

POST GRADUATE SUPER SPECIALITY COURSES, KERALA - 2013

DECLARATION

(To be attested by a Govt. Gazetted officer)

I hereby declare that all the information furnished by me in the Application form are correct to the best of my knowledge and belief and that, I have read and hereby accept all the conditions of admission to the Post Graduate Super Speciality Courses, Kerala -2013 as contained in the Prospectus and I agree to join the Course to which selected and College to which allotted and shall not engage myself in private practice during the period of the course.

Signature of applicant :

Place:

Date:

Signature of Attesting Officer :

Name :

Designation :

(Office Seal)