

**A-34, SECTOR 62, NOIDA-201309**

### Academic Year 2025-2026

**CHANGE OF CENTRE FEES – Rs.500/- ONE TIME**  
(This form must be routed through institute concerned only)

(Photograph to be  
attested by  
Principal)

Institute Name

[illegible]

- Surname

[illegible][illegible]

- IHM/FCI

Principal's signature with office seal

**FOR NCHMCT USE**

|                   |                                               |                                              |
|-------------------|-----------------------------------------------|----------------------------------------------|
| Fee received      | Examination particulars<br>Checked & Verified | Examination Hall<br>Admission ticket issued. |
| Dealing Assistant | Executive Officer (S)                         | Assistant Director (T)                       |

