

DEPARTMENT OF TOURISM, GOVERNMENT OF KERALA

APPLICATION FOR AWARDS OF EXCELLENCE IN TOURISM 2009-2010

CATEGORY II (1 to 5) Star Hotels

1. Name of the Hotel :
2. Mailing & E-mailing address
with Phone/Fax numbers :
3. (a) Type of the Institution :
(b) Category applied for award
(Specify the star category) :
4. Whether applicant is approved
by Government of India (enclose copy) :
5. (A) Foreign exchange earned during 2009-2010
(B) Foreign exchange earned during 2008-2009
(C) Percentage change
(Please specify increase / decrease)
over the last year.
6. (A) No. of Guests handled during 2009-2010 :
(B) No. of Guests Tourists handled during 2008-2009 :
(C) Percentage change :
(Please specify increase / decrease)
over the last year.
7. (A) Total Revenue earned by the applicant
during 2009-2010. :
(B) Total Revenue earned by the applicant
during 2008-2009 :
(C) Percentage change :
(Please specify increase / decrease)
over the last year.

(Tour Reports, Hotel statements or any similar statements to prove Number of Tourists handled and Certificate from the Chartered Accountant to prove Revenue incorporating inbound remittance particulars to be provided along with application)

DECLARATION

I / We hereby declare that the facts given above are true to the best of my / our knowledge and belief and are submitted for considering my / our application for State Tourism Awards 2009-10.

Place:

Date:

Signature

*The application should reach **Director, Department of Tourism, Park View, Thiruvananthapuram – 695 033** on or before 06/09/2010.*