

**Affidavit Registration Form For Affiliated Colleges**

College Code	C 58110
College Name	GOVERNMENT MEDICAL COLLEGE KOLLAM
University Code	U-0630
University Name	KERALA UNIVERSITY OF HEALTH AND ALLIED SCIENCES
College Director's Name *	Dr. B .Padmakumar
College Phone Number (+91)*	0 474 257 4574

**Details Of The Course (UG/PG/Diploma)\***

Name of the Course *	MBBS
Number of students in your class*	110
Current year of study*	1
Nearest Police station to your college*	PARIPPALLY