

होटल प्रबन्ध व्यवस्था भोजन भण्डार एवं पोषाहार संस्थान बरियार, जी. टी. रोड, गुरदासपुर (पंजाब) – 143 521  
**INSTITUTE OF HOTEL MANAGEMENT CATERING & NUTRITION, Bariar, G.T.Road, Gurdaspur**  
“An Autonomous Body under Ministry of Tourism, Government of India”.

“पर्यटन मंत्रालय भारत सरकार के अधीन स्वायत्तशासी निकाय”.

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टेलीफोन: 01874-222501, 222502 फैक्स 222505

Advt. No: IHM(G)/Estt/EN1/ 1367

Dated:-11-06-2024

Applications for **Empanelment of Guest / Part-Time Faculty** are invited in the prescribed Application Form (to be paid on hourly basis) for following subjects:-

| Sl. No. | Subject                                     | Educational and other qualification   |
|---------|---|---|
| 1       | * Hotel Accountancy & Financial Management. | Post Graduate Degree/Masters in relevant subject with 50% marks. Experience in teaching similar subject is desirable. |

**Note:** This is not a regular appointment but empanelment for initial period of three years beginning with Academic session 2024-25. The assignment may be given as and when services are needed by the Institute.

**General Conditions**

1. Application in the prescribed Application Form along with the self attested copies of all supporting documents must reach the Institute on or before 27<sup>th</sup> June, 2024 (up to 5-00 p.m.).
2. Incomplete and application received late is liable to be rejected. The Institute will not be responsible for any postal delays.
3. The prescribed Application form is available on Institute's website [www.ihm-gsp.ac.in](http://www.ihm-gsp.ac.in) Candidates must furnish their contact telephone number along with their active e-mail ID.
4. Please superscribe the Advt. No: IHM(G)/Estt/EN1/1366 dated 11-06-2024 and subject(s) applied for ..... on top of the envelope.
5. The competent authority reserves the right to fill / partially fill / not fill vacancy or to re-advertise the post without assigning any reason(s).
6. **No TA/DA is admissible for attending the interview / selection process / written / skill test.**

**Note :-** Corrigendum/Addendum/Amendments/Clarification etc., with respect to the above, if any shall be hosted in Institute website as above. Applicants are advised to visit the Institute website regularly. No separate advertisement shall be published in the Newspaper in this regard.

Sd/-  
Principal I/C  
IHM, Gurdaspur

3/11/24  
11/6/2024  
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## APPLICATION FORMAT

Empanelment of Faculty (purely on hourly basis)  
at Institute of Hotel Management Catering & Nutrition, Gurdaspur

|     |   |                                     |                                    |                                |                                 |   |
|-----|---|-------------------------------------|------------------------------------|--------------------------------|---------------------------------|---|
| 1.  | Name of Candidate<br>(in Capital letters)       |                                     |                                    |                                |                                 | A recent<br>Passport Sized<br>coloured<br>Photograph to<br>be pasted here<br>and signed<br>across |
| 2.  | Date of Birth                                   | Day                                 | Month                              | Year                           | Age as on<br>27.06.2024         |   |
| 3.  | Father's Name/ Husband's<br>Name                |                                     |                                    |                                |                                 |   |
| 4.  | Nationality                                     |                                     |                                    |                                |                                 |   |
| 5.  | Gender (Male/ Female)                           |                                     |                                    |                                |                                 |   |
| 6.  | Marital Status                                  | Married<br><input type="checkbox"/> | Single<br><input type="checkbox"/> |                                |                                 |   |
| 7.  | Category<br>(Please tick in appropriate<br>box) | Gen<br><input type="checkbox"/>     | SC<br><input type="checkbox"/>     | ST<br><input type="checkbox"/> | OBC<br><input type="checkbox"/> |   |
| 8.  | Address with Pin Code                           |                                     |                                    |                                |                                 |   |
| 9.  | Tel. No.  |                                     |                                    |                                |                                 |   |
| 10. | Mobile No.                                      |                                     |                                    |                                |                                 |   |
| 11. | E-mail Id.                                      |                                     |                                    |                                |                                 |   |
| 12. | Aadhar No :                                     |                                     |                                    |                                |                                 |   |

|                |   |   |                            |  |
|----------------|---|---|----------------------------|--|
| 13.            | <b>Educational Qualifications: (in ascending order)</b>                                       |   |                            |  |
| <b>Sr. No.</b> | <b>Name of the Exam Passed</b>  | <b>Name of the Board/<br/>NCHMCT/ IGNOU/ SBTE/<br/>University</b> | <b>Year of<br/>passing</b> | <b>% of<br/>Marks up<br/>to two<br/>decimals</b> |
| a)             | 10 <sup>th</sup>  |   |                            |  |
| b)             | 12 <sup>th</sup>  |   |                            |  |
| c)             | Graduation<br>(Please specify stream)   |   |                            |  |
| d)             | * 3 Year Diploma/ Degree in<br>Hotel Management/ Degree in<br>Hotel Administration (fulltime) |   |                            |  |
| e)             | Masters<br>(Please specify Stream)  |   |                            |  |
| f)             | Any other relevant qualification  |   |                            |  |

\* Strike off which is not applicable.

| 14      | <b>Work Experience (in chronological order beginning from the present job):</b> |              |                   |    |                            |
|---------|---|--------------|-------------------|----|----------------------------|
| Sr. No. | Designation & Pay Scale   | Organization | Period of service |    | Reason for leaving the job |
|         |   |              | From              | To |                            |
|         |   |              |                   |    |                            |
|         |   |              |                   |    |                            |
|         |   |              |                   |    |                            |
|         |   |              |                   |    |                            |

15. Present post with scale of pay & pay drawn: .....

16. Disclosure about past disciplinary proceedings, if any .....  
 ..... (Add additional sheets if required)

17. Details regarding legal detention/ conviction if any: .....  
 ..... (Add additional sheets if required)

18. Any other information desired to be furnished: .....  
 ..... (Add additional sheets if required)

Date:  
Place:

(Signature of the applicant)

**Declaration:**

I hereby declare that all the particulars furnished by me in this application are true 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, I am aware that my candidature / empanelment is liable to be rejected / cancelled by the appropriate authority without assigning any reason. I,also understand that this is only for empanelment of Guest Faculty and classes may or may not be assigned to me as per the need of the institute.

Date:  
Place:

(Signature of the applicant)

Name: - \_\_\_\_\_

❖ **Note:** Please use additional sheets for item 13 and 14, if required. Enclose self-attested copies for educational qualification and work experience.