



Appendix 14



Guru Gobind Singh Indraprastha University Kashmere Gate, Delhi-110403

PREFERENCE SHEET

NAME OF THE PROGRAMME: _____

Name: Mr/Miss/Mrs. _____

Address: _____ Mobile/Tel.No. _____

CET Roll No. CET Rank Region: Delhi/Outside Delhi Category: Gen/SC/ST/OBC/Def/PH/KM

Give preference in order of your Priority :

S.No.	Name of the College/Institute	Programme/Branch
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____

Date : _____

(Signature of the Candidate)

(Counter Signature of Parent/Guardian)