# Government of Kerala Directorate of Medical Education

### Medical College.P.O, Thiruvananthapuram - 695 011

CAP-PGSS: 2010

## [CENTRALISED ALOTMENT PROCESS FOR ADMISSION TO PG SUPER SPECIALITY COURSES -2010]

Speciality		Rank	Roll No.	
Name				
Quota, if ar applicable	ny :			Photo of the candidate
Mobile No	1			
Landline N	0			

#### PREFERENCE FORM

**NOTE**: (1) The preference(s) furnished will be valid for the whole selection process of 2010. Allotment will be done as per the preference and availability of seats.

Preference Number	Name of College			
1				
2				
3				

#### **DECLARATION**

I have explored all the possibilities of selection available to me and I have finally decided to seek admission to college/s as per the preference(s) given above. I agree to surrender my seat already allotted, if any, if am reallotted to a college in this selection process as per the preference(s) noted above.

17.09.2010

Signature of the Candidate

#### FOR OFFICE USE ONLY:

Counseling	Course allotted	College allotted	Category
1 <sup>st</sup>			
2 <sup>nd</sup>			

**For Director**