

# How To Fill IHM-A AURANGABAD Entrance Form 2019



Career Helpline: 011-42666000, 9999975392

[www.prathamonline.com](http://www.prathamonline.com)



LAST DATE OF ENROLMENT : 30 APRIL, 2019

Select the course as per your career choice <sup>LS</sup>

Select your preferred course Select your preferred course Hotel Management Culinary Arts		Select your preferred test centre	
MIDDLE NAME	LAST NAME		
TELEPHONE (CELL)	TELEPHONE (HOME)		
FAITH (PLEASE DESCRIBE THE SPIRITUAL PRACTICE YOU FOLLOW)	EMAIL ID (USED FOR COMMUNICATION)	MOTHER TONGUE	
DATE OF BIRTH (DD-MM-YYYY)	HEIGHT	WEIGHT	
ADDRESS LINE 1		ADDRESS LINE 2	
PINCODE	CITY	--State--	

Upload Photo

Upload Signature

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APPLICANT DETAILS

Fill all the information

Select the test centre

Select your preferred course

Mr. FIRST NAME (IN BOLD LETTERS)

—Nationality— EMAIL ID (USED FOR COMMUNICATION)

FAITH (PLEASE DESCRIBE THE SPIRITUAL PRACTICE YOU FOLLOW)

— State Of Domicile — MOTHER TONGUE

DATE OF BIRTH (DD-MM-YYYY) HEIGHT WEIGHT

ADDRESS LINE 1 ADDRESS LINE 2

PINCODE CITY —State—

Select your preferred test centre

- Select your preferred test centre
- New Delhi
- Mumbai
- Kolkata
- Chennai
- Aurangabad

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Upload Signature

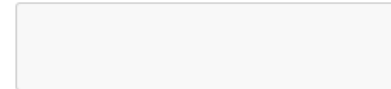
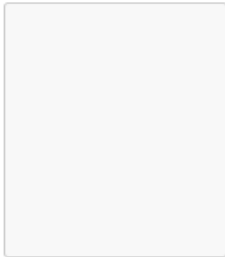
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Upload Photo

Upload Signature



Maximum image size allowed is 500kb. (Dimension: 250\*60)

Resize image



Maximum image size allowed is 500kb. (Dimension: 144\*173)

Resize image



Upload your recent colour photo graph and Signature

FAMILY DETAILS

FATHER'S



FIRST NAME (IN BOLD LETTERS)

MIDDLE NAME

LAST NAME

AGE

OCCUPATION

EMAIL

TELEPHONE (CELL)

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Fill your family details information

FATHER'S

FIRST NAME (IN BOLD LETTERS)

MIDDLE NAME

LAST NAME

AGE

OCCUPATION

EMAIL

TELEPHONE (CELL)

ADDRESS SAME AS ABOVE

FATHER'S OFFICE ADDRESS LINE 1

FATHER'S OFFICE ADDRESS LINE 2

PINCODE

CITY

--State--

MOTHER'S

FIRST NAME (IN BOLD LETTERS)

MIDDLE NAME

LAST NAME

AGE

OCCUPATION

EMAIL

TELEPHONE (CELL)

ADDRESS SAME AS ABOVE

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PINCODE

CITY

--State--

Fill the siblings information if you have

BROTHER'S/SISTER'S

FULL NAME

AGE

OCCUPATION

BROTHER'S/SISTER'S

FULL NAME

AGE

OCCUPATION

BROTHER'S/SISTER'S

FULL NAME

AGE

OCCUPATION

OTHER DETAILS

Mention the languages that you can read , write and speak

LANGUAGE KNOWN

READ

WRITE

SPEAK

LANGUAGE KNOWN

READ

WRITE

SPEAK

LANGUAGE KNOWN

READ

WRITE

SPEAK

LANGUAGE KNOWN

READ

WRITE

Activate  SPEAK

Go to PC settings to activate Windows

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Fill the academic qualification

EDUCATIONAL DETAILS

EXAMINATION	SCHOOL/COLLEGE	YEAR	MARKS(%)	MAJOR SUBJECTS
STD X OR EXAMINATION	SCHOOL/COLLEGE NAME	YEAR	MARKS(%)	MAJOR SUBJECTS
STD XII OR EXAMINATION	SCHOOL/COLLEGE NAME	YEAR	MARKS(%)	MAJOR SUBJECTS
ADDITIONAL				

EMPLOYMENT HISTORY (IF ANY)

No

EXTRA CURRICULAR ACTIVITIES

...

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Fill the information of Employment history and Extra curricular activities

EMPLOYMENT HISTORY (IF ANY)

No

EXTRA CURRICULAR ACTIVITIES

No

PLEASE GIVE A BRIEF ACCOUNT OF YOUR HOBBIES AND INTERESTS

IF YOU HAVE APPLIED/REGISTERED FOR ANY OTHER ACADEMIC PROGRAM, CONDUCTED BY ANOTHER COLLEGE/INSTITUTE/UNIVERSITY, PLEASE PROVIDE FOLLOWING DETAILS:

No

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▶ IF YOU HAVE APPLIED/REGISTERED FOR ANY OTHER ACADEMIC PROGRAM, CONDUCTED BY ANOTHER COLLEGE/INSTITUTE/UNIVERSITY, PLEASE PROVIDE FOLLOWING DETAILS:

Fill the details of references. References should not be from relatives.

▶ PLEASE GIVE 2 REFERENCES, OTHER THAN RELATIVES:

NAME	OCCUPATION	DESIGNATION	HOW LONG KNOWN (YEARS)
------	------------	-------------	------------------------

ADDRESS
---------

NAME	OCCUPATION	DESIGNATION	HOW LONG KNOWN (YEARS)
------	------------	-------------	------------------------

ADDRESS
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Fill the declaration details

MY WARD HAS MY PERMISSION TO APPLY FOR ADMISSION TO THE INSTITUTE OF HOTEL MANAGEMENT, AURANGABAD, IF MY WARD SECURE ADMISSION, I SHALL BE THE RESPONSIBLE FOR HIS / HER CONDUCT AND DISCIPLINE AS LAID DOWN BY THE INSTITUTE. I ALSO DECLARE THAT THE INFORMATION GIVEN ABOVE BY HIM / HER IN THIS APPLICATION FORM IS CORRECT. I ALSO UNDERTAKE TO PAY FEES AND DUES, IF ANY, ON TIME.

DATE	NAME OF THE PARENT / GUARDIAN	PLACE
ADDRESS		

I'm not a robot  reCAPTCHA  
Privacy - Terms

Select the check box and then click on submit tab  
To move forward to payment gateway

SUBMIT 

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Checkout login for registered users only.

Enter Username

Enter Password

[Forgot Password?](#)

Login

### Payment Information

Credit Card >

Card Number



Expiry Date

Month

Year

CVV

576

Save your cards with CCAvenue Checkout for future payments ?  
(Note: We do not store your CVV/CVC number.)

I agree with the [Privacy Policy](#) by proceeding with this payment.

**INR 1500.00** (Total Amount Payable)

Make Payment

Cancel

Payment options are available select as per your convenience and then click on Make payment tab

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While you are already logged on here, remember to procure a unique id for yourself and continue the process – detailed registration, online payment and complete the profiling test.

Before you leave this site, make sure you have completed the detailed registration form by clicking on the registration button.

In order for you to be able to access the profiling test, you must make an online payment of Rs. 1,500/- (Indian Rupees One Thousand Five Hundred Only). Your electronic profiling assessment will be sent to your registered email address, you need to click the test link, complete the test and then read through your assessment report.

You will be required to carry a hard copy of this assessment report for verification before you proceed with the next steps to a Group Discussion, writing a Statement of Purpose and finally participating in a Personal Interview in May 2019.


IHM-A will short-list you based on a collective assessment of your Profiling (weightage – 20%), Statement of Purpose and Group Discussion (weightage – 30%) and a Personal Interview (weightage – 50%).

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Keep information like Roll number/Registration ID etc and password safely for future reference.

Your Form Filling Process is complete. For any further queries please contact your respective Center Managers or Client Service Managers for Form Filling



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**PRATHAM : Lead the way...**



SN	Service Zone	Helpline Contact No.	Service Manager Contact No.
1	South Delhi	011-42666000	9821383324, 9821398872
2	East Delhi , CP & Noida		9599211135
3	Central Delhi		9599961654
4	West Delhi		8130466119
5	North Delhi		9821398873

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