

ANNEXURE XVII

DEPARTMENT OF TECHNICAL EDUCATION CENTRALISED ALLOTMENT TO DIPLOMA PROGRAMMES

RE-OPTION FORM

1. Name of Candidate :
2. Application Number :
3. Registration Number :
4. Provisional Rank :

Revised Options

Pref. No.	Institution	Programme
1		
2		
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11		
12		
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15		

Pref. No.	Institution	Programme
16		
17		
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30		

Signature of Applicant

Signature of parent / Guardian

RECEIPT

Received the Re-option form from Mr./Ms.

S/D/W/o Sri/Smt

Date:

Principal

Seal & Name of Polytechnic College