | Plief, the above particulars are true. I agree that ission, which is solely left to the discretion of the softhe institution. The institution is not liable to & placement programs (If any) provided by the ion of full fees or breach of code-of-conduct or |  |
| Signature:   |   | Date :  |   |  |
| Name:  |   |   |   |  |
| PARENTS/GUARDIAN   |   |   |   |  |
|  | ay the tuition and other fees j   |   | l obligation of my child/ward studying at this it's rules. I also affirm that my child/ward will  |  |
| Signature of Parent:   |   |   | Date :  |  |
|  | (Father)  | (Mother)  |   |  |
| Name:  |   | -   |   |  |
| Signature of Guardian: (If Applicable) Name:   |   |   | Date :  |  |
|  |   |   |   |  |

## APPLICANT'S TRAINING

As per the course curriculum every student of 1-year diploma course has to compulsorily attend internship at any industry/ factory for the award of Diploma.

As I am the student of Hamdard Vocational Knowledge Centre, Moradabad, (An off-campus centre of JAMIA HAMDARD, New Delhi) ,admitting to 1 -year diploma, have to compulsorily attend Internship/Training. I have to submit my Internship/Training Certificate issued from concerned Company/ Industry and the Training report and mandatory copy of the certificate of training.

| In case I don't produce & submit a copy of the above-mentioned certificate, my Diploma will not be awarded.   |  |  |  |  |  |
|---|--|--|--|--|--|
| Signature of Applicant  |  |  |  |  |  |
| Name  |  |  |  |  |  |
| Verification (for office  | use only)                                    |  |  |  |  |
| Entries checked  1. Name and other details cross verified with 10 <sup>th</sup> marksheet  2. Passport size photo  3. All the self-attested attached documents cross verified with original ones  4. Payment details cross checked along with transaction id  5. Signature of students and parent.  6. Academic qualification cross checked with original document. |  |  |  |  |  |
| Checked   | SIGN   |  |  |  |  |
|   | Name   |  |  |  |  |
|   | DEALING ASSISTANT,<br>ADMIN, HVKC, MORADABAD |  |  |  |  |