

CAP-PGSS: 2009

[CENTRALISED ALOTMENT PROCESS FOR ADMISSION TO PG SUPER SPECIALITY COURSES -2009]

Speciality		Rank		Roll No.	
Name					Photo of the candidate
Quota, if any applicable					
Mobile No					
Landline No					

PREFERENCE FORM

NOTE: (1) *The preference(s) furnished will be valid for the whole selection process of 2009. 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 re-allotted to a college in this selection process as per the preference(s) noted above.

25.07.2009

Signature of the Candidate

FOR OFFICE USE ONLY:

Counseling	Course allotted	College allotted	Category
1 st			
2 nd			

For Director