

Government of Kerala  
Directorate of Medical Education  
Medical College.P.O, Thiruvananthapuram - 695 011

## CAP-PGSS: 2012

[CENTRALISED ALOTMENT PROCESS FOR ADMISSION TO PG SUPER SPECIALITY COURSES -2012]

Speciality		Rank		Roll No.	
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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 2012. Allotment will be done as per the preference and availability of seats.*

Preference Number	Name of College
1	
2	
3	
4	
5	

### 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.

.07.2012

Signature of the Candidate

### FOR OFFICE USE ONLY:

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

For Director