REKHA DENTAL CARE AND IMPLANT CENTRE

रेखा डेन्टल केयर एण्ड इम्पलान्ट सेन्टर

Dr. Niraj Kumar Jaiswal — Reg. No. : 8683/A — डॉ० नीरज कुमार जायसवाल

(B.D.S., M.I.D.A.)
Oral and Dental Surgeon

Ex-Dental Surgeon
Institute of Dental Sciences, Bareilly (U.P.)
Bareilly International University, Bareilly (U.P.)

(बी.डी.एस., एम.आई.डी.ए.)
ओरल एण्ड डेन्टल सर्जन

सुविधायें

- Scaling & Polishing — दाँतों की सफाई
- Periodontitis — पायरिया का इलाज
- Gingival Depigmentation — काले मसूड़ों का इलाज
- Removable Partial Denture — निकालने एवं लगाने वाले दाँत
- Complete Denture — बत्तीसी
- Crown & Bridge — फिक्स दाँत
- Dental Implant — डेन्टल इम्पलान्ट
- Root Canal Treatment (R.C.T.) — दाँतों के नसों का इलाज
- Tooth Coloured Filling — दाँतों के रंग की फिलिंग
- Orthodontic Treatment — टेढ़े-मेढ़े दाँतों का इलाज
- Painless Extraction — बिना दर्द के दाँत निकालना
- Impacted Tooth Extraction — अक्ल दाँत को सर्जरी से निकालना
- Oral Ulcer — मुँह के छालों का इलाज
- Reduce Mouth Opening — मुँह का कम खुलना

IOPA-X ray ☐

O.P.G. ☐

Investigation :-

.....

.....



O.P.D. No. : ..... Date : .....

Name : ..... Age : ..... Sex : .....

Address : .....

Chief Complaint :- _____

_____

Medical History :- _____

O/E :-

SUSHIL KUMAR THAKUR

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राघा कम्पलेक्स, नव भारत हॉस्पिटल के सामने, लाईन बाजार, पूर्णियाँ (बिहार) - 854301

https://nirajkumarjaiswal2.wixsite.com/rekhadentalcare 9166172576 10:00 AM to 06:00 PM

To,

The Principal

Institute of Dental Sciences,

Pillibhit By-pass Road

Bareilly 243006 (U.P.)

SUBJECT: JOINING REPORT

Respected Sir,

I **DR. RESHAM IRSHAD** D/o **MR. SYED IRSHAD HUSSAIN RIZVI** post of **LECTURER** in the department of **ORTHODONTICS** I hereby join my duties w.e.f : **26.06.2023**

Thanking You,

Yours Truly,

Signature: .....

Name:**DR. RESHAM IRSHAD**

Email ID:**reshamirshad@gmail.com**

SUSHIL KUMAR THAKUR

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Appendix – VI

Joining Report

Dr. Ankita Chandak

From:

P:109 CIT Road 1st Floor entally Kolkata 700014 W.B.

Date: 01-11-2021

To,

The Dean,

Dr. Hedgewar Smruti Rugna Seva Mandal's

Dental College & Hospital Hingoli

Dist. Hingoli 431513

Subject : **Joining Report**

Reference : **Your appointment order No.** HDCH APPT/2021-22/181
Dated 01-11-2021

Sir/Madam,

I have received the above cited appointment order on 01-11-2021 I am accepting the same and joining to the post of Lecturer in the subject of Pedodontics w.e.f. 01-11-2021 (before noon/afternoon) and I am aware that my appointment is subject to the approval from the University.

"Allowed to join"

Yours faithfully,

Ankita Chandak

(.....)

Dr. Ankita Chandak

Note: The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

SUSHIL KUMAR THAKUR

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Reason: your signing reason here
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From:-

Dr Yesha Yadav
House No G-6,
Durgavihar, Pipeline Road
Hyderabad – 500055
Mobile No : 8686304129
Mail Id : yeshayadav.yy@gmail.com

To

The Principal
ACDS, Secunderabad

SUBJECT: JOINING LETTER

1. Refer Appointment letter No 349A/ACDS/Est dated Aug 2022.

2. I hereby report to join duty as Senior Lecturer on adhoc basis in the department of Conservative Dentistry and Endodontics in this Institution on 3rd Aug 2022

Thanking you,

Yours faithfully

Yesha

(Dr Yesha Yadav)

SUSHIL KUMAR THAKUR

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To,

The Principal

Institute of Dental Sciences,

Pillibhit By-pass Road

Bareilly 243006 (U.P.)

SUBJECT: JOINING REPORT

Respected Sir,

I Dr. Lubna Shoaib S/o, D/o, W/o Shri Shoaib Khurshed Khan post of Lecturer in the department of Periodontics I hereby join my duties w.e.f : 22/03/2023

Thanking You,

Yours Truly,

Signature: .....

Name: Dr. Lubna Shoaib

Email ID: shoaiblubna81@gmail.com

SUSHIL KUMAR THAKUR

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PolyMedica Dental

Dr Swati Misra
MDS- Pedodontist
Registration No. UK 1541

Patient Name: _____ **Age/Sex:** _____ **Date:** _____

Dr. Swati Misra
(Pedodontist)

Dr Akansha Agarwal
(Orthodontist)

Dr Shipra Jain
(Endodontist)

DR Harsh Yadav
(Oral and Maxillofacial Surgeon)

Dr. Samreen Taufiq
(Oral Pathologist and cosmetic dentist)

Dr. Kriti
(Prosthodontist)

Dr. Lakshay Gupta
(Oral and Maxillofacial surgeon)

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+91 9760763416
www.swatidental.com
care@swatidental.com
UG - 007, Malibu Towne Market, Sector - 47, Gurugram -122018
Timings: 10 A.M. - 8:00 P.M.
2 PM -4:00 PM (Appoinment)

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200+ Reviews, 5 Stars

DR. MALAKAR'S DENTAL HUB

(COMPLETE DENTAL CARE FOR KIDS & ADULTS)

Dr. Subhasis Malakar
B.D.S, M.D.S, F.A.G.E, (Manipal)
Consultant Dental Surgeon & Pediatric Dentist
Attached : Midnapore Medical College & Hospital
Specialist : Pedodontist & Preventive Dentistry
Reg. No. : 3442A (W.B.D.C.)

Formerly : Dr. B. C Roy PGIPS Hospital, Kol
North Bengal Medical College & Hospital, Siliguri
SSKM, PG Hospital (Cal),
Assistant Professor :
Awadh Dental College & Hospital, Tatanagar
Life Member of Indian Dental Association (I.D.A)
Mob. : 9434828114 / 6294886293

Patient Name : .....

Age ..... *Sex* ..... *Date* ..... *Address* .....

SUSHIL KUMAR THAKUR

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Follow Dr. Malakar's Dental Hub → Facebook Instagram Youtube

MURRYS DENTAL CLINIC

Near City Tower, Opposite to Axis Bank
Dimapur, Nagaland-797112
✆ +91 8794381092
✆ +91 8794714025

Dr. Mongshithung Murry
Senior Dental Surgeon
Regd. No. 103-A

Dr. Jean Murry
BDS, MDS (Gold Medalist)
Dental Child Specialist
Regd. No. 181-A

Name ..... Sex ..... Age ..... Date .....

Occupation ..... Mobile No. .....

Address .....

MEDICAL HISTORY

- HYPERTENSION
- DIABETES
- CARDIAC
- BLOOD DISORDERS
- MEDICATION
- ALLERGIES
- PREGNANCY
- ANY OTHER

SUSHIL KUMAR THAKUR

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"This prescription is valid for 3 Visits only"
CLOSED ON SUNDAY

Mob.: 9801621618

OROWELL DENTAL CLINIC

Dr. Pankhuri Priya

B.D.S., M.D.S
Reg. No.-6986/A

डॉ० पंखुड़ी प्रिया

बी.डी.एस., एम.डी.एस.

Patient Name.....***Age/Sex***.....***Date***.....

Add. ..... ***Mob.:*** .....

स्पेशलिस्ट

- रूट कैनाल ट्रीटमेन्ट (R.C.T.)
- बच्चों के दाँतों का ईलाज
- टेढ़े-मेढ़े दाँतों का ईलाज Orthodontic treatment
- बत्तीसी (Complete denture)
- फिक्सड दाँत (Crown & Bridge)
- R.P.D (Removable Partial Denture)
- Implant
- बिना दर्द दाँत निकालना (Painless Extraction)
- दाँतों की सफाई (Scaling)
- Bleaching
- दाँत के रंग की फिलिंग (Laser Filling)
- मुँह के छालों का इलाज
- टूटे जबड़े का इलाज

Rx

SUSHIL KUMAR THAKUR

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OPD का समय सुबह 10AM - 2PM शाम 5PM - 8PM

जे जे चाईल्ड केयर हॉस्पीटल, राजोपट्टी, डुमरा रोड, सीतामढ़ी Email-pankhurisilky311992@gmail.com

Not Valid For Medico Legal Purpose

DESUN
HOSPITAL
A NABH HOSPITAL

August 1, 2023

Dr Madhuri Nath Kahar
Pearabagan Road
Dutta Bagan
P.O. Hooghly & P.S. Chinsurah
District - Hooghly
West Bengal - 712103

Association as "Consultant -Department of Dental Surgery" on Part Time basis at DESUN Hospital

Dear Dr Madhuri Nath Kahar,

Further to the letter of offer dated July 26. 2023 issued in your favour appended below please find mentioned the terms and conditions of your Part time association with the hospital.

Terms & Conditions

1) That as discussed and agreed upon your association as "**Consultant - Department of Dental Surgery**" is purely on part time basis on and from August 1, 2023 for a period of 2 (two) years unless discontinued / terminated earlier. You will be required to report to Head of Medical Administration for your duties and responsibilities.

2) That as discussed and agreed upon you will be required to be present at the hospital on and from 12:00 pm to 4:00 pm for 5 Days in a week (Monday to Friday). It has been further discussed and agreed upon that in case of requirement you may have to stay beyond the scheduled hours.

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3) *That, as discussed and agreed upon you will enjoy the rights in respect of Outpatients, Inpatient procedure and operation theatre access during the period of 2 (two) years effective from August 1, 2023 and upto such date your association continues. You will be required to make your services available on call as discussed and finalized.*

4) *That, as discussed and agreed upon you will be required to attend to any emergency duty and Inpatient visit on Sundays / Public Holidays.*

Shree Jalaram Trust (Calcutta)

Shree Jalaram Path, 140-C, Chander Village Road,
Haridevpur, Behala (East), Kolkata - 700 082.
Phone : 2402 4157 / 2402 7089 / 2237 2584

Date: .....

Dear Sir,

Dr. Madhuri Nath

.....

.....

Re: Appointment of Hony. Visiting DENTAL SURGEON

In reference to your application, we are pleased to appoint you as Hony. Visiting **Dental Surgeon** of our clinic with effect from 01.01.2020 for a period of six months.

Your visiting OPD hours will be on ..... between ..... and .....

This appointment is for a period of six months subject to renew every six months thereafter. This being a contractual appointment, no claim for the post is created hereby.

Either side will have the option to put an end to this appointment by giving advance notice of 15 days.

You will please abide by the code of conduct, rules and regulations of this hospital as in force time to time.

We hope your association with our clinic will benefit many of our patients.

Kindly sign the duplicate copy of this letter and return the same as a token of your acceptance.

Thanking you,

Yours faithfully

For Shree Jalaram Trust (Calcutta) Diagnostic Centre

(.....)

SHREE JALARAM TRUST (CAL

SIGNATURE.....

Trustee

SUSHIL KUMAR THAKUR

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GOVERNMENT DOON MEDICAL COLLEGE,

DEHRADUN

Principal Office:

Government Doon Medical College,

Dehrakhas, Patelnagar, Dehradun 248001

Email ID-doonmedicalcollege@gmail.com

Ref: /GDMC/estab-1/2016/02/ 6875

Dated: 26/12/22

OFFER OF APPOINTMENT

Dear,
Dr.Kanika Sharma
D/S/W/o.Shri-S. P Sharma
R/o-Lane No-06, Near Co-operative Society Miyawala, Dehradun .
Mob N0-9599131870 .

With profound pleasure it is to inform you that you have been selected for the post of **Senior Resident** in Govt Doon Medical College & associated Hospitals, Dehradun on the basis of the **"Interview"** held on.19-12-2022

You are hereby being appointed as Senior Resident in the Institution from the date of joining, purely on Contract basis under the following terms & conditions

1. **Salary:**
   Your salary will be calculated on the basis of 7th pay commission G.O which is [redacted] month will be paid as permissible by Uttarakhand Government from time to time.

1. **Reporting:**
   a) You will be reporting initially at Govt Doon Medical College, Dehradun, Uttarakhand. Pin- 248001.
   b) You shall report to the Principal Medical College and discharge the duties that are assigned to you from time to time. If required the Principal shall designate/ authorize a person to whom you shall report and to follow orders/instruction.

SUSH
KUMA
THAKU

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2024 DATE: -08.03.2024

To,
DR. VAISHNAVI SINGH
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PEDODONTICS on the following terms and conditions: -

1. That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the failing which this letter of appointment shall be treated automatically c

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

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ADVANCE
Dental & Cosmetic Clinic

DENTAL | SKIN | HAIR

Dr. Sumbul Rizvi
BDS, MIDA, PGDCC
Mob. 8881255334

R_x

Date:_____

SUSHIL KUMAR THAKUR

Shop No.36, Ground Floor, Greno Complex, Opp. Ivory Hospital, Sec.-36, Gr. Noida

7060645685

Dr. Munshi Lal Dental Clinic

Patient's Name.....Age.....Sex.....

Date.....

FACILITIES AVAILABLE
सुविधायें उपलब्ध

- Dental Implant
- Extraction (दाँत निकालना)
- Ultrasonic Scaling (दाँतों की सफाई)
- Root Canal Tt (RCT) (दाँतों की नसों का ईलाज)
- X-Ray
- Botox & Dermal Fillers
- Fixed Teeth (पक्के दाँत)
- Complete Denture (जबड़ा)
- Partial Denture (निकालने एवं लगाने वाले दाँत)
- Crown & BridgeWork
- Laser Filling
- Fixed Ortho Treatment (टेढ़े मेढ़े दाँतों का ईलाज BRACES के द्वारा)
- Bleaching (पीले दाँतों का ईलाज)
- Facial Trauma (टूटे जबडे का ईलाज)
- Biopsy (ट्यूमर की जाँच)
- Impaction (हड्डी के अन्दर के दांत का निकालना)
- All Routine Dental Treatment

Rx

Dr. Uday Rastogi
B.D.S.,M.D.S
Oral & Maxillofacial Surgeon
दन्त एवं मुख रोग विशेषज्ञ



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स्थानः मेन्टल हॉस्पिटल के सामने, आनन्द आश्रम रोड, सिविल लाइन्स, बरेली

समय : सुबह 10 बजे से दोपहर 3 बजे तक

समयः शाम 5 बजे से रात्रि 9 बजे तक

VALID FOR 7 DAYS

THURSDAY CLOSED

LIFE CARE DENTAL CLINIC

Add: Near Railway Crossing, Sherpur Road Puranpur (Pilibhit)

Dr. Noman Ahmad Khan
Dental Surgeon
BDS-IDS (BIU)

Name **Sex**

Address **Ph. No.**

C/C

D/H

M/H

ORAL EXAM.

P/D

F/D

TREATMENT

SUSHIL KUMAR THAKUR

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VARUN ARJUN MEDICAL COLLEGE & ROHILKHAND HOSPITAL

Banthra, NH-24, Distt. Shahjahanpur (U.P.) Pin:- 242307
Website : www.varunarjunmedicalcollege.com, Email ID : varunarjuntrust@gmail.com
Direct: 05842-297276 (Principal Office) Reception : 05842-297360, 05842-297260

Ref. No.VAMC&RH/10801 / 2023 Date: - 10 .07.2023

PROMOTION ORDER

Dr. Priva Mishra, Senior Resident in the Department of **Dentistry** is promoted to the post of **Assistant Professor** with effect from **10.07.2023.**

Varun Arjun Medical College & Rohilkhand Hospital Principal & Dean Banthra

Dr. Prof. K G Paul
Dean & Principal

Dean / Principal
Varun Arjun Medical College
&Rohilkhand Hospital NH-24
Banthra, Shahjahanpur (U.P.)

SUSH
KUMA
THAK

Email us:
contact@centre4teeth.com
Website - http://centre4teeth.com

DR. SHAZIA SAFI
BDS, MDS
(oral and maxillofacial
surgeon and implantologist)



8595911934

CENTRE FOR TEETH
Address - G4, Samachar Market,
Mayur Vihar Phase 1 Extension
Mon to Sat - 6:00 pm to 10:00 pm
Sunday - 8:00 am to 1:00 pm

NAME :
ADE / SEX :
ADDRESS

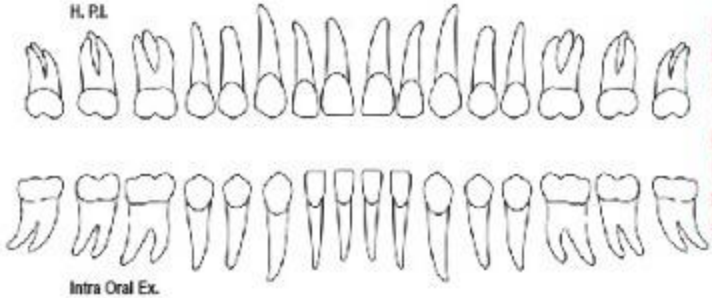
DATE.....
REG NO. .....

(1) Are you under the treatment of .....at present
(I) Physician (II) Surgeon (III) Gynaecologist (IV) Cardiologist (v) Urologist (VI) Orthopedician (VII) Endocrynologist
(2) Have you been under the treatment of the above in past 6 year (Y / N)
(3) Any problem During or after. First EXTRACTION

PMH	Y / N
1. ALLERGY	
2. DRUG REACTION	
3. CARDIO VASSULAR DISEASE	
HEART ATTACK	
ANGINA	
STROKE	
ANTICOAGULANT	
4. RESPIRATORY DISEASEI	
COUGH. COLD.	
ASTHMA	
5. GASTRITIS	
PEPTICI / DUODENAL ULCER	
CONSTIPATION	
6. RENAL DISORDER	
7. HEPATITIS. JAUNDICE	
8. DIABETES	
9. BLEEDING DISORDER	
ANEMIA	
10. PREGNANCY	
11. ARTHRITIS	
12. FAINTING & SEIZURES	
13. TUBERCULOSIS	
14. ANY OTHER DISEASE	
DIAGNOSE	

C / C

H. P.I.



A ABSCESS
P POCKET
X MISSING
S SINUS
M MOBILITY
I ROOT STUMP
≠ FRACTURE
O CARIES

Intra Oral Ex.

Extra Oral Ex.

DIAGNOSIS

ADVISE

TREATMENT DONE

S.N.	DATE	AMOUNT

SUSHIL KUMAR THAKUR

INVESTIGATION

IOPA —+—
O.P.G. PAN / TMJ
BLOOD SUGAR
Fasting
P.P.
Random
BT / CT
TC / DC
FNAC
BIOPSY

PHYSICIAN'S ADVICE

FIT FOR TREATMENT
NAME
DATE

NOT FOR MEDICO LEGAL PURPOSE

DIAGNOSIS, TREATMENT AND COST OF TREAMENT IS EXPLAINED PRIOR TO ANY PROCEDURE IN HIS / HER LANGUAGE

Relation

Singnature

SANTOSH
Deemed to be University
(Established u/s 3 of the UGC Act, 1956)

F. No: SU/R/2023/3421(3) Dated:30.12.2023

MEMORANDUM

Subject: Grant of Junior Research Fellowship [JRF] – **SHAZIA SAFI** - Ph.D. Scholar – Santosh Deemed to be University, Ghaziabad, NCR Delhi.

****

SHAZIA SAFI, Ph.D. Scholar of Maxillofacial Surgery is informed that on the recommendations of the Research Advisory Committee. The Sub-Committee granted Junior Research Fellowship [JRF] of Rs.35,000/- per month and Rs.10,000/- contingency per annum to him/her for the year 2023-24 for a period of 12 months with effect from 01.01.2024 onwards on the usual terms and conditions.

He / She is required to take part actively in various research activities of the University and submit periodical reports as per the requirements. Upon satisfactory compliance and after the recommendations of the RAC, the second year JRF may be granted for another 12 months.

[Dr. NARESH SHARMA]
REGISTRAR

SHAZIA SAFI,
Ph.D Scholar (2023 Batch)
Department of Oral & Maxillofacial Surgery
Santosh Dental College & Hospital

SUSHIL KUMAR THAKUR

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Copy to:-

1. Chancellor
2. Vice-Chancellor
3. Dean, Santosh Dental College & Hospital
4. The Dean Research
5. Dean, Academics
6. The Director, IQAC
7. The Co-Ordinator RAC & RCC
8. The HOD concerned
9. The Finance Officer
10. Guard File

SHIVANI DENTAL CARE

Specialised Centre for Root Canal Treatment,
Smile Designing & Oral Implants

Dr. Piyush Upadhyay
M.D.S. (Endodontics)
Regd. No.-11896

489, Faizabad Road, Meeranpur, Akbarpur-Ambedkar Nagar

Name.....Age.....Sex.....

Address.....Date.....

Our Specialities

- Single Sitting R.C.T.
- Root Canal Treatment
- Dental Implants
- Composite Filling
- Denture
- Metal Crown, P.F.M.
- All Ceramic Crown

Facilities Available

- Digital X-Ray (RVG)
- Ultrasonic Cleaning
- Tooth Whitening
- Flap Surgery
- Tooth Jewellery
- Wisdom Tooth Extraction

On Examination

- Pain ☐
- Sensitivity ☐
- Swelling ☐
- Cavity ☐
- Mobility ☐
- Fracture ☐
- Bleeding Gums ☐
- Others ☐

Medical History

- Diabetes ☐
- Hypertension ☐
- Heart Diease ☐
- Pregnancy ☐
- Asthma ☐
- Allergy ☐
- Kidney Disease ☐



Timing- 10 AM to 6 PM

Not Valid for Medico Legal Purpose

Cont. No.-8738[illegible]

TIMINGS MORNING : 09:00 A.M. TO 02:00 P.M. EVENING [illegible]:00 P.M.

Visit Your Dentist Once in 3 Months

☎ : 05271-244290

Not Valid for Medico Legal Purpose

SUSHIL KUMAR THAKUR

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Reason: your signing reason here
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DR. GAMBHIR'S
DENTO AESTHETICS
IMPLANTS | LASERS | SMILE DESIGNING



Dr. Sanjay Gambhir
BDS, MDS
Periodontist and Implantologist
Dental Laser Specialist

Dr. Vidhi Agarwal Gambhir
BDS, MDS
Endodontist (RCT Specialist)
Sr. Lecturer, DAV Dental College Yamunanagar

NAME :

AGE :

GENDER : M☐ F☐

ADDRESS :

Chief Complaint :

Clinical Examination :

Medical History :

NOT FOR MEDICO LEGAL PURPOSE

Date : .....

℞

SUSHIL KUMAR THAKUR

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DENTO AESTHETICS
Shop No- R2UG31, M3M
8630763895

TIMINGS
Morning 10:00 AM to 2:00 PM
Evening 04:00 PM to 9:00 PM
7 DAYS OPEN

8630763895
Shop No. R2UG31, Gate No. 1, M3M 65th Avenue,
Opp. DPS International School, Sector 65, Gurugram - 122101

DR. GAMBHIR'S
DENTO AESTHETICS
IMPLANTS | LASERS | SMILE DESIGNING



Dr. Sanjay Gambhir
BDS, MDS
Periodontist and Implantologist
Dental Laser Specialist

Dr. Vidhi Agarwal Gambhir
BDS, MDS
Endodontist (RCT Specialist)
Sr. Lecturer, DAV Dental College Yamunanagar

NAME :

AGE :

GENDER : M☐ F☐

ADDRESS :

Chief Complaint :

Clinical Examination :

Medical History :

NOT FOR MEDICO LEGAL PURPOSE

Date : .....

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SUSHIL KUMAR THAKUR

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DR. GAMBHIR'S DENTO AESTHETICS
Shop No- R2UG31, M3M 65th Avenue
8630763895

TIMINGS
Morning 10:00 AM to 2:00 PM
Evening 04:00 PM to 9:00 PM
7 DAYS OPEN

8630763895
Shop No. R2UG31, Gate No. 1, M3M 65th Avenue,
Opp. DPS International School, Sector 65, Gurugram - 122101

STAR DENTAL CARE

BRANCHES: MEERUT | NOIDA

Multispeciality, Dental Implant & Maxillofacial Clinic

Patient's Name: _____ Gender _____ Age _____ Date _____

Dr. Tapan Maitrey
BDS, MDS
Maxillofacial Surgeon
& Implantologist (Spain)
Regd. No. A-18347

Dr. Shuja Md. Khan
BDS, MDS Prosthodontics
Oral Implantologist (Spain)
Regd. No. A-17807

Dr. Sushmita Sabdakar
BDS, MIDA
Regd. No. 25263

Dr. Tanzeem Wajid
BDS, MIDA
Ex. Jr. (Maulana Azad Medical College)
Regd. No. A-14715

Dr. Kanwer Vikram
BDS, MDS Orthodontics
Regd. No. A-14785

Dr. Sarthak Gureja
MBBS, MD (Medicine)
Ex Medanta Gurugram
Regd. No. 101463

SUNDAY OPEN FOR SPECIAL CASES

* Not for Medico Legal Purpose

SERVICES:
सेवाएं:

EXTRACTIONS
दाँत निकालना

FILLINGS
दाँतों की फिलिंग

ROOT CANAL TREATMENT
(रूट कैनाल) नस का इलाज

TOOTH CLEANING
दाँतों की सफाई

DENTAL IMPLANT
परमानेन्ट फिक्स दाँत

DENTURES
दाँतों का जबड़ा

CROWN AND BRIDGE
एक/कई दाँतों की कैपिंग

TOOTH WHITENING
दाँत सफेद करना

BRACES
टेड़े–मेड़े दाँतो को सीधा करना

CHILD DENTISTRY
बच्चो के दाँतों का इलाज

SMILE DESIGNING
दाँतों की मुखावरण

CHEMICAL PEELING
केमिकल पील

PRP TREATMENT
प्लेटलेट्स रिच प्लाजमा ट्रीटमेन्ट

SUSHIL KUMAR THAKUR

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Opp. Delhi Darbar, Near Rosewood Public School, Hapur Road, Meerut

+91-9927-786-600

stardentalcare.info@gmail.com

YOUR SMILE IS OUR CONCERN...

TEERTHANKER MAHAVEER UNIVERSITY

(Established under Govt. of U.P. Act No. 30, 2008)
Delhi Road, Moradabad-244001 (U.P.) India
Tel.: +91-0591-2360222, 2476801
Email :hr@tmu.ac.in; hr@tmu.ac.in; **Website** :www.tmu.ac.in

CONFIDENTIAL

Ref. No.: TMU/HR/AL/2021-22/149 **Date**: 01/06/2022

Dr. Shipra Saxena
37-B, Vatika, Pilibheet Bypass Road,
Sun Citi Vistar, Bareilly Road, Izzat Nagar-243122 (UP)

Sub: Appointment for the post of Sr. Lecturer in the Department of Oral Pathology and Microbiology, Teerthanker Mahaveer Dental College & Research Centre.

With reference to your application and recommendation of the Selection Committee, the University is pleased to appoint you as **Sr. Lecturer** in the **Department of Oral Pathology and Microbiology, Teerthanker Mahaveer Dental College & Research Centre,** run under the aegis of TMIMT (Society) on the following terms and conditions:

1. Your appointment will be effective from **June 01, 2022**.
2. Your services will be governed by the Act, Statutes, Ordinances & Service Rules of the University/ TMIMT (Society) as applicable from time to time.
3. You will be on probation for a period of one year from the date of your joining the duties. This period of probation may, however, be extended depending upon your performance and feedback.
4. As a full time employee, you will not engage yourself in any other employment or trade outside the university. You are required to abide the rules and regulations of the University in letter and spirit as applicable and issued from time to time.
5. This appointment can be terminated on two months' notice or pay in lieu there-of (as mentioned in the Service Rules) during the tenure of this appointment from either side.

Wishing you a great satisfying career with T.M.U.

Yours sincerely,

Teerthanker Mahaveer University Moradabad (U.P.) 244001

Dr. Aditya Kr. Sharma
Registrar

SUSHIL KUMAR THAKUR

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Reason: your signing reason here
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CC to:
1. Dy. Director (A/c)
2. Personal File (HR Department)

Acceptance: **I, Shipra Saxena, D/o Mr. R C Saxena, hereby accept the terms & conditions given here above.**

Signatur

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055214953
State Rank	368
Name	AISHWARYA MAHAJAN
Father Name	PARESH MAHAJAN
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))

Institute/ Course Left /

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	CPABCQEMB3
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow p Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the time college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PEDODONTICS & PREVENTIVE DENISTRY First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055211880
State Rank	389
Name	RASLEEN DUA
Father Name	PARVINDER SINGH DUA
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PEDODONTICS & PREVENTIVE DENISTRY
Institute/ Course Left	/

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	CPABCRUXB0
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the allotted college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

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Reason: your signing reason here
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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS) First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055218649
State Rank	240
Name	ARCHIT BAHADUR
Father Name	BRIJESH BAHADUR
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS)
Institute/ Course Left	/

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	CPABCQVKC5
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the time college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055218485
State Rank	246
Name	KOUSTAV MAITY
Father Name	PABITRA KUSUM MAITY
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))
Institute/ Course Left	/

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	IGAMEAMMV2
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through SBI Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the allotted college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

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Director General Medical Education and Training

6th Floor, Jawahar Bhawan,Lucknow-UP.

MOPUP Allotment Letter-2021

Ref No.:DGME/UPNEETPG-2021/MOPUP/ADMISSION

To,

The Principal / Dean / Director / Registrar



Institute of Dental Sciences, Bareilly

Dear Sir / Madam

The candidate with following details has been provisionally allotted a seat in MDS (PUBLIC HEALTH DENTISTRY) in your institute on the basis of MOPUP allottment on 17/11/2021

Roll No.	2055211836
State Rank	117, Neet Rank:-15829
Candidate Category	UROP
Name	SARTHAK GUPTA
Father Name	NARESH CHANDRA GUPTA
Allotted Category	UROP
Allotted Institute	Institute of Dental Sciences, Bareilly
Allotted Course	MDS (PUBLIC HEALTH DENTISTRY)

The Candidate is advised to report on 17/11/2021 for admission, failing which the allotted seat of the candidate may be considered as cancelled.The Candidate has deposited Rs.100000/- at the time of Confirmation of Seat as per the details given below. This amount will not be adjusted against any fee and it will be refunded to the candidate after admission.

DD No	979722
DD Date	15-11-2021
Amount (Rs.)	100000

The Institute can charge the required prescribed fee from the candidate as per latest orders / approvals of State Government / Fee Fixation Committee, however the hostels fee / security fee / enrollment fee amount may be charged separately.

SUSHIL KUMAR THAKUR

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DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EEC86FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
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DGME / Chairman Counseling Board

Note- Institute Should examine all the original certificates and hold medical examination of the candidate for the medical fitness before admission and deposition of fees. Institute is also directed to verify the identity and address of the candidate through photo and other self attested documents. The candidate is directed to report with necessary records of the identification and address along with necessary original certificates.

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2022

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 06/10/2022 . Candidate is advised to report on or before 12/10/2022 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2255107162
State Rank	563, Neet Rank:-12604
Name	NISHANT MATHEW
Father Name	MATHEW K J
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))

NODAL CENTER **BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY**

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	220926131820095
Transaction Branch	ICICI BANK PAYMENT GATWAY

Security Amount

1- Candidate advised to report at Nodal Centre within due dates on or before 12/10/2022

2- Candidate allotted in private collge is advised to submit requisite tution fee through CHALLAN Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2022)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B93253260C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2022

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PUBLIC HEALTH DENTISTRY) First year of your institute on the basis of allotment on 01/11/2022 . Candidate is advised to report on or before 05/11/2022 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2255113812
State Rank	827, Neet Rank:-16961
Name	PALAK GANGWAR
Father Name	LALTA PRASAD GANGWAR
Candidate Category	BCOP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PUBLIC HEALTH DENTISTRY)
Institute / Course Left	/
NODAL CENTER	**BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY**

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	221024134802183
Transaction Branch	ICICI BANK PAYMENT GATWAY
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 05/11/2022

2- Candidate allotted in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2022)

SUSHIL KUMAR THAKUR

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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS) at your institute on the basis of allotment on 14/08/2023 . Candidate is advised to report on or before 20/08/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355103401
Neet Rank	9112
Name	DEEPIKA YADAV
Father Name	SURESH YADAV
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS)
NODAL CENTER	**Bareilly International University , Bareilly**

Security Fee Details

Transaction No	230808160510576
Transaction Bank	ICICI BANK
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 20/08/2023

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the N Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will forfeited.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F41968932532 6C00EEC B6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

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UTTAR PRADESH DENTAL COUNCIL

5-Sarvapalli, Mall Avenue Road, Lucknow

(Issued under section 32(2) / 35(4) of the Dentists Act, 1948)

UTTAR PRADESH DENTIST'S REGISTRATION CERTIFICATE

Certificate No. 23926 **Dated : 21/12/2022**

This is to certify that the person named below has been registered as a DENTIST in the Uttar Pradesh under the provisions of Dentists' Act, 1948

Registration in Part	A
Name	AKANKSHA VARSHNEY (KM)
Mother's Name Smt.	POONAM VARSHNEY
Father's Name Sri	NARENDRA KUMAR VARSHNEY
Qualification	Bachelor of Dental Surgery (B.D.S.)
Year of Passing	NOVEMBER-2022
College	INSTITUTE OF DENTAL SCIENCES, BAREILLY
University	BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY
Date & Place of registration	21/12/2022 Lucknow
Address	HOUSE NO .1149 , TAVELA GALI , CIRCULAR ROAD, HATHRAS-204101, UTTAR PRADESH

DCI
UTTAR PRADESH DENTAL COUNCIL

This certificate shall remain inforce upto :-	31/12/2027
Underwent rotatory Internship Training from	26/11/2021 To 25/11/2022
at INSTITUTE OF DENTAL SCIENCES & HOSPITAL, BAREILLY	

Place : Lucknow

U.P. Dental Council has the right to cancel the certificate, if any information is found to be incorrect.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196893253260C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Signature Not Verified
Digitally Signed By:ALOK KUMAR
(REGISTRAR, U.P. DENTAL COUNCIL)
Date :26.12.2022 17:48:32



Candidate Signature in Upper Box

Principal
Institute of Dental Sciences
Seal & Sign. of attesting authority
Bareilly (U.P.)

REGISTRAR
U.P. DENTAL COUNCIL,
LUCKNOW

DCI
UTTAR PRADESH DENTAL COUNCIL

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

MOP-UP Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PUBLIC HEALTH DENTISTRY) at your institute on the basis of MOP-UP allotment on 06/10/2023 . Candidate is advised to report on or before 10/10/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355106395
Neet Rank	15092
Name	ANJALI GUPTA
Father Name	MITHILESH PRASAD
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PUBLIC HEALTH DENTISTRY)

NODAL CENTER **Bareilly International University , Bareilly**

Security Fee Details

Transaction No	230928164899907
Transaction Branch	ICICI BANK
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 10/10/2023.

2- Candidate allotted in private collge is advised to submit requisite tuition fee through ICTS Ba Demand Draft in favour of Director General Medical Education and Training, UP Lucknow Nadal Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

SUSHIL KUMAR THAKUR

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Reason: your signing reason here
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Foxit PDF Editor Version: 2024.1.0

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) at your institute on the basis of allotment on 14/08/2023 . Candidate is advised to report on or before 20/08/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355123438
Neet Rank	5839
Name	DEVANSHI PALARIYA
Father Name	NAVEEN PALARIYA
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))
NODAL CENTER	**Bareilly International University , Bareilly**

Security Fee Details

Transaction No	IGAPZOUGX6
Transaction Bank	STATE BANK OF INDIA
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 20/08/2023

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

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SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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UTTAR PRADESH DENTAL COUNCIL

5-Sarvapalli, Mall Avenue Road, Lucknow

(Issued under section 32(2) / 35(4) of the Dentists Act, 1948)

UTTAR PRADESH DENTIST'S REGISTRATION CERTIFICATE

Certificate No. 23875 **Dated : 16/12/2022**

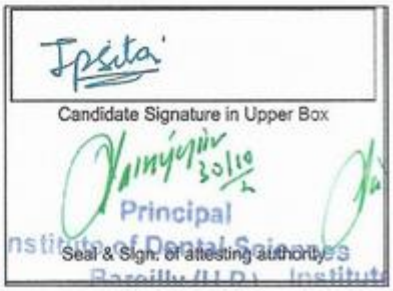
This is to certify that the person named below has been registered as a DENTIST in the Uttar Pradesh under the provisions of Dentists' Act, 1948

Registration in Part	A
Name	IPSITA MANGLA (KM)
Mother's Name Smt.	PRITI MANGLA
Father's Name Sri	RAJESH MANGLA
Qualification	Bachelor of Dental Surgery (B.D.S.)
Year of Passing	NOVEMBER-2022
College	INSTITUTE OF DENTAL SCIENCES, BAREILLY
University	BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY
Date & Place of registration	16/12/2022 Lucknow
Address	11, AAKASH PURAM VISTAAR COLONY, BAREILLY-243006, UTTAR PRADESH
This certificate shall remain inforce upto :-	31/12/2027
Underwent rotatory Internship Training from	26/11/2021 To 25/11/2022
at INSTITUTE OF DENTAL SCIENCES & HOSPITAL, BAREILLY	

Place : Lucknow

U.P. Dental Council has the right to cancel the certificate, if any information is found to be incorrect at a later date.





SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F41968932532 6C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
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Signature valid

Digitally Signed By ALOK KUMAR
(REGISTRAR, U.P. DENTAL COUNCIL)
Date :19.12.2022 13:03:49

REGISTRAR
U.P. DENTAL COUNCIL,
LUCKNOW

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

MOP-UP Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PERIODONTOLOGY) at your institute on the basis of MOP-UP allotment on 06/10/2023 . Candidate is advised to report on or before 10/10/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355122927
Neet Rank	17432
Name	MAYANK AWASTHI
Father Name	JITENDRA AWASTHI
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PERIODONTOLOGY)

NODAL CENTER **Bareilly International University , Bareilly**

Security Fee Details

Transaction No	230928164934164
Transaction Branch	ICICI BANK
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 10/10/2023

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

SUSHIL KUMAR THAKUR

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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2024

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PERIODONTOLOGY) at your institute on the basis of allotment on 19/07/2024 . Candidate is advised to report on or before 25/07/2024 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2455127747
Neet Rank	3302
Name	BHAVYA AGARWAL
Father Name	PANKAJ AGARWAL
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PERIODONTOLOGY)
NODAL CENTER	**Bareilly International University , Bareilly**

Security Fee Details

Transaction No	CPADZDGYG5
Transaction Bank	STATE BANK OF INDIA
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 25/07/2024

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CCMS Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payab Lucknow.

3- Candidate is advised to submit relevant original documents along with one set of photos Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled.

SUSHIL KUMAR THAKUR

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Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2024)

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YS MULTI SPECIALITY DENTAL CLINIC
YS मल्टी स्पेशिलिटी डेन्टल क्लीनिक

Dr. Mohd. Faisal
B.D.S., M.I.D.A, B.L.S.
(IDS, BAREILLY)

रजि. नं. 24165

डा. मौ. फैसल
बी.डी.एस., एम.आई.डी.ए
बी.एल.एस. (आई.डी.एस. बरेली)

Opp. Pooja Hospital, Haridwar Road, Najibabad, Call: +91 7454854126

Patient's Name ..... Age ..... Sex..... Date .....

- X- Ray (एक्सरे) RVG
- R.C.T./Single Sitting
- R.C.T. (दाँतो की नसों का इलाज)
- Scaling & Polishing
  (दाँतो की सफाई)
- Smile Designing
  (स्माईल डिज़ाइनिंग)
- Bleaching/Whitening
  (ब्लीचिंग)
- Painless Extraction
  (बिना दर्द के दाँत निकालना)
- Tooth Coloured Filling
  (दाँतो के रंग की फिलिंग)
- Denture (Fix & Removable)
  (जबड़ा लगाना)
- Crown & Bridges
  (दाँत लगाना)
- Orthodontic Treatment
  (टेढ़े मेढे दाँतो का ईलाज)
- Dental Implant
  (फिक्स दाँत)
- All Dental Treatment for Kids
  (बच्चों के दाँतो ईलाज)
- Dental Jewellery
- Tobacco Cessation Counseling

Timing : 10 AM TO 02 PM
04 PM TO 08 PM

Chief Complaint

Examination

Advise
R_X

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Not for Medico Legal Purposes
Valid for 7 Days

Regd. No.-3592

DR. RASTOGI DENTAL CARE

8923331113
+91-5948-359286

"Make Your Smile Brighter with us"

Patient's Name..... Date:.....

Address..... Age..... Gender.....

Mobile No. .....

Facilities Available
उपलब्ध सुविधायें

- ☆ **Dental Implant**
  पक्के दाँत लगाना
- ☆ **Root Canal Tt. (RCT)**
  दाँतों की नसों का इलाज
- ☆ **Fixed Ortho Treatment**
  टेढ़े मेढ़े दाँतों का इलाज
  BRACES के द्वारा
- ☆ **Digital X-Ray**
  डिजिटल एक्स-रे
- ☆ **Extraction**
  दाँत निकालना
- ☆ **Complete Denture**
  जबड़ा लगाना
- ☆ **Partial Denture**
  निकालने व लगाने वाले दाँत
- ☆ **Crown & Bridge Work**
- ☆ **Laser Filling**
- ☆ **Ultrasonic Scaling**
  दाँतों की सफाई
- ☆ **Management of OSMF**
  मुँह के कम खुलने का इलाज
- ☆ **Bleaching**
  पीले दाँतों का इलाज
- ☆ **All Routine Dental Treatment**

C/c

R_X

Dr. Saurabh Rastogi
BDS (Dental Surgeon)
दन्त एवं मुख रोग विशेषज्ञ

Medical History



SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D799F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
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पता : निकट एल.आई.सी. ऑफिस, बाईपास रोड सितारगंज

VALID FOR 7 DAYS.

Time - 10:00 a.m. to 2:00 p.m., 4:00 p.m. to 8:00 p.m.

TUESDAY CLOSED

Not valid for Medico-Legal Purp

TEERTHANKER MAHAVEER UNIVERSITY

(Established under Govt. of U.P. Act No. 30, 2008)
Delhi Road, Moradabad-244001 (U.P.) India
Tel.: +91-0591-2360222, 2476801
Email :hr@tmu.ac.in; hr@tmu.ac.in; **Website :**www.tmu.ac.in

CONFIDENTIAL

Ref. No.: TMU/HR/AL/2021-22/165

Date: 04/07/2022

Dr. Deepshikha
H.No.- 5/200, G-24, Ganga Enclave, G.T. Road,
Banna Devi, Aligarh- 202001(UP)

Sub: Appointment for the post of Sr. Lecturer in the Department of Pediatric and Preventive Dentistry, Teerthanker Mahaveer Dental College & Research Centre.

With reference to your application and recommendation of the Selection Committee, the University is pleased to appoint you as **Sr. Lecturer** in the **Department of Pediatric and Preventive Dentistry, Teerthanker Mahaveer Dental College & Research Centre,** run under the aegis of TMIMT (Society) on the following terms and conditions:

1. Your appointment will be effective from **July 04, 2022.**
2. Your services will be governed by the Act, Statutes, Ordinances & Service Rules of the University/ TMIMT (Society) as applicable from time to time.
3. You will be on probation for a period of one year from the date of your joining the duties. This period of probation may, however, be extended depending upon your performance and feedback.
4. As a full time employee, you will not engage yourself in any other employment or trade outside the university. You are required to abide the rules and regulations of the University in letter and spirit as applicable and issued from time to time.
5. This appointment can be terminated on two months' notice or pay in lieu there-of (as mentioned in the Service Rules) during the tenure of this appointment from either side.

Wishing you a great satisfying career with T.M.U.

Yours sincerely,

Dr. Aditya Kr. Sharma
Registrar

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
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CC to:
1. Dy. Director (A/c)
2. Personal File (HR Department)

Acceptance: **I, Deepshikha, D/o Mr. Chandan Singh, hereby accept the terms & conditions given here above.**

Signature

Sree Sai Educational Society's

SREE SAI DENTAL COLLEGE AND RESEARCH INSTITUTE

Chapuram Village, Balaga Rural, SRIKAKULAM- 532 401. Andhra Pradesh, India.

21 Feb 2024, 2:50 pm

Lr. No: 2024/ 129/ J-M/ Rea. App

10-01-2024

APPOINTMENT ORDER

Dr. Srinandan Pradhan, M.D.S, consequent on his selection by the selection committee in its meeting dated: 10.01.2024 is appointed full time as Reader in the Department of Pediatric And Preventive Dentistry at Sree Sai Dental College & Research Institute, Srikakulam.

This appointment is governed by the college service rules in force from time to time. He shall submit all his certificates and report to duty before the principal within one week from the date of this order failing which this order stands cancelled.

PRINCIPAL

10/01/2024

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

College Ph: 08942 - 294588, 6301315897.E_mail : ssdcri6@yahoo.co.in,
Website : www.ssdcri.org. Instagram : ssdcri, facebook :Sree Sai Dental College and Research Institute

JOINING REPORT

Date: 10th Jan 2024

From

SRINANDAN PRADHAN

To

The Principal,
Sree Sai Dental College & Research Institute,
Srikakulam ,
Andhra Pradesh.

Sir,

Sub: submission of my joining report as ---------- READER ---------- Reg

Ref: your appointment letter dated---2024/129/I-M/Rea.App: - 10-01-2024

* * *

I am thankful to you for your kind offer of the job. I have carefully read all the service rules of the sree sai Dental College & Research Institute and I accepted the same.

I am joining today i. e ---10th JAN 2024---as a ---------- READER ---------- in the department of ---PEDODONTICS & PREVENTIVE DENTISTRY--- at Sree Sai Dental College & Research Institute.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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Location: your signing location here
Date: 2024.09.23 17:36:10 +05'30'
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Srinandan Pradhan.

Thanking you sir.

PRINCIPAL

(Counter signed by Principal)

21 Feb 2024, 2:49 pm

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2024 **DATE: -13.03.2024**

To,
DR. SHUBHI GANGWAR
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORTHODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of ORTHODONTICS on the following terms and conditions: -

1. **That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. **That you will be required to perform all the duties relating to the post and also assigned by the management time to time.**
3. **That you will be required to follow all the rules, regulations and discipline of the institute strictly.**
4. **In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.**
5. **That you will be on a probation period of one year from date of joining.**
6. **You can be terminated any time on the basis of non-performance**
7. **That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.**
8. **Promotions and increments will be based on good performance in teaching students and treatment of patients.**
9. **Annual Leaves will be as per college norms.**
10. **That you are required to join the post at the earliest and report to th failing which this letter of appointment shall be treated automatically ca**

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office) Fax : 0581 :2526054, 2303345
e-mail : info@rmcbareilly.com, www.rmcbareilly.com

SUSHIL KUMAR THAKUR

REF. NO:- IDS/APPT/2019

DATED:-01.08.2019

To,
DR. AISHWARYA
SENIOR LECTURER

SUB:-Appointment to the post of SENIOR LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES,BAREILLY

Dear Madam,

With reference to your discussion with the management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **SENIOR LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions:-

1. That your pay is **Rs.25,000/-(Rupees Twenty Five Thousand only) per month**.
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the Institute strictly.
4. That you will be on a probation period of 6 months from date of your joining.
5. That you will serve this institution as least for terms of one year and in case you desire to leave the institution after this period you will give 3 months notice before leaving the job.
6. That during your service in this Institution, you will be entitled to avail maximum twenty four days leave in a calendar year in addition to all notified holidays during the year.
7. That the management may terminate your services giving one month's prior notice or one month's salary in lieu thereof when your services are not required by the college.
8. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
9. That you are required to join the post from as earliest and report to the Principal, falling which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Accepted and Recieved
28/8/19
Aishwarya

DR. ASHOK KR. AGARWAL
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055214953
State Rank	368
Name	AISHWARYA MAHAJAN
Father Name	PARESH MAHAJAN
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))

Institute/ Course Left /

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	CPABCQEMB3
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through [illegible] Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow p[illegible] Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the time of college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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UTTAR PRADESH DENTAL COUNCIL

5-Sarvapalli, Mall Avenue Road, Lucknow

(Issued under section 32(2) / 35(4) of the Dentists Act, 1948)

UTTAR PRADESH DENTIST'S REGISTRATION CERTIFICATE

Certificate No. 23926 **Dated : 21/12/2022**

This is to certify that the person named below has been registered as a DENTIST in the Uttar Pradesh under the provisions of Dentists' Act, 1948

Registration in Part	A
Name	AKANKSHA VARSHNEY (KM)
Mother's Name Smt.	POONAM VARSHNEY
Father's Name Sri	NARENDRA KUMAR VARSHNEY
Qualification	Bachelor of Dental Surgery (B.D.S.)
Year of Passing	NOVEMBER-2022
College	INSTITUTE OF DENTAL SCIENCES, BAREILLY
University	BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY
Date & Place of registration	21/12/2022 Lucknow
Address	HOUSE NO .1149 , TAVELA GALI , CIRCULAR ROAD, HATHRAS-204101, UTTAR PRADESH

DCI
UTTAR PRADESH DENTAL COUNCIL

This certificate shall remain inforce upto :-	31/12/2027
Underwent rotatory Internship Training from	26/11/2021 To 25/11/2022
at INSTITUTE OF DENTAL SCIENCES & HOSPITAL, BAREILLY	

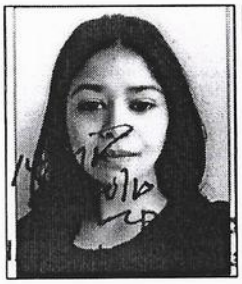
Place : Lucknow

U.P. Dental Council has the right to cancel the certificate, if any information is found to be incorrect or

SUSHIL KUMAR THAKUR

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Reason: your signing reason here
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Signature Not Verified
Digitally Signed By:ALOK KUMAR
(REGISTRAR, U.P. DENTAL COUNCIL)
Date :26.12.2022 17:48:32



Candidate Signature in Upper Box

Principal
Institute of Dental Sciences
Seal & Sign. of attesting authority
Bareilly (U.P.)

REGISTRAR
U.P. DENTAL COUNCIL,
LUCKNOW

DCI
UTTAR PRADESH DENTAL COUNCIL

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

MOP-UP Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PUBLIC HEALTH DENTISTRY) at your institute on the basis of MOP-UP allotment on 06/10/2023 . Candidate is advised to report on or before 10/10/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355106395
Neet Rank	15092
Name	ANJALI GUPTA
Father Name	MITHILESH PRASAD
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PUBLIC HEALTH DENTISTRY)

NODAL CENTER **Bareilly International University , Bareilly**

Security Fee Details

Transaction No	230928164899907
Transaction Branch	ICICI BANK
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 10/10/2023.

2- Candidate allotted in private collge is advised to submit requisite tuition fee through ICTS Ba Demand Draft in favour of Director General Medical Education and Training, UP Lucknow Nadal Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

SUSHIL KUMAR THAKUR

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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office) Fax : 0581 :2526054, 2303345
e-mail : info@rmcbareilly.com, www.rmcbareilly.com

REF. NO:- IDS/APPT/2019 DATED:-31.12.2019

To,
DR. ANKIT RATHORE
SENIOR LECTURER

SUB:-Appointment to the post of SENIOR LECTURER in the department of ORAL MEDICINE & RADIOLOGY in the INSTITUTE OF DENTAL SCIENCES,BAREILLY

Dear Sir,

With reference to your discussion with the management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **SENIOR LECTURER** in the department of **ORAL MEDICINE & RADIOLOGY** on the following terms and conditions:-

1. That your pay is **Rs.18,000/-(Rupees Eighteen Thousand only) per month**.
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the Institute strictly.
4. That you will be on a probation period of 6 months from date of your joining.
5. That you will serve this institution as least for terms of one year and in case you desire to leave the institution after this period you will give 3 months' notice before leaving the job.
6. That during your service in this Institution, you will be entitled to avail maximum twenty four days leave in a calendar year in addition to all notified holidays during the year.
7. That the management may terminate your services giving one month's prior notice or one month's salary in lieu thereof when your services are not required by the college.
8. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
9. That you are required to join the post from as earliest and report to the Principal, falling which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

DR. ASHOK KR. AGARWAL
(President)

Appendix – VI

Joining Report

Dr. Ankita Chandak

From:

P:109 CIT Road 1st Floor entally Kolkata 700014 W.B.

Date: 01-11-2021

To,

The Dean,

Dr. Hedgewar Smruti Rugna Seva Mandal's

Dental College & Hospital Hingoli

Dist. Hingoli 431513

Subject : **Joining Report**

Reference : **Your appointment order No.** HDCH APPT/2021-22/181
Dated 01-11-2021

Sir/Madam,

I have received the above cited appointment order on 01-11-2021 I am accepting the same and joining to the post of Lecturer in the subject of Pedodontics w.e.f. 01-11-2021 (before noon/afternoon) and I am aware that my appointment is subject to the approval from the University.

"Allowed to join"

Yours faithfully,

Ankita Chandak

(.....)

Dr. Ankita Chandak

Note: The appointing authority should endorsed the remarks as "Allowed to join" on the joining report in his hand and sign the same with seal of the college.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C9733791 13FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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एकदन्त

मल्टीस्पेशलिटी डेन्टल इम्प्लांट एण्ड मैक्सिलोफेशियल सर्जरी सेन्टर

7895446982
9452431216

डा. अंशु केशरवाल

B.D.S., M.D.S. (Pediatric Dentist)
बाल दन्त रोग विशेषज्ञ
पूर्व दन्त चिकित्सक
रोहिलखण्ड मेडीकल कॉलेज, बरेली (उ.प्र.)
रजि. नं. 14751

डा. स्वप्निल सक्सेना

B.D.S., M.D.S.
(Maxillofacial & Implant Surgeon)
मुख एवं जबड़ा रोग विशेषज्ञ
पूर्व चिकित्सक हिन्दू राव अस्पताल (नई दिल्ली)
रजि. नं. 14752

Name.....*Age*.....*Sex*.....

Address.....*Mob.* .....*Date*.....

R_x

Past Medical History

स्पेशलिस्ट

- **R.C.T. Crown Bridge, फिक्सड दाँत, Tooth Coloured Filling, Prorrhea (पायरिया)।**
- **बच्चों के दाँतों का सम्पूर्ण इलाज।**
- **दूध के दाँतो की नसों का इलाज। (Pulpectomy/Pulpotomy)**
- **बच्चों के दाँतों की कैप। (Pedo Crown)**
- **दाढ़-दाँत सम्बन्धी दर्द एवं बीमारियों का सम्पूर्ण इलाज।**
- **एक्सीडेन्ट में टूटे जबड़े की प्लेटिंग द्वारा सर्जरी।**
- **हड्डी में फसी अक्ल दाढ़ की सर्जरी।**
- **जबड़ें के सिस्ट (रसौली) एवं ट्यूमर की सर्जरी।**
- **गुटखा तम्बाकू के सेवन से हुए बन्द मुँह को खोलने की सर्जरी।**
- **जीभ तथा मुँह के कैंसर की जाँच (BIOPSY)**
- **डेन्टल इम्प्लांट (दन्त प्रत्यारोपण)**

SUSHIL KUMAR THAKUR
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Reason: your signing reason here
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समयः सुबह 10:00 बजे से 1:00 बजे तक शाम 5:00 से 8:00 बजे तक रविवार प्रातः 10:00 बजे से 3:00 बजे तक

■ Not Valid For Medicolegal Use. ■ E-mail:ekdantdentalfbd@gmail.com ■ Valid for 7 Days.

पताः अम्बेडकर नगर, नरकसा कादरी गेट, सूरज गार्डन के सामने, फर्रुखाबाद (उ.प्र.)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: -05.08.2021

To,
DR. ANUGRAH SAXENA
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of PERIODONTICS on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in the students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

Rohilkhand Medical College & Hospital

Pilibhit Bypass Road, Opp. Suresh Sharma Nagar
Bareilly (UP) – 243 006
Phone : 0581-2526011, 2526012 Fax : 0581-2526054, 2303345
e-mail : info@rmcbareilly.com website : www.rmcbareilly.com

Ref : **RMCH/ 640 /2023** Date : 01.11.2023

To,

Dr. Rohit Palta
I/66/1, Street No. 10,
Brahampuri, Near Moni Baba Temple, Garhi Mendu
North East Delhi-110053

Sub : **Appointment to the post of Assistant Professor Department of General Medicine at Rohilkhand Medical College, Bareilly**

Dear Sir,

With reference to the interaction with the undersigned. I am pleased to appoint you to the above post on the following terms & conditions.

1. That you can join this medical college & hospital at the earliest and contact the Principal for completion of joining formalities.
2. That your Salary in Rs. 2,25,000/- PM (Consolidated).
3. That you will be required to perform all the duties relating to the post from 8 am to 4 pm & other duties assigned to you from time to time.
4. That you will be on a probation period of 1 year from the date of your joining. In case your performance is not upto the satisfaction of your superiors, your services may be terminated without any notice during this period.
5. That you will work on this post for a minimum period of one year and after that if you desire to leave the institute you have to give 3 months prior working notice.
6. You will solely be responsible for your eligibility documents and other certificates submitted by you, at your own risk and consequences.
7. Your salary will be drawn on the basis of Biometric Attendance.
8. That you will have to attend emergency duties whenever assigned.
9. That you are not allowed to do Private Practice.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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Location: your signing location here
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Yours faithfully,

(Dr. Ashok Kumar Agarwal)
President
For Rohilkhand Educational Charitable Trust
Bareilly

Rohilkhand Medical College & Hospital

Pilibhit Bypass Road, Opp. Suresh Sharma Nagar
Bareilly (UP) – 243 006
Phone : 0581-2526011, 2526012 Fax : 0581-2526054, 2303345
e-mail : info@rmcbareilly.com website : www.rmcbareilly.com

Ref : **RMCH/005/2024** Date : 01.01.2024

To,

Dr. Tushar Gupta
130, Tagore Nagar,
Dayal Bagh,
Agra

Sub : **Appointment to the post of Senior Resident Department of General Medicine at Rohilkhand Medical College, Bareilly**

Dear Sir,

With reference to the interaction with the undersigned. I am pleased to appoint you to the above post on the following terms & conditions.

1. That you can join this medical college & hospital at the earliest and contact the Principal for completion of joining formalities.
2. That your Salary in Rs. 1,80,000/- PM (Consolidated).
3. That you will be required to perform all the duties relating to the post from 8 am to 4 pm & other duties assigned to you from time to time.
4. That you will be on a probation period of 1 year from the date of your joining. In case your performance is not upto the satisfaction of your superiors, your services may be terminated without any notice during this period.
5. That you will work on this post for a minimum period of one year and after that if you desire to leave the institute you have to give 3 months prior working notice.
6. You will solely be responsible for your eligibility documents and other certificates submitted by you, at your own risk and consequences.
7. Your salary will be drawn on the basis of Biometric Attendance.
8. That you will have to attend emergency duties whenever assigned.
9. That you are not allowed to do Private Practice.

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EEC86FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

SUSHIL KUMAR THAKUR

Yours faithfully,

(Dr. Ashok Kumar Agarwal)
President
For Rohilkhand Educational Charitable Trust
Bareilly

Rohilkhand Medical College & Hospital

Pilibhit Bypass Road, Opp. Suresh Sharma Nagar
Bareilly (UP) – 243 006
Phone : 0581-2526011, 2526012 Fax : 0581-2526054, 2303345
e-mail : info@rmcbareilly.com website : www.rmcbareilly.com

Ref : **RMCH/ 722 /2023** Date : 18.12.2023

To,

Dr. J. Sarveswaraiah
8-7-172/7, Samata Nagar, Old
Bowenpally Secunderabad

Sub : **Appointment to the post of Senior Resident Department of General Medicine at Rohilkhand Medical College, Bareilly**

Dear Sir,

With reference to the interaction with the undersigned. I am pleased to appoint you to the above post on the following terms & conditions.

1. That you can join this medical college & hospital at the earliest and contact the Principal for completion of joining formalities.
2. That your Salary in Rs. 1,80,000/- PM (Consolidated).
3. That you will be required to perform all the duties relating to the post from 8 am to 4 pm & other duties assigned to you from time to time.
4. That you will be on a probation period of 1 year from the date of your joining. In case your performance is not upto the satisfaction of your superiors, your services may be terminated without any notice during this period.
5. That you will work on this post for a minimum period of one year and after that if you desire to leave the institute you have to give 3 months prior working notice.
6. You will solely be responsible for your eligibility documents and other certificates submitted by you, at your own risk and consequences.
7. Your salary will be drawn on the basis of Biometric Attendance.
8. That you will have to attend emergency duties whenever assigned.
9. That you are not allowed to do Private Practice.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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Yours faithfully,

(Dr. Ashok Kumar Agarwal)
President
For Rohilkhand Educational Charitable Trust
Bareilly

RECEIVED
J. Sarveswaraiah
4/1/24

Rohilkhand Medical College & Hospital

Pilibhit Bypass Road, Opp. Suresh Sharma Nagar
Bareilly (UP) – 243 006
Phone : 0581-2526011, 2526012 Fax : 0581-2526054, 2303345
e-mail : info@rmcbareilly.com website : www.rmcbareilly.com

Ref : RMCH/ 341 /2022 Date : 21.05.2022

To,

Dr. Himank Maheshwari
S/o Mr. Naresh Kumar Maheshwari,
Mohalla No. 2, Bilsi,
Badaun – 243633 U.P.

Sub : **Appointment to the post of Senior Resident Department of General Surgery at Rohilkhand Medical College, Bareilly**

Dear Sir,

With reference to the interaction with the undersigned. I am pleased to appoint you to the above post on the following terms & conditions.

1. That you can join this medical college & hospital at the earliest and contact the Principal for completion of joining formalities.
2. That your Salary in Rs. 1,10,000/- PM (Consolidated).
3. That you will be required to perform all the duties relating to the post from 8 am to 4 pm & other duties assigned to you from time to time.
4. That you will be on a probation period of 6 months from the date of your joining. In case your performance is not upto the satisfaction of your superiors, your services may be terminated without any notice.
5. That you will work on this post for a minimum period of one year and if you desire to continue in the institute beyond one year, you have to give 1 month prior information.
6. You will solely be responsible for your eligibility documents and other certificates submitted by you, at your own risk and consequences.
7. Your salary will be drawn on the basis of Biometric Attendance.
8. That you will have to attend emergency duties whenever assigned.

Yours faithfully,

SUSHIL KUMAR THAKUR

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(Dr. Ashok Kumar Agarwal)
President
For Rohilkhand Educational Charitable Trust
Bareilly

Rohilkhand Medical College & Hospital

Pilibhit Bypass Road, Opp. Suresh Sharma Nagar
Bareilly (UP) – 243 006
Phone : 0581-2526011, 2526012 Fax : 0581-2526054, 2303345
e-mail : info@rmcbareilly.com website : www.rmcbareilly.com

Ref : **RMCH/ 448/2023** Date : 01.08.2023

To,

Dr. Amandeep Singh
Village Kanakpur,
Kashipur, Udham Singh Nagar,
Uttarakhand

Sub : **Appointment to the post of Senior Resident Department of General Medicine at Rohilkhand Medical College, Bareilly**

Dear Sir,

With reference to the interaction with the undersigned. I am pleased to appoint you to the above post on the following terms & conditions.

1. That you can join this medical college & hospital at the earliest and contact the Principal for completion of joining formalities.
2. That your Salary in Rs. 1,80,000/- PM (Consolidated).
3. That you will be required to perform all the duties relating to the post from 8 am to 4 pm & other duties assigned to you from time to time.
4. That you will be on a probation period of 6 months from the date of your joining. In case your performance is not upto the satisfaction of your superiors, your services may be terminated without any notice.
5. That you will work on this post for a minimum period of one year.
6. You will solely be responsible for your eligibility documents and other certificates submitted by you, at your own risk and consequences.
7. Your salary will be drawn on the basis of Biometric Attendance.
8. That you will have to attend emergency duties whenever assigned.
9. That you are not allowed to do Private Practice.

Yours faithfully,

SUSHIL KUMAR THAKUR

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(Dr. Ashok Kumar Agarwal)
President
For Rohilkhand Educational Charitable Trust
Bareilly

Rohilkhand Medical College & Hospital

Pilibhit Bypass Road, Opp. Suresh Sharma Nagar
Bareilly (UP) – 243 006
Phone : 0581-2526011, 2526012 Fax : 0581-2526054, 2303345
e-mail : info@rmcbareilly.com website : www.rmcbareilly.com

RMCH/ /2024 Date: 19th September, 2024

To,

The Controller of Examination
Bareilly International University,
Bareilly (U.P.)

Subject:- Forwarding of Scrutiny Forms for MBBS 1st Professional University Examinations (July, 2024)

Sir,

Please find enclosed Scrutiny form of MBBS Course for University Examination (July- August 2024) as per details given below:

Sl. No.	University Roll Number	Name of the Student	Name of Examination
1	241101074	Ayush Kumar Singh	MBBS 1st Professional University Examination July, 2024

You are requested to kindly take necessary action at your end please.

Thanking you.

Yours faithfully,

(Dr. Dig Vijay Singh)
Dean/Principal

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS) First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055218649
State Rank	240
Name	ARCHIT BAHADUR
Father Name	BRIJESH BAHADUR
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS)
Institute/ Course Left	/

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	CPABCQVKC5
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the time college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2023 **DATE: -07.10.2023**

To,

DR. ASTHA KHURANA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE on the following terms and conditions: -

1. **That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. **That you will be required to perform all the duties relating to the post and also assigned by the management time to time.**
3. **That you will be required to follow all the rules, regulations and discipline of the institute strictly.**
4. **In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.**
5. **That you will be on a probation period of one year from date of joining.**
6. **You can be terminated any time on the basis of non-performance**
7. **That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.**
8. **Promotions and increments will be based on good performance in teaching students and treatment of patients.**
9. **Annual Leaves will be as per college norms.**
10. **That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.**

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2520051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2019

DATE: - 09.10.2019

To,

DR. CHETAN LUNIYAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2022

DATE: - 21/07/2022

To,

DR. DARAKSHAN SAIFI
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

SUSHIL KUMAR THAKUR

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS) at your institute on the basis of allotment on 14/08/2023 . Candidate is advised to report on or before 20/08/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355103401
Neet Rank	9112
Name	DEEPIKA YADAV
Father Name	SURESH YADAV
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (ORTHODONTICS & DENTOFACIAL ORTHOPAEDICS)
NODAL CENTER	**Bareilly International University , Bareilly**

Security Fee Details

Transaction No	230808160510576
Transaction Bank	ICICI BANK
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 20/08/2023

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F41968932532 6C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

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TEERTHANKER MAHAVEER UNIVERSITY

(Established under Govt. of U.P. Act No. 30, 2008)
Delhi Road, Moradabad-244001 (U.P.) India
Tel.: +91-0591-2360222, 2476801
Email :hr@tmu.ac.in; hr@tmu.ac.in; **Website :**www.tmu.ac.in

CONFIDENTIAL

Ref. No.: TMU/HR/AL/2021-22/165

Date: 04/07/2022

Dr. Deepshikha
H.No.- 5/200, G-24, Ganga Enclave, G.T. Road,
Banna Devi, Aligarh- 202001(UP)

Sub: Appointment for the post of Sr. Lecturer in the Department of Pediatric and Preventive Dentistry, Teerthanker Mahaveer Dental College & Research Centre.

With reference to your application and recommendation of the Selection Committee, the University is pleased to appoint you as **Sr. Lecturer** in the **Department of Pediatric and Preventive Dentistry, Teerthanker Mahaveer Dental College & Research Centre,** run under the aegis of TMIMT (Society) on the following terms and conditions:

1. Your appointment will be effective from **July 04, 2022.**
2. Your services will be governed by the Act, Statutes, Ordinances & Service Rules of the University/ TMIMT (Society) as applicable from time to time.
3. You will be on probation for a period of one year from the date of your joining the duties. This period of probation may, however, be extended depending upon your performance and feedback.
4. As a full time employee, you will not engage yourself in any other employment or trade outside the university. You are required to abide the rules and regulations of the University in letter and spirit as applicable and issued from time to time.
5. This appointment can be terminated on two months' notice or pay in lieu there-of (as mentioned in the Service Rules) during the tenure of this appointment from either side.

Wishing you a great satisfying career with T.M.U.

Yours sincerely,

Dr. Aditya Kr. Sharma
Registrar

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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CC to:
1. Dy. Director (A/c)
2. Personal File (HR Department)

Acceptance: **I, Deepshikha, D/o Mr. Chandan Singh, hereby accept the terms & conditions given here above.**

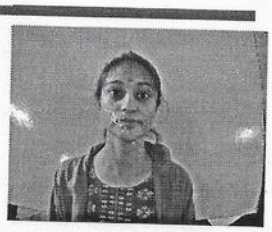
Signature

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) at your institute on the basis of allotment on 14/08/2023 . Candidate is advised to report on or before 20/08/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355123438
Neet Rank	5839
Name	DEVANSHI PALARIYA
Father Name	NAVEEN PALARIYA
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))
NODAL CENTER	**Bareilly International University , Bareilly**

Security Fee Details

Transaction No	IGAPZOUGX6
Transaction Bank	STATE BANK OF INDIA
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 20/08/2023

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

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SUSHIL KUMAR THAKUR

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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2021 DATE: - 19.05.2021

To,

DR. GAURAV VISHAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL AND MAXILLOFACIAL SURGERY in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **ORAL AND MAXILLOFACIAL SURGERY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/-per month (Rupees Twenty-five thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of 06 months from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kumar Agarwal
(President)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2021

DATE: -05.08.2021

To,
DR. GEETIKA KUMAR
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of PERIODONTICS on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023

DATE: -31.05.2023

To,

DR. HARSHITA PUTTHIA
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL PATHOLOGY & MICROBIOLOGY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **of ORAL PATHOLOGY & MICROBIOLOGY** on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

UTTAR PRADESH DENTAL COUNCIL

5-Sarvapalli, Mall Avenue Road, Lucknow

(Issued under section 32(2) / 35(4) of the Dentists Act, 1948)

UTTAR PRADESH DENTIST'S REGISTRATION CERTIFICATE

Certificate No. 23875 **Dated :** 16/12/2022

This is to certify that the person named below has been registered as a DENTIST in the Uttar Pradesh under the provisions of Dentists' Act, 1948

Registration in Part	A
Name	IPSITA MANGLA (KM)
Mother's Name Smt.	PRITI MANGLA
Father's Name Sri	RAJESH MANGLA
Qualification	Bachelor of Dental Surgery (B.D.S.)
Year of Passing	NOVEMBER-2022
College	INSTITUTE OF DENTAL SCIENCES, BAREILLY
University	BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY
Date & Place of registration	16/12/2022 Lucknow
Address	11, AAKASH PURAM VISTAAR COLONY, BAREILLY-243006, UTTAR PRADESH
This certificate shall remain inforce upto :-	31/12/2027
Underwent rotatory Internship Training from	26/11/2021 To 25/11/2022
at INSTITUTE OF DENTAL SCIENCES & HOSPITAL, BAREILLY	

Place : Lucknow

U.P. Dental Council has the right to cancel the certificate, if any information is found to be incorrect later.



Candidate Signature in Upper Box

Seal & Sign. of attesting authority

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B93253260C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Signature valid

Digitally Signed By ALOK KUMAR
(REGISTRAR, U.P. DENTAL COUNCIL)
Date :19.12.2022 13:03:49

REGISTRAR
U.P. DENTAL COUNCIL,
LUCKNOW

DCI
UTTAR PRADESH DENTAL COUNCIL

MURRYS DENTAL CLINIC

Near City Tower, Opposite to Axis Bank
Dimapur, Nagaland-797112
✆ +91 8794381092
✆ +91 8794714025

Dr. Mongshithung Murry
Senior Dental Surgeon
Regd. No. 103-A

Dr. Jean Murry
BDS, MDS (Gold Medalist)
Dental Child Specialist
Regd. No. 181-A

Name ..... Sex ..... Age ..... Date .....

Occupation ..... Mobile No. .....

Address .....

MEDICAL HISTORY

- HYPERTENSION
- DIABETES
- CARDIAC
- BLOOD DISORDERS
- MEDICATION
- ALLERGIES
- PREGNANCY
- ANY OTHER

SUSHIL KUMAR THAKUR

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"This prescription is valid for 3 Visits only"
CLOSED ON SUNDAY

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: -31.07.2021

To,

DR. JITENDRA KUMAR DIWAKAR

LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL & MAXILLOFACIAL SURGERY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **ORAL & MAXILLOFACIAL SURGERY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pillbhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: - 08.11.2021

To,
DR. JYOTI BISHT
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL MEDICINE & RADIOLOGY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **ORAL MEDICINE & RADIOLOGY** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
President

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2024 **DATE: -21.02.2024**

To,
DR. JYOTSANA SINGH
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PUBLIC HEALTH DENTISTRY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PUBLIC HEALTH DENTISTRY on the following terms and conditions: -

1. **That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. **That you will be required to perform all the duties relating to the post and also assigned by the management time to time.**
3. **That you will be required to follow all the rules, regulations and discipline of the institute strictly.**
4. **In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.**
5. **That you will be on a probation period of one year from date of joining.**
6. **You can be terminated any time on the basis of non-performance**
7. **That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.**
8. **Promotions and increments will be based on good performance in teaching students and treatment of patients.**
9. **Annual Leaves will be as per college norms.**
10. **That you are required to join the post at the earliest and report to th[illegible] failing which this letter of appointment shall be treated automatically cancelled.**

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B93253 26C00EEC B6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

PATRONAGE
ROHILKHAND EDUCATIONAL CHARITABLE TRUST

K+

GOVERNMENT DOON MEDICAL COLLEGE,

DEHRADUN

Principal Office:

Government Doon Medical College,

Dehrakhas, Patelnagar, Dehradun 248001

Email ID-doonmedicalcollege@gmail.com

Ref: /GDMC/estab-1/2016/02/ 6875

Dated: 26/12/22

OFFER OF APPOINTMENT

Dear,
Dr.Kanika Sharma
D/S/W/o.Shri-S. P Sharma
R/o-Lane No-06, Near Co-operative Society Miyawala, Dehradun .
Mob N0-9599131870 .

With profound pleasure it is to inform you that you have been selected for the post of **Senior Resident** in Govt Doon Medical College & associated Hospitals, Dehradun on the basis of the **"Interview"** held on.19-12-2022

You are hereby being appointed as Senior Resident in the Institution from the date of joining, purely on Contract basis under the following terms & conditions

1. **Salary:**
   Your salary will be calculated on the basis of 7th pay commission G.O which is [redacted] month will be paid as permissible by Uttarakhand Government from time to time.

1. **Reporting:**
   a) You will be reporting initially at Govt Doon Medical College, Dehradun, Uttarakhand. Pin- 248001.
   b) You shall report to the Principal Medical College and discharge the duties that are assigned to you from time to time. If required the Principal shall designate/ authorize a person to whom you shall report and to follow orders/instruction.

SUSH
KUMA
THAKU

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055218485
State Rank	246
Name	KOUSTAV MAITY
Father Name	PABITRA KUSUM MAITY
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))
Institute/ Course Left	/

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	IGAMEAMMV2
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through SBI Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the allotted college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

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DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EEC86FEC22CC0, CN=SUSHIL KUMAR THAKUR
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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023

DATE: -10.03.2023

To,
DR. KRATIKA MOHAN
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL MEDICINE & REDIOLOGY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **ORAL MEDICINE & RADIOLOGY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

Dr. B.R. AMBEDKAR INSTITUTE OF DENTAL SCIENCES & HOSPITAL

A Post Graduate Institution
(Managed by Gautam Educational & Welfare Trust)
A Minority Society Registered under Society Registration Act-21 to 1860.
Recognised by Ministry of Health and Family Welfare, Govt. of India, New Delhi
Recognised by Dental Council of India, New Delhi
Affiliated to Magadh University, Bodh Gaya

Ref. **BR/1154/22**

Date **18/07/2022**

To,

Dr. Kumari Sweta Prakash (MDS)
Senior Lecturer,
Department of Prosthodontics

Sub.: Your appointment on the Post of Senior Lecturer.

Dear Dr. Kumari Sweta Prakash,

In response to your application, I am pleased to inform you that you have been appointed on the Senior Lecturer in the **Department of Prosthodontics** of our college.

You are requested to join on the said post as soon as possible. Your salary perks and terms of appointment shall be in accordance to rules and regulations laid down by Ministry of Health & Family Welfare, Govt. of India, New Delhi and Dental Council of India, New Delhi from time to time.

Thanking you.

(Dr. Avinash)
Vice-Chairman

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97337911 3FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2019

DATE: - 16.10.2019

To,

DR. LALIT AGARWAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2023 DATE: -22.03.2023

To,
DR. LUBNA SHOAIB
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of PERIODONTICS on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

To,

The Principal

Institute of Dental Sciences,

Pillibhit By-pass Road

Bareilly 243006 (U.P.)

SUBJECT: JOINING REPORT

Respected Sir,

I Dr. Lubna Shoaib S/o, D/o, W/o Shri Shoaib Khurshed Khan post of Lecturer in the department of Periodontics I hereby join my duties w.e.f : 22/03/2023

Thanking You,

Yours Truly,

Signature: .....

Name: Dr. Lubna Shoaib

Email ID: shoaiblubna81@gmail.com

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
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Date: 2024.09.23 17:36:10+05'30'
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Shree Jalaram Trust (Calcutta)

Shree Jalaram Path, 140-C, Chander Village Road,
Haridevpur, Behala (East), Kolkata - 700 082.
Phone : 2402 4157 / 2402 7089 / 2237 2584

Date: .....

Dear Sir,

Dr. Madhuri Nath

.....

.....

Re: Appointment of Hony. Visiting DENTAL SURGEON

In reference to your application, we are pleased to appoint you as Hony. Visiting **Dental Surgeon** of our clinic with effect from 01.01.2020 for a period of six months.

Your visiting OPD hours will be on ..... between ..... and .....

This appointment is for a period of six months subject to renew every six months thereafter. This being a contractual appointment, no claim for the post is created hereby.

Either side will have the option to put an end to this appointment by giving advance notice of 15 days.

You will please abide by the code of conduct, rules and regulations of this hospital as in force time to time.

We hope your association with our clinic will benefit many of our patients.

Kindly sign the duplicate copy of this letter and return the same as a token of your acceptance.

Thanking you,

Yours faithfully

For Shree Jalaram Trust (Calcutta) Diagnostic Centre

(.....)

SHREE JALARAM TRUST (CAL

SIGNATURE.....

Trustee

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EEC86FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
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DESUN
HOSPITAL
A NABH HOSPITAL

August 1, 2023

Dr Madhuri Nath Kahar
Pearabagan Road
Dutta Bagan
P.O. Hooghly & P.S. Chinsurah
District - Hooghly
West Bengal - 712103

Association as "Consultant -Department of Dental Surgery" on Part Time basis at DESUN Hospital

Dear Dr Madhuri Nath Kahar,

Further to the letter of offer dated July 26. 2023 issued in your favour appended below please find mentioned the terms and conditions of your Part time association with the hospital.

Terms & Conditions

1) That as discussed and agreed upon your association as "**Consultant - Department of Dental Surgery**" is purely on part time basis on and from August 1, 2023 for a period of 2 (two) years unless discontinued / terminated earlier. You will be required to report to Head of Medical Administration for your duties and responsibilities.

2) That as discussed and agreed upon you will be required to be present at the hospital on and from 12:00 pm to 4:00 pm for 5 Days in a week (Monday to Friday). It has been further discussed and agreed upon that in case of requirement you may have to stay beyond the scheduled hours.

SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, Postal/Code=302033, S=Rajasthan, SERIALNUMBER=C97337911...87F706B89F41...B6FEC22CC...SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

3) *That, as discussed and agreed upon you will enjoy the rights in respect of Outpatients, Inpatient procedure and operation theatre access during the period of 2 (two) years effective from August 1, 2023 and upto such date your association continues. You will be required to make your services available on call as discussed and finalized.*

4) *That, as discussed and agreed upon you will be required to attend to any emergency duty and Inpatient visit on Sundays / Public Holidays.*

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: -21.09.2021

To,

DR. MAMNOON GHAFIR

LECTURER

SUB: -Appointment to the post of LECTURER in the department of ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of ENDODONTICS on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2023

MOP-UP Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PERIODONTOLOGY) at your institute on the basis of MOP-UP allotment on 06/10/2023 . Candidate is advised to report on or before 10/10/2023 at Nodal center for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2355122927
Neet Rank	17432
Name	MAYANK AWASTHI
Father Name	JITENDRA AWASTHI
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PERIODONTOLOGY)

NODAL CENTER **Bareilly International University , Bareilly**

Security Fee Details

Transaction No	230928164934164
Transaction Branch	ICICI BANK
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 10/10/2023

2- Candidate allotted in private collge is advised to submit requisite tuition fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Kinjal Singh

Chairman Counseling Board
(UPNEET PG-2023)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B93253260C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2021

DATE: - 13.07.2021

To,

DR. MEGHA GUPTA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions: -

10. That your pay is **Rs 20,000/-per month (Rupees Twenty-five thousand only).**
11. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
12. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
13. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
14. That you will be on a probation period of one year from date of your joining.
15. You can be terminated any time on the basis of non-performance
16. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
17. Promotions and increments will be based on good performance in teaching students and treatment of patients.
18. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Sathyajith Naik N
(Principal)

Principal
Institute of Dental Sciences
Bareilly (U.P.)

YS MULTI SPECIALITY DENTAL CLINIC
YS मल्टी स्पेशिलिटी डेन्टल क्लीनिक

Dr. Mohd. Faisal
B.D.S., M.I.D.A, B.L.S.
(IDS, BAREILLY)

रजि. नं. 24165

डा. मौ. फैसल
बी.डी.एस., एम.आई.डी.ए
बी.एल.एस. (आई.डी.एस. बरेली)

Opp. Pooja Hospital, Haridwar Road, Najibabad, Call: +91 7454854126

Patient's Name ..... Age ..... Sex..... Date .....

- X- Ray (एक्सरे) RVG
- R.C.T./Single Sitting
- R.C.T. (दाँतो की नसों का इलाज)
- Scaling & Polishing
  (दाँतो की सफाई)
- Smile Designing
  (स्माईल डिज़ाइनिंग)
- Bleaching/Whitening
  (ब्लीचिंग)
- Painless Extraction
  (बिना दर्द के दाँत निकालना)
- Tooth Coloured Filling
  (दाँतो के रंग की फिलिंग)
- Denture (Fix & Removable)
  (जबड़ा लगाना)
- Crown & Bridges
  (दाँत लगाना)
- Orthodontic Treatment
  (टेढ़े मेढे दाँतो का ईलाज)
- Dental Implant
  (फिक्स दाँत)
- All Dental Treatment for Kids
  (बच्चों के दाँतो ईलाज)
- Dental Jewellery
- Tobacco Cessation Counseling

Timing : 10 AM TO 02 PM
04 PM TO 08 PM

Chief Complaint

Examination

Advise
R_X

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Not for Medico Legal Purposes
Valid for 7 Days

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2023

DATE: -01.06.2023

To,

DR. NIDHI PANDEY

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **PERIODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty-Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

REKHA DENTAL CARE AND IMPLANT CENTRE

रेखा डेन्टल केयर एण्ड इम्पलान्ट सेन्टर

Dr. Niraj Kumar Jaiswal — Reg. No. : 8683/A — डॉ० नीरज कुमार जायसवाल

(B.D.S., M.I.D.A.)
Oral and Dental Surgeon

Ex-Dental Surgeon
Institute of Dental Sciences, Bareilly (U.P.)
Bareilly International University, Bareilly (U.P.)

(बी.डी.एस., एम.आई.डी.ए.)
ओरल एण्ड डेन्टल सर्जन

सुविधायें

- Scaling & Polishing — दाँतों की सफाई
- Periodontitis — पायरिया का इलाज
- Gingival Depigmentation — काले मसूड़ों का इलाज
- Removable Partial Denture — निकालने एवं लगाने वाले दाँत
- Complete Denture — बत्तीसी
- Crown & Bridge — फिक्स दाँत
- Dental Implant — डेन्टल इम्पलान्ट
- Root Canal Treatment (R.C.T.) — दाँतों के नसों का इलाज
- Tooth Coloured Filling — दाँतों के रंग की फिलिंग
- Orthodontic Treatment — टेढ़े-मेढ़े दाँतों का इलाज
- Painless Extraction — बिना दर्द के दाँत निकालना
- Impacted Tooth Extraction — अक्ल दाँत को सर्जरी से निकालना
- Oral Ulcer — मुँह के छालों का इलाज
- Reduce Mouth Opening — मुँह का कम खुलना

IOPA-X ray ☐

O.P.G. ☐

Investigation :-

.....

.....



O.P.D. No. : ..... Date : .....

Name : ..... Age : ..... Sex : .....

Address : .....

Chief Complaint :- _____

_____

Medical History :- _____

O/E :-

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F41968932532 6C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

69X1N5

★ Not Valid For Medico Legal Purpose ★ Valid for 20 days

राघा कम्पलेक्स, नव भारत हॉस्पिटल के सामने, लाईन बाजार, पूर्णियाँ (बिहार) - 854301

https://nirajkumarjaiswal2.wixsite.com/rekhadentalcare 9166172576 10:00 AM to 06:00 PM

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2022

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 06/10/2022 . Candidate is advised to report on or before 12/10/2022 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2255107162
State Rank	563, Neet Rank:-12604
Name	NISHANT MATHEW
Father Name	MATHEW K J
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))

NODAL CENTER **BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY**

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	220926131820095
Transaction Branch	ICICI BANK PAYMENT GATWAY
Security Amount	

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

1- Candidate advised to report at Nodal Centre within due dates on or before 12/10/2022.

2- Candidate allotted in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2022)

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2022

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PROSTHODONTICS & CROWN BRIDGE)) First year of your institute on the basis of allotment on 06/10/2022 . Candidate is advised to report on or before 12/10/2022 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2255107162
State Rank	563, Neet Rank:-12604
Name	NISHANT MATHEW
Father Name	MATHEW K J
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PROSTHODONTICS & CROWN BRIDGE))

NODAL CENTER **BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY**

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	220926131820095
Transaction Branch	ICICI BANK PAYMENT GATWAY
Security Amount	

1- Candidate advised to report at Nodal Centre within due dates on or before 12/10/2022

2- Candidate allotted in private collge is advised to submit requisite tution fee through CHALLAN Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2022)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B93253260C00EEC B6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

LIFE CARE DENTAL CLINIC

Add: Near Railway Crossing, Sherpur Road Puranpur (Pilibhit)

Dr. Noman Ahmad Khan
Dental Surgeon
BDS-IDS (BIU)

Name **Sex**

Address **Ph. No.**

C/C

D/H

M/H

ORAL EXAM.

P/D

F/D

TREATMENT

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, SERIALNUMBER=8501, ST=Rajasthan, 2.5.4.20=8f8f1d...
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.03 17:34:10+05'30'
Foxit PDF Editor Version: 2024.1.0

LUPIN LIMITED

Mr. Prasang Gupta

GRADE	**MT**	
DESIGNATION	**Marketing Training**	
	PM (Rs)	**PA (Rs)**
BASIC	19,000	228,000
HOUSE RENT ALLOWANCE	1,045	12,540
ADHOC ALLOWANCE	960	11,520
GROSS MONTHLY	**21,005**	**252,060**
PROVIDENT FUND (12%) of BASIC		27,360
GRATUITY (4.81%) of BASIC		10,967
TOTAL RETIRALS		**38,327**
TOTAL FIXED CTC		**290,387**
BONUS / EXGRATIA		30,375
TOTAL CTC		**320,762**

1. In-addition to the above, you will be covered under the following Schemes as per Company Policy:

    A. Mediclaim: This Policy covers self, spouse, two children and dependent parents, subject to a limit of Rs. 1,25,000/-.

    B. Group Accident Insurance: The Insurance coverage for your grade is Rs.10,00,000/-.

2. All payments are subject to the provisions of Income Tax Act.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D7923F2708FC9D687F06B89F41968B93253260C00EEC B6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
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Suraj Singh
SR. EXECUTIVE – HR

Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET PG COUNSELING-2022

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PUBLIC HEALTH DENTISTRY) First year of your institute on the basis of allotment on 01/11/2022 . Candidate is advised to report on or before 05/11/2022 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2255113812
State Rank	827, Neet Rank:-16961
Name	PALAK GANGWAR
Father Name	LALTA PRASAD GANGWAR
Candidate Category	BCOP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PUBLIC HEALTH DENTISTRY)
Institute / Course Left	/
NODAL CENTER	**BAREILLY INTERNATIONAL UNIVERSITY, BAREILLY**

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	221024134802183
Transaction Branch	ICICI BANK PAYMENT GATWAY
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at Nodal Centre within due dates on or before 05/11/2022

2- Candidate allotted in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the Nodal Centre.

4- If Candidate fails to report then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2022)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B93253 26C00EEC B6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Mob.: 9801621618

OROWELL DENTAL CLINIC

Dr. Pankhuri Priya

B.D.S., M.D.S
Reg. No.-6986/A

डॉ० पंखुड़ी प्रिया

बी.डी.एस., एम.डी.एस.

Patient Name.....***Age/Sex***.....***Date***.....

Add. ..... ***Mob.:*** .....

स्पेशलिस्ट

- रूट कैनाल ट्रीटमेन्ट (R.C.T.)
- बच्चों के दाँतों का ईलाज
- टेढ़े-मेढ़े दाँतों का ईलाज Orthodontic treatment
- बत्तीसी (Complete denture)
- फिक्सड दाँत (Crown & Bridge)
- R.P.D (Removable Partial Denture)
- Implant
- बिना दर्द दाँत निकालना (Painless Extraction)
- दाँतों की सफाई (Scaling)
- Bleaching
- दाँत के रंग की फिलिंग (Laser Filling)
- मुँह के छालों का इलाज
- टूटे जबड़े का इलाज

Rx

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

OPD का समय सुबह 10AM - 2PM शाम 5PM - 8PM

जे जे चाईल्ड केयर हॉस्पीटल, राजोपट्टी, डुमरा रोड, सीतामढ़ी Email-pankhurisilky311992@gmail.com

Not Valid For Medico Legal Purpose

Regd. No.:0506700747

नानकमत्ता अस्पताल

Nanakmatta Hospital

दहला रोड, मोबाइल टॉवर वाली गली, नानकमत्ता (ऊधम सिंह नगर)

Mobile: 8218578565|7088227777|6396501813

डॉ. पवनजोत सिंह
BDS, MDS
Oral Physician & Dental Surgeon

डॉ. प्रभजीत कौर
BDS, MDS
Oral & Maxillofacial Surgeon

दन्त एवं जबड़ा रोग विभाग

Patient's Name_____ Age_____ Gender_____ Date_____

- X-Ray (एक्स-रे) RVG
- R.C.T./Single Sitting
- R.C.T. दाँतों की नसों का इलाज
- Scalling & Polishing
  दाँतों की सफाई/Oral Prophylaxis
- Smile Designing
  स्माइल डिजाइनिंग
- Bleaching/Whitening
  ब्लीचिंग
- Painless Extraction
  बिना दर्द के दाँत निकालना
- Tooth Coloured Filling
  दाँत के रंग की फिलिंग
- Denture (Fix & Removable)
  जबड़ा लगाना
- Crown & Bridges
  दाँत लगाना
- Orthodontic Treatment
  टेढ़े मेढ़े दाँतों का ईलाज
- Dental Implant
  फिक्स दाँत
- All Dental Treatment for Kids
  बच्चों के दाँत का ईलाज
- Fracture
  टूटे हुए जबड़े का इलाज
- Tobacco
  Cessation Counselling

Chief Complaint

Examination

Advise

℞

NEXT APPOINTMENT

SUSHIL KUMAR THAKUR

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DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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NOT FOR MEDICO LEGAL
VALID FO

Timing : 9 a.m

Emergency 24x7

नोट : क्लीनिक पूरे सप्ताह खुला रहता है।

SHIVANI DENTAL CARE

Specialised Centre for Root Canal Treatment,
Smile Designing & Oral Implants

Dr. Piyush Upadhyay
M.D.S. (Endodontics)
Regd. No.-11896

489, Faizabad Road, Meeranpur, Akbarpur-Ambedkar Nagar

Name.....Age.....Sex.....

Address.....Date.....

Our Specialities

- Single Sitting R.C.T.
- Root Canal Treatment
- Dental Implants
- Composite Filling
- Denture
- Metal Crown, P.F.M.
- All Ceramic Crown

Facilities Available

- Digital X-Ray (RVG)
- Ultrasonic Cleaning
- Tooth Whitening
- Flap Surgery
- Tooth Jewellery
- Wisdom Tooth Extraction

On Examination

- Pain ☐
- Sensitivity ☐
- Swelling ☐
- Cavity ☐
- Mobility ☐
- Fracture ☐
- Bleeding Gums ☐
- Others ☐

Medical History

- Diabetes ☐
- Hypertension ☐
- Heart Diease ☐
- Pregnancy ☐
- Asthma ☐
- Allergy ☐
- Kidney Disease ☐



Timing- 10 AM to 6 PM

Not Valid for Medico Legal Purpose

Cont. No.-8738[illegible]

TIMINGS MORNING : 09:00 A.M. TO 02:00 P.M. EVENING [illegible]:00 P.M.

Visit Your Dentist Once in 3 Months

☎ : 05271-244290

Not Valid for Medico Legal Purpose

SUSHIL KUMAR THAKUR

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सत्यमेव जयते

GOVERNMENT DENTAL COLLEGE DIBRUGARH

ID No. GDC/FAC/21/026

IDENTITY CARD



Name : DR.POLYSMITA OJAH

Designation : LECTURER

Department : PROSTHODONTICS & CROWN & BRIDGE, AESTHETIC DENTISTRY & ORAL IMPLANTTOLOGY

Reg. No. : 2005-A

SUSHIL KUMAR THAKUR

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Principal,
Government Dental College
Dibrugarh

Holder's Signature

NAVJEEVAN MULTISPECIALITY

Dental & Skin Care

Dr. Prashant Baranwal
M.D.S. (Prosthodontics & Implantology)
Member of Indian Prosthodontic Society

Dr. Amita Agarwal
M.D.S. Consultant
Periodontist & Implantologist
Certified Cosmetologist

Name ..... Age ..... Sex .....

Add ..... Ph ..... Date .....

INVESTIGATION

℞

FACILITY

- Fixed partial denture
- Removable/partial/complete/
- cast partial denture
- Dental implant (single,overdenture)
- Post & core
- Full mouth rehabilitation
- Maxillofacial prosthesis (Eye, Ear, Nose & Finger)
- Painless extraction/ disimpaction
- R.C.T (single sitting R.C.T available)
- Light cure laser composite fillings/GIC filling
- Treatment of deciduous teeth (children's teeth care)
- Teeth whitening (Bleaching)

TIMING

Morning (10 AM To 2PM)
Evening (5PM To 9 PM)

Only Sunday In Khamariya
(9 AM To 9 PM)

SUSHIL KUMAR THAKUR

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Digital X-Ray | Dental Implants | Applicable for 15 days only

Add 1. C 33/52 5-A-5 Near Current Coaching, Chittupur Sigra ,Varanasi-221002
Add 2. Khamaria main market, near badi Maszid, Khamaria, Bhdohi - 221306

www.navjeevandentalclinic.com 9532-380-054, 8707-693-155

Not For Medico Legal Purpose

VARUN ARJUN MEDICAL COLLEGE & ROHILKHAND HOSPITAL

Banthra, NH-24, Distt. Shahjahanpur (U.P.) Pin:- 242307
Website : www.varunarjunmedicalcollege.com, Email ID : varunarjuntrust@gmail.com
Direct: 05842-297276 (Principal Office) Reception : 05842-297360, 05842-297260

Ref. No.VAMC&RH/10801 / 2023 Date: - 10 .07.2023

PROMOTION ORDER

Dr. Priva Mishra, Senior Resident in the Department of **Dentistry** is promoted to the post of **Assistant Professor** with effect from **10.07.2023.**

Varun Arjun Medical College & Rohilkhand Hospital Principal & Dean Banthra

Dr. Prof. K G Paul
Dean & Principal

Dean / Principal
Varun Arjun Medical College
&Rohilkhand Hospital NH-24
Banthra, Shahjahanpur (U.P.)

SUSH
KUMA
THAK

Tele Mil : 6246

Station Cell (ECHS)
Bareilly Cantt-243001

6307/ECHS/Emp/A

07 Nov 2023

Dr Priyansha Rathore
Dental Officer
ECHS Polyclinic Badaun

APPOINTMENT LETTER

1. You are hereby appointed as **Dental Officer** at **ECHS Polyclinic Badaun**. The terms and conditions of employment are as per Contractual Agreement signed between you and the Stn Cdr, Bareilly.

2. Your appointment is purely contractual and temporary in nature for the period commencing from **09 Nov 2023 to 31 Mar 2024**. You will work for 48 hours a week from Monday to Saturday during the timings 0800 hrs to 1600 hrs.

3. You will be entitled leave @ 2.5 days for every completed month during the contractual period which will lapse, if accumulated, at the end of six months. Entitled leave will be besides, Sunday and Gazetted Holidays. Any leave beyond entitled leave will be without pay. Services of the contractual employee may be terminated by the appointing authority, in case the leave exceeds 60 days.

4. All disputes are subject to Bareilly jurisdiction.

STATION HQ CELL BAREILLY

(Bhupender Singh)
Lt Col
OIC ECHS Cell
For Stn Cdr

Copy to:-

ECHS Polyclinic Badaun - For info and necessary action pl.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97337911 3FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Office of the Director General Medical Education and Training Uttar Pradesh, Lucknow

UP NEET P.G.COUNSELING-2021

Allotment Letter

To,
The
Principal / Director / Registrar



INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION

Dear Sir / Madam

I am pleased to inform you that the candidate with the following details has been allotted provisionally a seat in MDS (PEDODONTICS & PREVENTIVE DENISTRY First year of your institute on the basis of allotment on 12/10/2021 . Candidate is advised to report on or before 22/10/2021 at allotted college for admission, failing which the allotted seat of the candidate will be cancelled.

Roll No	2055211880
State Rank	389
Name	RASLEEN DUA
Father Name	PARVINDER SINGH DUA
Candidate Category	UROP
Allotted Category	UROP
Allotted Institute	INSTITUTE OF DENTAL SCIENCES, BAREILLY, [PRIVATE] CO-EDUCATION
Allotted Branch	MDS (PEDODONTICS & PREVENTIVE DENISTRY
Institute/ Course Left	/

In case candidate does not take admission after allotment his/her security money will be forfeited.

Transaction No	CPABCRUXB0
Transaction Branch	SBI
Security Amount	100000 (Rs. One Lakh Only)

1- Candidate advised to report at allotted college with in due dates on or before 22/10/2021.

2- Candidate taking admission in private collge is advised to submit requisite tution fee through CTS Bank Demand Draft in favour of Director General Medical Education and Training, UP Lucknow payable at Lucknow.

3- Candidate is advised to submit relevant documents along with original documents at the allotted college.

4- If Candidate fails to report to allotted college then his / her allotment will be cancelled and security money will be forfeited.

Chairman Counseling Board
(UPNEET PG-2021)

SUSHIL KUMAR THAKUR

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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2023

DATE: -26.06.2023

To,

DR. RESHAM IRSHAD
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORTHODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **ORTHODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

To,

The Principal

Institute of Dental Sciences,

Pillibhit By-pass Road

Bareilly 243006 (U.P.)

SUBJECT: JOINING REPORT

Respected Sir,

I **DR. RESHAM IRSHAD** D/o **MR. SYED IRSHAD HUSSAIN RIZVI** post of **LECTURER** in the department of **ORTHODONTICS** I hereby join my duties w.e.f : **26.06.2023**

Thanking You,

Yours Truly,

Signature: .....

Name:**DR. RESHAM IRSHAD**

Email ID:**reshamirshad@gmail.com**

SUSHIL KUMAR THAKUR

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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: - 13.07.2021

To,

DR. SAIMA ALI

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PUBLIC HEALTH DENTISTRY in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PUBLIC HEALTH DENTISTRY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/-per month (Rupees Twenty Five thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Sathyajith Naik N
(Principal)

Principal
Institute of Dental Sciences
Bareilly (U.P.)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: - 17.05.2021

To,

DR. SAKSHI GANGWAR

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of 06 months from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kumar Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

DR. GAMBHIR'S
DENTO AESTHETICS
IMPLANTS | LASERS | SMILE DESIGNING



Dr. Sanjay Gambhir
BDS, MDS
Periodontist and Implantologist
Dental Laser Specialist

Dr. Vidhi Agarwal Gambhir
BDS, MDS
Endodontist (RCT Specialist)
Sr. Lecturer, DAV Dental College Yamunanagar

NAME :

AGE :

GENDER : M☐ F☐

ADDRESS :

Chief Complaint :

Clinical Examination :

Medical History :

NOT FOR MEDICO LEGAL PURPOSE

Date : .....

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SUSHIL KUMAR THAKUR

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DENTO AESTHETICS
Shop No- R2UG31, M3M
8630763895

TIMINGS
Morning 10:00 AM to 2:00 PM
Evening 04:00 PM to 9:00 PM
7 DAYS OPEN

8630763895
Shop No. R2UG31, Gate No. 1, M3M 65th Avenue,
Opp. DPS International School, Sector 65, Gurugram - 122101

Director General Medical Education and Training

6th Floor, Jawahar Bhawan,Lucknow-UP.

MOPUP Allotment Letter-2021

Ref No.:DGME/UPNEETPG-2021/MOPUP/ADMISSION

To,

The Principal / Dean / Director / Registrar



Institute of Dental Sciences, Bareilly

Dear Sir / Madam

The candidate with following details has been provisionally allotted a seat in MDS (PUBLIC HEALTH DENTISTRY) in your institute on the basis of MOPUP allottment on 17/11/2021

Roll No.	2055211836
State Rank	117, Neet Rank:-15829
Candidate Category	UROP
Name	SARTHAK GUPTA
Father Name	NARESH CHANDRA GUPTA
Allotted Category	UROP
Allotted Institute	Institute of Dental Sciences, Bareilly
Allotted Course	MDS (PUBLIC HEALTH DENTISTRY)

The Candidate is advised to report on 17/11/2021 for admission, failing which the allotted seat of the candidate may be considered as cancelled.The Candidate has deposited Rs.100000/- at the time of Confirmation of Seat as per the details given below. This amount will not be adjusted against any fee and it will be refunded to the candidate after admission.

DD No	979722
DD Date	15-11-2021
Amount (Rs.)	100000

The Institute can charge the required prescribed fee from the candidate as per latest orders / approvals of State Government / Fee Fixation Committee, however the hostels fee / security fee / enrollment fee amount may be charged separately.

SUSHIL KUMAR THAKUR

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DGME / Chairman Counseling Board

Note- Institute Should examine all the original certificates and hold medical examination of the candidate for the medical fitness before admission and deposition of fees. Institute is also directed to verify the identity and address of the candidate through photo and other self attested documents. The candidate is directed to report with necessary records of the identification and address along with necessary original certificates.

Regd. No.-3592

DR. RASTOGI DENTAL CARE

8923331113
+91-5948-359286

"Make Your Smile Brighter with us"

Patient's Name..... Date:.....

Address..... Age..... Gender.....

Mobile No. .....

Facilities Available
उपलब्ध सुविधायें

- ☆ **Dental Implant**
  पक्के दाँत लगाना
- ☆ **Root Canal Tt. (RCT)**
  दाँतों की नसों का इलाज
- ☆ **Fixed Ortho Treatment**
  टेढ़े मेढ़े दाँतों का इलाज
  BRACES के द्वारा
- ☆ **Digital X-Ray**
  डिजिटल एक्स-रे
- ☆ **Extraction**
  दाँत निकालना
- ☆ **Complete Denture**
  जबड़ा लगाना
- ☆ **Partial Denture**
  निकालने व लगाने वाले दाँत
- ☆ **Crown & Bridge Work**
- ☆ **Laser Filling**
- ☆ **Ultrasonic Scaling**
  दाँतों की सफाई
- ☆ **Management of OSMF**
  मुँह के कम खुलने का इलाज
- ☆ **Bleaching**
  पीले दाँतों का इलाज
- ☆ **All Routine Dental Treatment**

C/c

R_X

Dr. Saurabh Rastogi
BDS (Dental Surgeon)
दन्त एवं मुख रोग विशेषज्ञ

Medical History



SUSHIL KUMAR THAKUR

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पता : निकट एल.आई.सी. ऑफिस, बाईपास रोड सितारगंज

VALID FOR 7 DAYS.

Time - 10:00 a.m. to 2:00 p.m., 4:00 p.m. to 8:00 p.m.

TUESDAY CLOSED

Not valid for Medico-Legal Purp

Inderprastha Dental College & Hospital — Dental Education Par Excellence

Promoted By : Kunj Behari Lal Charitable Trust

JOINING REPORT

IPDC/JL/ 2023/9857 Date 11/08/2023

I Doctor Shalini Chauhan D/o. ~~S/o. W/o.~~ Sushil Kr. Chauhan

Hereby give my joining at Inderprastha Dental College & Hospital, Sahibabad in the

Forenoon / afternoon of Date 11/08/2023 and I have taken over the charge as

Lecturer in the department of Prosthodontics Crown & Bridges

vide your appointment.

Letter dated 11/08/2023

Date: 11/08/2023

Place: Sahibabad.

Approved

Shaukan.

(Signature)

SUSHIL KUMAR THAKUR

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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2022 DATE: - 02.03.2023

To,

DR. SHASHANK KUMAR SINGH

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **PEDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

SANTOSH
Deemed to be University
(Established u/s 3 of the UGC Act, 1956)

F. No: SU/R/2023/3421(3) Dated:30.12.2023

MEMORANDUM

Subject: Grant of Junior Research Fellowship [JRF] – **SHAZIA SAFI** - Ph.D. Scholar – Santosh Deemed to be University, Ghaziabad, NCR Delhi.

****

SHAZIA SAFI, Ph.D. Scholar of Maxillofacial Surgery is informed that on the recommendations of the Research Advisory Committee. The Sub-Committee granted Junior Research Fellowship [JRF] of Rs.35,000/- per month and Rs.10,000/- contingency per annum to him/her for the year 2023-24 for a period of 12 months with effect from 01.01.2024 onwards on the usual terms and conditions.

He / She is required to take part actively in various research activities of the University and submit periodical reports as per the requirements. Upon satisfactory compliance and after the recommendations of the RAC, the second year JRF may be granted for another 12 months.

[Dr. NARESH SHARMA]
REGISTRAR

SHAZIA SAFI,
Ph.D Scholar (2023 Batch)
Department of Oral & Maxillofacial Surgery
Santosh Dental College & Hospital

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
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Date: 2024.09.23 17:36:10+05'30'
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Copy to:-

1. Chancellor
2. Vice-Chancellor
3. Dean, Santosh Dental College & Hospital
4. The Dean Research
5. Dean, Academics
6. The Director, IQAC
7. The Co-Ordinator RAC & RCC
8. The HOD concerned
9. The Finance Officer
10. Guard File

Email us:
contact@centre4teeth.com
Website - http://centre4teeth.com

DR. SHAZIA SAFI
BDS, MDS
(oral and maxillofacial
surgeon and implantologist)



8595911934

CENTRE FOR TEETH
Address - G4, Samachar Market,
Mayur Vihar Phase 1 Extension
Mon to Sat - 6:00 pm to 10:00 pm
Sunday - 8:00 am to 1:00 pm

NAME :
ADE / SEX :
ADDRESS

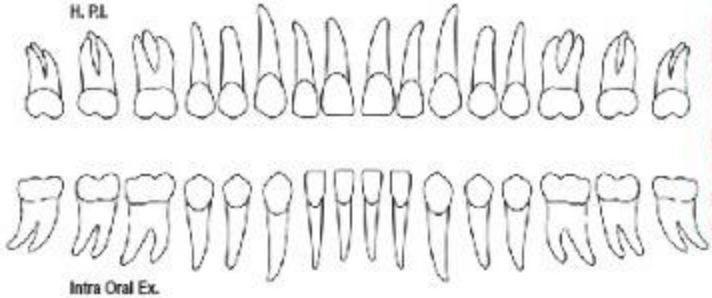
DATE.....
REG NO. .....

(1) Are you under the treatment of .....at present
(I) Physician (II) Surgeon (III) Gynaecologist (IV) Cardiologist (v) Urologist (VI) Orthopedician (VII) Endocrynologist
(2) Have you been under the treatment of the above in past 6 year (Y / N)
(3) Any problem During or after. First EXTRACTION

PMH	Y / N
1. ALLERGY	
2. DRUG REACTION	
3. CARDIO VASSULAR DISEASE	
HEART ATTACK	
ANGINA	
STROKE	
ANTICOAGULANT	
4. RESPIRATORY DISEASEI	
COUGH. COLD.	
ASTHMA	
5. GASTRITIS	
PEPTICI / DUODENAL ULCER	
CONSTIPATION	
6. RENAL DISORDER	
7. HEPATITIS. JAUNDICE	
8. DIABETES	
9. BLEEDING DISORDER	
ANEMIA	
10. PREGNANCY	
11. ARTHRITIS	
12. FAINTING & SEIZURES	
13. TUBERCULOSIS	
14. ANY OTHER DISEASE	
DIAGNOSE	

C / C

H. P.I.



A ABSCESS
P POCKET
X MISSING
S SINUS
M MOBILITY
I ROOT STUMP
≠ FRACTURE
O CARIES

Intra Oral Ex.

Extra Oral Ex.

DIAGNOSIS

ADVISE

TREATMENT DONE

S.N.	DATE	AMOUNT

SUSHIL KUMAR THAKUR

INVESTIGATION

IOPA —+—
O.P.G. PAN / TMJ
BLOOD SUGAR
Fasting
P.P.
Random
BT / CT
TC / DC
FNAC
BIOPSY

PHYSICIAN'S ADVICE

FIT FOR TREATMENT
NAME
DATE

NOT FOR MEDICO LEGAL PURPOSE

DIAGNOSIS, TREATMENT AND COST OF TREAMENT IS EXPLAINED PRIOR TO ANY PROCEDURE IN HIS / HER LANGUAGE

Relation

Singnature

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023 DATE: -04.09.2023

To,

DR. SHIKHA LUNIYAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE on the following terms and conditions: -

1. That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

TEERTHANKER MAHAVEER UNIVERSITY

(Established under Govt. of U.P. Act No. 30, 2008)
Delhi Road, Moradabad-244001 (U.P.) India
Tel.: +91-0591-2360222, 2476801
Email :hr@tmu.ac.in; hr@tmu.ac.in; **Website** :www.tmu.ac.in

CONFIDENTIAL

Ref. No.: TMU/HR/AL/2021-22/149 **Date**: 01/06/2022

Dr. Shipra Saxena
37-B, Vatika, Pilibheet Bypass Road,
Sun Citi Vistar, Bareilly Road, Izzat Nagar-243122 (UP)

Sub: Appointment for the post of Sr. Lecturer in the Department of Oral Pathology and Microbiology, Teerthanker Mahaveer Dental College & Research Centre.

With reference to your application and recommendation of the Selection Committee, the University is pleased to appoint you as **Sr. Lecturer** in the **Department of Oral Pathology and Microbiology, Teerthanker Mahaveer Dental College & Research Centre,** run under the aegis of TMIMT (Society) on the following terms and conditions:

1. Your appointment will be effective from **June 01, 2022**.
2. Your services will be governed by the Act, Statutes, Ordinances & Service Rules of the University/ TMIMT (Society) as applicable from time to time.
3. You will be on probation for a period of one year from the date of your joining the duties. This period of probation may, however, be extended depending upon your performance and feedback.
4. As a full time employee, you will not engage yourself in any other employment or trade outside the university. You are required to abide the rules and regulations of the University in letter and spirit as applicable and issued from time to time.
5. This appointment can be terminated on two months' notice or pay in lieu there-of (as mentioned in the Service Rules) during the tenure of this appointment from either side.

Wishing you a great satisfying career with T.M.U.

Yours sincerely,

Teerthanker Mahaveer University Moradabad (U.P.) 244001

Dr. Aditya Kr. Sharma
Registrar

SUSHIL KUMAR THAKUR

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CC to:
1. Dy. Director (A/c)
2. Personal File (HR Department)

Acceptance: **I, Shipra Saxena, D/o Mr. R C Saxena, hereby accept the terms & conditions given here above.**

Signatur

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2024 **DATE: -13.03.2024**

To,
DR. SHUBHI GANGWAR
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORTHODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of ORTHODONTICS on the following terms and conditions: -

1. **That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. **That you will be required to perform all the duties relating to the post and also assigned by the management time to time.**
3. **That you will be required to follow all the rules, regulations and discipline of the institute strictly.**
4. **In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.**
5. **That you will be on a probation period of one year from date of joining.**
6. **You can be terminated any time on the basis of non-performance**
7. **That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.**
8. **Promotions and increments will be based on good performance in teaching students and treatment of patients.**
9. **Annual Leaves will be as per college norms.**
10. **That you are required to join the post at the earliest and report to th failing which this letter of appointment shall be treated automatically ca**

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

JOINING REPORT

Date: 10th Jan 2024

From

SRINANDAN PRADHAN

To

The Principal,
Sree Sai Dental College & Research Institute,
Srikakulam ,
Andhra Pradesh.

Sir,

Sub: submission of my joining report as ---------- READER ---------- Reg

Ref: your appointment letter dated---2024/129/I-M/Rea.App: - 10-01-2024

* * *

I am thankful to you for your kind offer of the job. I have carefully read all the service rules of the sree sai Dental College & Research Institute and I accepted the same.

I am joining today i. e ---10th JAN 2024---as a ---------- READER ---------- in the department of ---PEDODONTICS & PREVENTIVE DENTISTRY--- at Sree Sai Dental College & Research Institute.

SUSHIL KUMAR THAKUR

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Srinandan Pradhan.

Thanking you sir.

PRINCIPAL

(Counter signed by Principal)

21 Feb 2024, 2:49 pm

Sree Sai Educational Society's

SREE SAI DENTAL COLLEGE AND RESEARCH INSTITUTE

Chapuram Village, Balaga Rural, SRIKAKULAM- 532 401. Andhra Pradesh, India.

21 Feb 2024, 2:50 pm

Lr. No: 2024/ 129/ J-M/ Rea. App

10-01-2024

APPOINTMENT ORDER

Dr. Srinandan Pradhan, M.D.S, consequent on his selection by the selection committee in its meeting dated: 10.01.2024 is appointed full time as Reader in the Department of Pediatric And Preventive Dentistry at Sree Sai Dental College & Research Institute, Srikakulam.

This appointment is governed by the college service rules in force from time to time. He shall submit all his certificates and report to duty before the principal within one week from the date of this order failing which this order stands cancelled.

PRINCIPAL

10/01/2024

SUSHIL KUMAR THAKUR

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College Ph: 08942 - 294588, 6301315897.E_mail : ssdcri6@yahoo.co.in,
Website : www.ssdcri.org. Instagram : ssdcri, facebook :Sree Sai Dental College and Research Institute

DR. MALAKAR'S DENTAL HUB

(COMPLETE DENTAL CARE FOR KIDS & ADULTS)

Dr. Subhasis Malakar
B.D.S, M.D.S, F.A.G.E, (Manipal)
Consultant Dental Surgeon & Pediatric Dentist
Attached : Midnapore Medical College & Hospital
Specialist : Pedodontist & Preventive Dentistry
Reg. No. : 3442A (W.B.D.C.)

Formerly : Dr. B. C Roy PGIPS Hospital, Kol
North Bengal Medical College & Hospital, Siliguri
SSKM, PG Hospital (Cal),
Assistant Professor :
Awadh Dental College & Hospital, Tatanagar
Life Member of Indian Dental Association (I.D.A)
Mob. : 9434828114 / 6294886293

Patient Name : .....

Age ..... *Sex* ..... *Date* ..... *Address* .....

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INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2020

DATE: - 11.03.2020

To,

DR. SUDHIR YADAV

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

(President)
Dr. Ashok Agarwal

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

STAR DENTAL CARE

BRANCHES: MEERUT | NOIDA

Multispeciality, Dental Implant & Maxillofacial Clinic

Patient's Name: _____ Gender _____ Age _____ Date _____

Dr. Tapan Maitrey
BDS, MDS
Maxillofacial Surgeon
& Implantologist (Spain)
Regd. No. A-18347

Dr. Shuja Md. Khan
BDS, MDS Prosthodontics
Oral Implantologist (Spain)
Regd. No. A-17807

Dr. Sushmita Sabdakar
BDS, MIDA
Regd. No. 25263

Dr. Tanzeem Wajid
BDS, MIDA
Ex. Jr. (Maulana Azad Medical College)
Regd. No. A-14715

Dr. Kanwer Vikram
BDS, MDS Orthodontics
Regd. No. A-14785

Dr. Sarthak Gureja
MBBS, MD (Medicine)
Ex Medanta Gurugram
Regd. No. 101463

SUNDAY OPEN FOR SPECIAL CASES

* Not for Medico Legal Purpose

SERVICES:
सेवाएं:

EXTRACTIONS
दाँत निकालना

FILLINGS
दाँतों की फिलिंग

ROOT CANAL TREATMENT
(रूट कैनाल) नस का इलाज

TOOTH CLEANING
दाँतों की सफाई

DENTAL IMPLANT
परमानेन्ट फिक्स दाँत

DENTURES
दाँतों का जबड़ा

CROWN AND BRIDGE
एक/कई दाँतों की कैपिंग

TOOTH WHITENING
दाँत सफेद करना

BRACES
टेड़े–मेड़े दाँतो को सीधा करना

CHILD DENTISTRY
बच्चो के दाँतों का इलाज

SMILE DESIGNING
दाँतों की मुखावरण

CHEMICAL PEELING
केमिकल पील

PRP TREATMENT
प्लेटलेट्स रिच प्लाजमा ट्रीटमेन्ट

SUSHIL KUMAR THAKUR

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Opp. Delhi Darbar, Near Rosewood Public School, Hapur Road, Meerut

+91-9927-786-600

stardentalcare.info@gmail.com

YOUR SMILE IS OUR CONCERN...

एकदन्त

मल्टीस्पेशलिटी डेन्टल इम्प्लांट एण्ड मैक्सिलोफेशियल सर्जरी सेन्टर

7895446982
9452431216

डा. अंशु केशरवाल

B.D.S., M.D.S. (Pediatric Dentist)
बाल दन्त रोग विशेषज्ञ
पूर्व दन्त चिकित्सक
रोहिलखण्ड मेडीकल कॉलेज, बरेली (उ.प्र.)
रजि. नं. 14751

डा. स्वप्निल सक्सेना

B.D.S., M.D.S.
(Maxillofacial & Implant Surgeon)
मुख एवं जबड़ा रोग विशेषज्ञ
पूर्व चिकित्सक हिन्दू राव अस्पताल (नई दिल्ली)
रजि. नं. 14752

Name.....*Age*.....*Sex*.....

Address.....*Mob.* .....*Date*.....

R_x

Past Medical History

स्पेशलिस्ट

- **R.C.T. Crown Bridge, फिक्सड दाँत, Tooth Coloured Filling, Prorrhea (पायरिया)।**
- **बच्चों के दाँतों का सम्पूर्ण इलाज।**
- **दूध के दाँतो की नसों का इलाज। (Pulpectomy/Pulpotomy)**
- **बच्चों के दाँतों की कैप। (Pedo Crown)**
- **दाढ़-दाँत सम्बन्धी दर्द एवं बीमारियों का सम्पूर्ण इलाज।**
- **एक्सीडेन्ट में टूटे जबड़े की प्लेटिंग द्वारा सर्जरी।**
- **हड्डी में फसी अक्ल दाढ़ की सर्जरी।**
- **जबड़ें के सिस्ट (रसौली) एवं ट्यूमर की सर्जरी।**
- **गुटखा तम्बाकू के सेवन से हुए बन्द मुँह को खोलने की सर्जरी।**
- **जीभ तथा मुँह के कैंसर की जाँच (BIOPSY)**
- **डेन्टल इम्प्लांट (दन्त प्रत्यारोपण)**

SUSHIL KUMAR THAKUR
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समयः सुबह 10:00 बजे से 1:00 बजे तक शाम 5:00 से 8:00 बजे तक रविवार प्रातः 10:00 बजे से 3:00 बजे तक

■ Not Valid For Medicolegal Use. ■ E-mail:ekdantdentalfbd@gmail.com ■ Valid for 7 Days.

पताः अम्बेडकर नगर, नरकसा कादरी गेट, सूरज गार्डन के सामने, फर्रुखाबाद (उ.प्र.)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2021

DATE: - 13.07.2021

To,

DR. SWATI MISHRA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PEDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 20,000/-per month (Rupees Twenty thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Sathyajith Naik N
(Principal)

Principal
Institute of Dental Sciences
Bareilly (U.P.)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

DATE: - 26.07.2021

REF. NO: - IDS/APPT/2021

To,

DR. TANU MORYA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 25,000/-per month (Rupees Twenty five thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
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7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
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9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 Bareilly

7060645685

Dr. Munshi Lal Dental Clinic

Patient's Name.....Age.....Sex.....

Date.....

FACILITIES AVAILABLE
सुविधायें उपलब्ध

- Dental Implant
- Extraction (दाँत निकालना)
- Ultrasonic Scaling (दाँतों की सफाई)
- Root Canal Tt (RCT) (दाँतों की नसों का ईलाज)
- X-Ray
- Botox & Dermal Fillers
- Fixed Teeth (पक्के दाँत)
- Complete Denture (जबड़ा)
- Partial Denture (निकालने एवं लगाने वाले दाँत)
- Crown & BridgeWork
- Laser Filling
- Fixed Ortho Treatment (टेढ़े मेढ़े दाँतों का ईलाज BRACES के द्वारा)
- Bleaching (पीले दाँतों का ईलाज)
- Facial Trauma (टूटे जबडे का ईलाज)
- Biopsy (ट्यूमर की जाँच)
- Impaction (हड्डी के अन्दर के दांत का निकालना)
- All Routine Dental Treatment

Rx

Dr. Uday Rastogi
B.D.S.,M.D.S
Oral & Maxillofacial Surgeon
दन्त एवं मुख रोग विशेषज्ञ



SUSHIL KUMAR THAKUR
Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

स्थानः मेन्टल हॉस्पिटल के सामने, आनन्द आश्रम रोड, सिविल लाइन्स, बरेली

समय : सुबह 10 बजे से दोपहर 3 बजे तक

समयः शाम 5 बजे से रात्रि 9 बजे तक

VALID FOR 7 DAYS

THURSDAY CLOSED

CREATING SMILES

DENTAL & MAXILLOFACIAL CLINIC

Devi Road, Near Mathura Palace,
Kotdwara (Garhwal) U.K.
9557347125
creatingsmiles08@gmail.com

Regd. No. 2236

DR. VAIBHAV BUDAKOTI
BDS (SDCH, UK) , MDS (BHU, UP)
MAXILLOFACIAL PROSTHODONTIST & IMPLANTOLOGIST
Ex. Medical Officer Government Hospital, Kashipur
Ex. Senior Lecturer Seema Dental College & Hospital, Rishikesh

Name:

Age: Yrs. | Gender: M F

Date: / /20

Patient Regt No.

Next Appointment

SN	Date	Time

This prescription is valid for 15 days only.
NOT FOR MEDICO LEGAL PURPOSE

Morning: 9:00 AM to 02:00PM
Evening: 4:00 PM to 8:00 PM

GENERAL DENTISTRY | IMPLANT | ROOT CANAL | BRACES | VENEERS | TOOTH WHITENING

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2024 DATE: -08.03.2024

To,
DR. VAISHNAVI SINGH
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PEDODONTICS on the following terms and conditions: -

1. That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the failing which this letter of appointment shall be treated automatically c

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=3[illegible]3, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

PATRONAGE
ROHILKHAND EDUCATIONAL CHARITABLE TRUST

K+

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2024 DATE: -08.03.2024

To,
DR. VAISHNAVI SINGH
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PEDODONTICS on the following terms and conditions: -

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

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Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

SUSHIL KUMAR THAKUR

REF. NO: - IDS/APPT/2023 DATE: -18.09.2023

To,
DR. VARNIKA SAXENA
LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS on the following terms and conditions: -

1. That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
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8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Accepted & Received
18/9/23.
Dr Varnika Saxena.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
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Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023 DATE: -18.09.2023

To,

DR. VARNIKA SAXENA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

SMILE WORLD

ADVANCED DENTISTRY & IMPLANT CENTER

Mob: 8755281637, 9451446535

Dr. Varun Sachan
M.D.S. (Prosthodontist & Implantologist)
Asst. Prof. Saraswati Dental College, Lucknow
(Ex. Dental Surgeon Hindu Rao Hospital, New Delhi)
Reg. No. - 14736

Dr. Paawan Sharma
M.D.S. (Prosthodontist & Implantologist)
Asst. Prof. Sardar Patel Dental College, Lucknow
Reg. No. - 008705

Date .....

Patient Name ..... Age ..... Sex .....

Address..... Mob. .....

R_x

स्पेशलिस्ट-

- बत्तीसी (Complete Denture)
- इम्प्लांट (Implant)
- फिक्सड दाँत (Crown & Bridge)
- फिक्सड बत्तीसी (Implant Supported Denture)
- कैंसर के इलाज के बाद की बत्तीसी (Obturator)
- R.P.D. (Removable Partial Denture)
- कृत्रिम आँख, कान, उंगली (Eye, Ear & Finger Prosthesis)

अन्य सुविधाऐ

- रुट कैनाल ट्रीटमेन्ट (R.C.T.)
- टेढ़े-मेढ़े दाँतो का इलाज (Orthodontic Braces)
- बिना दर्द दाँत निकालना (Painless Extraction)
- दाँतो की सफाई (Scaling)
- दाँतो के रंग की फिलिंग (Composite Filling)
- मुँह के छालो का इलाज (Oral Ulcer Treatment)
- अक्कल दाड़ निकालना (Wisdom Tooth Extraction)
- बच्चों के दाँतो का इलाज (Paediatric Dental Treatment)

Timing:
10:00 AM - 2:00 PM
5:00 PM - 9:00 PM

Not For Medicolegal Use

E-mail: dr.varunsachan@gmail.com

Valid for 7 days.

Add: FF-07, Eldeco Saubhagyam Arcade, Vrindavan Colony, Sector -9 (Lucknow)

SUSHIL KUMAR THAKUR

Digitally signed by THAKUR
DN: C=IN, O=Pers
PostalCode=3020
SERIALNUMBER=
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KUMAR THAKUR
Reason: your sign
Location: your sig
Date: 2024.09.23
Foxit PDF Editor V

DR. GAMBHIR'S
DENTO AESTHETICS
IMPLANTS | LASERS | SMILE DESIGNING



Dr. Sanjay Gambhir
BDS, MDS
Periodontist and Implantologist
Dental Laser Specialist

Dr. Vidhi Agarwal Gambhir
BDS, MDS
Endodontist (RCT Specialist)
Sr. Lecturer, DAV Dental College Yamunanagar

NAME :

AGE :

GENDER : M☐ F☐

ADDRESS :

Chief Complaint :

Clinical Examination :

Medical History :

NOT FOR MEDICO LEGAL PURPOSE

Date : .....

℞

SUSHIL KUMAR THAKUR

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DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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DR. GAMBHIR'S DENTO AESTHETICS
Shop No- R2UG31, M3M 65th Avenue
8630763895

TIMINGS
Morning 10:00 AM to 2:00 PM
Evening 04:00 PM to 9:00 PM
7 DAYS OPEN

8630763895
Shop No. R2UG31, Gate No. 1, M3M 65th Avenue,
Opp. DPS International School, Sector 65, Gurugram - 122101

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023 **DATE: -07.10.2023**

To,

DR. ASTHA KHURANA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE on the following terms and conditions: -

1. **That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. **That you will be required to perform all the duties relating to the post and also assigned by the management time to time.**
3. **That you will be required to follow all the rules, regulations and discipline of the institute strictly.**
4. **In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.**
5. **That you will be on a probation period of one year from date of joining.**
6. **You can be terminated any time on the basis of non-performance.**
7. **That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any reason or notice for the same.**
8. **Promotions and increments will be based on good performance in teaching students and treatment of patients.**
9. **Annual Leaves will be as per college norms.**
10. **That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.**

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2520051
2526011
Bareilly

एकदन्त

मल्टीस्पेशलिटी डेन्टल इम्प्लांट एण्ड मैक्सिलोफेशियल सर्जरी सेन्टर

7895446982
9452431216

डा. अंशु केशरवाल
B.D.S., M.D.S. (Pediatric Dentist)
बाल दन्त रोग विशेषज्ञ
पूर्व दन्त चिकित्सक
रोहिलखण्ड मेडीकल कॉलेज, बरेली (उ.प्र.)
रजि. नं. 14751

डा. स्वप्निल सक्सेना
B.D.S., M.D.S.
(Maxillofacial & Implant Surgeon)
मुख एवं जबड़ा रोग विशेषज्ञ
पूर्व चिकित्सक हिन्दू राँव अस्पताल (नई दिल्ली)
रजि. नं. 14752

Name.....*Age*.....*Sex*.....

Address.....*Mob.* .....*Date*.....

स्पेशलिस्ट

- R.C.T. Crown Bridge, फिक्सड दाँत, Tooth Coloured Filling, Prorrhea (पायरिया)।
- बच्चों के दाँतों का सम्पूर्ण इलाज।
- दूध के दाँतो की नसों का इलाज। (Pulpectomy/Pulpotomy)
- बच्चों के दाँतों की कैप। (Pedo Crown)
- दाढ़-दाँत सम्बन्धी दर्द एवं बीमारियों का सम्पूर="" णं="" इलाज।="" -="" एक्सीडेन्ट="" में="" टूटे="" जबड़े="" की="" प्लेटिंग="" द्वारा="" सर्जरी।="" -="" हड्डी="" में="" फसी="" अक्ल="" दाढ़="" की="" सर्जरी।="" -="" जबड़ें="" के="" सिस्ट="" (रसौली)="" एवं="" ट्यूमर="" की="" सर्जरी।="" -="" गुटखा="" तम्बाकू="" के="" सेवन="" से="" हुए="" बन्द="" मुँह="" को="" खोलने="" की="" सर्जरी।="" -="" जीभ="" तथा="" मुँह="" के="" कैंसर="" की="" जाँच="" (biopsy)="" -="" डेन्टल="" इम्प्लांट="" (दन्त="" प्रत्यारोपण)="">

R_x

Past Medical History

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
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समय: सुबह 10:00 बजे से 3:00 बजे शाम 5:00 से 8:00 बजे तक रविवार प्रातः 10:00 बजे से 3:00 बजे तक

■ Not Valid For Medicolegal Use. ■ E-mail:ekdantdentalfbd@gmail.com ■ Valid for 7 Days.

पता: अम्बेडकर नगर, नरकसा कादरी गेट, सूरज गार्डन के सामने, फर्रुखाबाद (उ.प्र.)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2022

DATE: - 21/07/2022

To,

DR. DARAKSHAN SAIFI

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
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10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

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Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

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Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2019

DATE: - 09.10.2019

To,

DR. CHETAN LUNIYAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
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Reason: your signing reason here
Location: your signing location here
Date: 2019.10.17 [illegible]
Foxit PDF Editor Version: 9.7.1.10

SUSHIL KUMAR THAKUR

(Dr. Ashok Agarwal)
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: -05.08.2021

To,
DR. GEETIKA KUMAR
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of PERIODONTICS on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
Date: 2021.08.05 21:36:40 IST
Reason: your signing reason here
Location: your signing location here
Adobe Acrobat Reader DC Version: 2021.001.20155

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: -IDS/APPT/2023

DATE: -31.05.2023

To,

DR. HARSHITA PUTTHIA
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL PATHOLOGY & MICROBIOLOGY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **of ORAL PATHOLOGY & MICROBIOLOGY** on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
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9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

SUSHIL KUMAR THAKUR

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: - 19.05.2021

To,

DR. GAURAV VISHAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL AND MAXILLOFACIAL SURGERY in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **ORAL AND MAXILLOFACIAL SURGERY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/-per month (Rupees Twenty-five thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of 06 months from date of your joining.
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kumar Agarwal
(President)

INSTITUTE OF DENTAL SCIENCES

Pillbhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: - 08.11.2021

To,

DR. JYOTI BISHT

LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL MEDICINE & RADIOLOGY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **ORAL MEDICINE & RADIOLOGY** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
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9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

Dr. Ashok Kr. Agarwal
President

Institute of Dental Sciences Phone 2526051 2526011 Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: -31.07.2021

To,

DR. JITENDRA KUMAR DIWAKAR
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL & MAXILLOFACIAL SURGERY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **ORAL & MAXILLOFACIAL SURGERY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
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9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Digitally signed by SUSHIL KUMAR THAKUR
Date: 2021.07.31 17:25:27 IST
Reason: your signing location here
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SUSHIL KUMAR THAKUR

Dr. Ashok K. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

Dr. B.R. AMBEDKAR INSTITUTE OF DENTAL SCIENCES & HOSPITAL

A Post Graduate Institution
(Managed by Gautam Educational & Welfare Trust)
A Minority Society Registered under Society Registration Act-21 to 1860.
Recognised by Ministry of Health and Family Welfare, Govt. of India, New Delhi
Recognised by Dental Council of India, New Delhi
Affiliated to Magadh University, Bodh Gaya

Ref. **BR/1154/22**

Date **18/07/2022**

To,

Dr. Kumari Sweta Prakash (MDS)
Senior Lecturer,
Department of Prosthodontics

Sub.: Your appointment on the Post of Senior Lecturer.

Dear Dr. Kumari Sweta Prakash,

In response to your application, I am pleased to inform you that you have been appointed on the Senior Lecturer in the **Department of Prosthodontics** of our college.

You are requested to join on the said post as soon as possible. Your salary perks and terms of appointment shall be in accordance to rules and regulations laid down by Ministry of Health & Family Welfare, Govt. of India, New Delhi and Dental Council of India, New Delhi from time to time.

Thanking you.

(Dr. Avinash)
Vice-Chairman

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97337911 3FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023

DATE: -10.03.2023

To,
DR. KRATIKA MOHAN
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORAL MEDICINE & REDIOLOGY in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **ORAL MEDICINE & RADIOLOGY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
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5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

SUSHIL KUMAR THAKUR

INSTITUTE OF DENTAL SCIENCES

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Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO. - IDS/APPT/2023 DATE: -22.03.2023

To,
DR. LUBNA SHOAIB
LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of PERIODONTICS on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
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Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: -21.09.2021

To,

DR. MAMNOON GHAFIR

LECTURER

SUB: -Appointment to the post of LECTURER in the department of ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of ENDODONTICS on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
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5. That you will be on a probation period of one year from date of joining.
6. You can be terminated any time on the basis of non-perfor[illegible].
7. That in the case of breach of discipline, rules and regulation[illegible]u, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2019

DATE: - 16.10.2019

To,

DR. LALIT AGARWAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
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9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Digitally signed by SUSHIL KUMAR THAKUR
Date: 2019.10.17 17:22:27 IST
Foxit PDF Editor Version: 10.0.1

SUSHIL KUMAR THAKUR

Dr. Ashok Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023

DATE: -01.06.2023

To,

DR. NIDHI PANDEY

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PERIODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **PERIODONTICS** on the following terms and conditions: -

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Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
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2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: - 13.07.2021

To,

DR. MEGHA GUPTA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions: -

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18. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Sathyajith Naik N
(Principal)

Principal
Institute of Dental Sciences
Bareilly (U.P.)



SUSHIL KUMAR THAKUR
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DN: C=IN, O=Personal, PostalCode=[illegible]2093, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
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Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

डॉ .पवनजोत सिंह
दन्त रोग विशेषज्ञ
B.D.S,M.D.S
Oral Physician &
Dental Surgeon

डॉ .प्रभजीत कौर
जबड़ा रोग विशेषज्ञ
M.D.S
Oral-Maxillofacial
Surgeon

IN

Regd. No.:0506700747

नानकमत्ता अस्पताल

Nanakmatta Hospital

दहला रोड, मोबाइल टॉवर वाली गली, नानकमत्ता (ऊधम सिंह नगर)

Mobile: 8218578565|7088227777|6396501813

डॉ. पवनजोत सिंह
BDS, MDS
Oral Physician & Dental Surgeon

डॉ. प्रभजीत कौर
BDS, MDS
Oral & Maxillofacial Surgeon

दन्त एवं जबड़ा रोग विभाग

Patient's Name_____ Age_____ Gender_____ Date_____

- X-Ray (एक्स-रे) RVG
- R.C.T./Single Sitting
- R.C.T. दाँतों की नसों का इलाज
- Scalling & Polishing
  दाँतों की सफाई/Oral Prophylaxis
- Smile Designing
  स्माइल डिजाइनिंग
- Bleaching/Whitening
  ब्लीचिंग
- Painless Extraction
  बिना दर्द के दाँत निकालना
- Tooth Coloured Filling
  दाँत के रंग की फिलिंग
- Denture (Fix & Removable)
  जबड़ा लगाना
- Crown & Bridges
  दाँत लगाना
- Orthodontic Treatment
  टेढ़े मेढ़े दाँतों का ईलाज
- Dental Implant
  फिक्स दाँत
- All Dental Treatment for Kids
  बच्चों के दाँत का ईलाज
- Fracture
  टूटे हुए जबड़े का इलाज
- Tobacco
  Cessation Counselling

Chief Complaint

Examination

Advise

℞

NEXT APPOINTMENT

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

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Timing : 9 a.m

Emergency 24x7

नोट : क्लीनिक पूरे सप्ताह खुला रहता है।

ब(ऊ० सि० नगर)

डॉ .पवनजोत सिंह

दन्त रोग विशेषज्ञ

B.D.S,M.D.S

Oral Physician &

Dental Surgeon

डॉ .प्रभजीत कौर

जबड़ा रोग विशेषज्ञ

M.D.S

Oral-Maxillofacial

Surgeon

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Tele Mil : 6246

Station Cell (ECHS)
Bareilly Cantt-243001

6307/ECHS/Emp/A

07 Nov 2023

Dr Priyansha Rathore
Dental Officer
ECHS Polyclinic Badaun

APPOINTMENT LETTER

1. You are hereby appointed as **Dental Officer** at **ECHS Polyclinic Badaun**. The terms and conditions of employment are as per Contractual Agreement signed between you and the Stn Cdr, Bareilly.

2. Your appointment is purely contractual and temporary in nature for the period commencing from **09 Nov 2023 to 31 Mar 2024**. You will work for 48 hours a week from Monday to Saturday during the timings 0800 hrs to 1600 hrs.

3. You will be entitled leave @ 2.5 days for every completed month during the contractual period which will lapse, if accumulated, at the end of six months. Entitled leave will be besides, Sunday and Gazetted Holidays. Any leave beyond entitled leave will be without pay. Services of the contractual employee may be terminated by the appointing authority, in case the leave exceeds 60 days.

4. All disputes are subject to Bareilly jurisdiction.

STATION HQ CELL BAREILLY

(Bhupender Singh)
Lt Col
OIC ECHS Cell
For Stn Cdr

Copy to:-

ECHS Polyclinic Badaun - For info and necessary action pl.

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C97337911 3FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

सत्यमेव जयते

GOVERNMENT DENTAL COLLEGE DIBRUGARH

ID No. GDC/FAC/21/026

IDENTITY CARD



Name : DR.POLYSMITA OJAH

Designation : LECTURER

Department : PROSTHODONTICS & CROWN & BRIDGE, AESTHETIC DENTISTRY & ORAL IMPLANTTOLOGY

Reg. No. : 2005-A

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D7951708F1C9D687F06B89F41368[illegible]326C00[illegible]B6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

Principal,
Government Dental College
Dibrugarh

Holder's Signature

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: - 13.07.2021

To,

DR. SAIMA ALI

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PUBLIC HEALTH DENTISTRY in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PUBLIC HEALTH DENTISTRY** on the following terms and conditions: -

1. That your pay is **Rs 25,000/-per month (Rupees Twenty Five thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any further notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Sathyajith Naik N
(Principal)

Principal
Institute of Dental Sciences
Bareilly (U.P.)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023

DATE: -26.06.2023

To,

DR. RESHAM IRSHAD
LECTURER

SUB: -Appointment to the post of LECTURER in the department of ORTHODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **ORTHODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 20,000/- per month (Rupees Twenty Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date [illegible]g.
6. You can be terminated any time on the basis of non-performa[illegible]
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

Inderprastha Dental College & Hospital — Dental Education Par Excellence

Promoted By : Kunj Behari Lal Charitable Trust

JOINING REPORT

IPDC/JL/ 2023 /9857 Date 11/08/2023

I Doctor Shalini Chauhan D/o. ~~S/o. W/o.~~ Sushil Kr. Chauhan

Hereby give my joining at Inderprastha Dental College & Hospital, Sahibabad in the

Forenoon / afternoon of Date 11/08/2023 and I have taken over the charge as

Lecturer in the department of Prosthodontics Crown & Bridges

vide your appointment.

Letter dated 11/08/2023

Date: 11/08/2023

Place: Sahibabad.

Approved

Shaukan.

(Signature)

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2022 DATE: - 02.03.2023

To,

DR. SHASHANK KUMAR SINGH

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of **LECTURER** in the department of **PEDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 25,000/- per month (Rupees Twenty Five Thousand only).**
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from da[illegible]ining.
6. You can be terminated any time on the basis of non-perfor[illegible]
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences ★ Phone 2526051 2526011 ★ Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021 DATE: - 17.05.2021

To,

DR. SAKSHI GANGWAR

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of 06 months from date of joining.
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kumar Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2020

DATE: - 11.03.2020

To,

DR. SUDHIR YADAV

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PROSTHODONTICS CROWN & BRIDGE** on the following terms and conditions: -

1. That your pay is **Rs 18,000/-per month (Rupees Eighteen thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

(President)
Dr. Ashok Agarwal

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023 DATE: -04.09.2023

To,

DR. SHIKHA LUNIYAL

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of PROSTHODONTICS CROWN & BRIDGE on the following terms and conditions: -

1. That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of joining.
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7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2021

DATE: - 13.07.2021

To,

DR. SWATI MISHRA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of PEDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **PEDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 20,000/-per month (Rupees Twenty thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
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7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any reason or notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Dr. Sathyajith Naik N
(Principal)

Principal
Institute of Dental Sciences
Bareilly (U.P.)

एकदन्त

मल्टीस्पेशलिटी डेन्टल इम्प्लांट एण्ड मैक्सिलोफेशियल सर्जरी सेन्टर

7895446982
9452431216

डा. अंशु केशरवाल
B.D.S., M.D.S. (Pediatric Dentist)
बाल दन्त रोग विशेषज्ञ
पूर्व दन्त चिकित्सक
रोहिलखण्ड मेडीकल कॉलेज, बरेली (उ.प्र.)
रजि. नं. 14751

डा. स्वप्निल सक्सेना
B.D.S., M.D.S.
(Maxillofacial & Implant Surgeon)
मुख एवं जबड़ा रोग विशेषज्ञ
पूर्व चिकित्सक हिन्दू राँव अस्पताल (नई दिल्ली)
रजि. नं. 14752

Name.....*Age*.....*Sex*.....

Address.....*Mob.* .....*Date*.....

स्पेशलिस्ट

- R.C.T. Crown Bridge, फिक्सड दाँत, Tooth Coloured Filling, Prorrhea (पायरिया)।
- बच्चों के दाँतों का सम्पूर्ण इलाज।
- दूध के दाँतो की नसों का इलाज। (Pulpectomy/Pulpotomy)
- बच्चों के दाँतों की कैप। (Pedo Crown)
- दाढ़-दाँत सम्बन्धी दर्द एवं बीमारियों का सम्पूर="" णं="" इलाज।="" -="" एक्सीडेन्ट="" में="" टूटे="" जबड़े="" की="" प्लेटिंग="" द्वारा="" सर्जरी।="" -="" हड्डी="" में="" फसी="" अक्ल="" दाढ़="" की="" सर्जरी।="" -="" जबड़ें="" के="" सिस्ट="" (रसौली)="" एवं="" ट्यूमर="" की="" सर्जरी।="" -="" गुटखा="" तम्बाकू="" के="" सेवन="" से="" हुए="" बन्द="" मुँह="" को="" खोलने="" की="" सर्जरी।="" -="" जीभ="" तथा="" मुँह="" के="" कैंसर="" की="" जाँच="" (biopsy)="" -="" डेन्टल="" इम्प्लांट="" (दन्त="" प्रत्यारोपण)="">

R_x

Past Medical History

SUSHIL KUMAR THAKUR

Digitally signed by SUSHIL KUMAR THAKUR
DN: C=IN, O=Personal, PostalCode=302033, S=Rajasthan, SERIALNUMBER=C973379113FC8D793F2708FC9D687F06B89F4196B9325326C00EECB6FEC22CC0, CN=SUSHIL KUMAR THAKUR
Reason: your signing reason here
Location: your signing location here
Date: 2024.09.23 17:36:10+05'30'
Foxit PDF Editor Version: 2024.1.0

समय: सुबह 10:00 बजे से 3:00 बजे शाम 5:00 से 8:00 बजे तक रविवार प्रातः 10:00 बजे से 3:00 बजे तक

■ Not Valid For Medicolegal Use. ■ E-mail:ekdantdentalfbd@gmail.com ■ Valid for 7 Days.

पता: अम्बेडकर नगर, नरकसा कादरी गेट, सूरज गार्डन के सामने, फर्रुखाबाद (उ.प्र.)

CREATING SMILES

DENTAL & MAXILLOFACIAL CLINIC

Devi Road, Near Mathura Palace,
Kotdwara (Garhwal) U.K.
9557347125
creatingsmiles08@gmail.com

Regd. No. 2236

DR. VAIBHAV BUDAKOTI
BDS (SDCH, UK) , MDS (BU, UP)
MAXILLOFACIAL PROSTHODONTIST & IMPLANTOLOGIST
Ex. Medical Officer Government Hospital, Kashipur
Ex. Senior Lecturer Seema Dental College & Hospital, Rishikesh

Name:

Age: Yrs. | Gender: M F

Date: / /20

Patient Regt No.

Next Appointment		
SN	Date	Time

This prescription is valid for 15 days only.
NOT FOR MEDICO LEGAL PURPOSE

Morning: 9:00 AM to 02:00PM
Evening: 4:00 PM to 8:00 PM

GENERAL DENTISTRY | IMPLANT | ROOT CANAL | BRACES | VENEERS | TOOTH WHITENING

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

REF. NO: - IDS/APPT/2023 DATE: -18.09.2023

To,
DR. VARNIKA SAXENA
LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned is pleased to appoint you to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS on the following terms and conditions: -

1. That your pay is Rs 25,000/- per month (Rupees Twenty Five Thousand only).
2. That you will be required to perform all the duties relating to the post and also assigned by the management time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of jo
6. You can be terminated any time on the basis of non-performance.
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. Annual Leaves will be as per college norms.
10. That you are required to join the post at the earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Accepted & Received
Varnika
18/9/23.
Dr Varnika Saxena.

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

Digitally signed by SUSHIL KUMAR THAKUR
DN: cn=Personal, o=Rajasthan, ou=Data, PostalCode=302033, SERIALNUMBER=CF2D3B1E2CC0, CN=SUSHIL KUMAR THAKUR
Location: your signing location here
Date: 2023.12.27 12:37:24 +05'30'
Foxit PDF Editor Version: 12.1.0

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office)
Website : www.idsbareilly.in, e-mail : info@idsbareilly.in

DATE: - 26.07.2021

REF. NO: - IDS/APPT/2021

To,

DR. TANU MORYA

LECTURER

SUB: -Appointment to the post of LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTSAL SCIENCES, BAREILLY

Dear Sir/Madam,

With reference to your discussion with the Management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions: -

1. That your pay is **Rs 25,000/-per month (Rupees Twenty five thousand only).**
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the institute strictly.
4. In case you desire to leave the institution, you are required to submit 3 months working notice before leaving the job.
5. That you will be on a probation period of one year from date of your joining.
6. You can be terminated any time on the basis of non-performance
7. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
8. Promotions and increments will be based on good performance in teaching students and treatment of patients.
9. That you are required to join the post from as earliest and report to the Principal, failing which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

Dr. Ashok Kr. Agarwal
(President)

Institute of Dental Sciences Phone 2525051 2526051 Bareilly

SMILE WORLD

ADVANCED DENTISTRY & IMPLANT CENTER

Mob: 8755281637, 9451446535

Dr. Varun Sachan
M.D.S. (Prosthodontist & Implantologist)
Asst. Prof. Saraswati Dental College, Lucknow
(Ex. Dental Surgeon Hindu Rao Hospital, New Delhi)
Reg. No. - 14736

Dr. Paawan Sharma
M.D.S. (Prosthodontist & Implantologist)
Asst. Prof. Sardar Patel Dental College, Lucknow
Reg. No. - 008705

Date .....

Patient Name ..... Age ..... Sex .....

Address..... Mob. .....

R_x

स्पेशलिस्ट-

- बत्तीसी (Complete Denture)
- इम्प्लांट (Implant)
- फिक्सड दाँत (Crown & Bridge)
- फिक्सड बत्तीसी (Implant Supported Denture)
- कैंसर के इलाज के बाद की बत्तीसी (Obturator)
- R.P.D. (Removable Partial Denture)
- कृत्रिम आँख, कान, उंगली (Eye, Ear & Finger Prosthesis)

अन्य सुविधाऐ

- रुट कैनाल ट्रीटमेन्ट (R.C.T.)
- टेढ़े-मेढ़े दाँतो का इलाज (Orthodontic Braces)
- बिना दर्द दाँत निकालना (Painless Extraction)
- दाँतो की सफाई (Scaling)
- दाँतो के रंग की फिलिंग (Composite Filling)
- मुँह के छालो का इलाज (Oral Ulcer Treatment)
- अक्कल दाड़ निकालना (Wisdom Tooth Extraction)
- बच्चों के दाँतो का इलाज (Paediatric Dental Treatment)

Timing:
10:00 AM - 2:00 PM
5:00 PM - 9:00 PM

Not For Medicolegal Use

E-mail: dr.varunsachan@gmail.com

Valid for 7 days.

Add: FF-07, Eldeco Saubhagyam Arcade, Vrindavan Colony, Sector -9 (Lucknow)

SUSHIL KUMAR THAKUR

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Dr.VARUN SACHAN

SMILE WORLD

ADVANCED DENTISTRY & IMPLANT CENTER

SMILE WORLD

ADVANCED DENTISTRY & IMPLANT CENTER

Dr. Varun Sachan
M.D.S (Prosthodontist & Implantologist)
Asst. Professor Saraswati Dental College
Ex- Dental Surgeon Hindu Rao Hospital, New Delhi.

Dr. (Mrs.) Paawan Sharma
M.D.S (Prosthodontist & Implantologist)
Asst. Professor Sardar Patel Dental Colleg

Ph: 8755281637, 9451446535

NEW

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SUSHIL KUMAR THAKUR

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office) Fax : 0581 :2526054, 2303345
e-mail : info@rmcbareilly.com, www.rmcbareilly.com

REF. NO:- IDS/APPT/2019 DATED:-31.12.2019

To,
DR. ANKIT RATHORE
SENIOR LECTURER

SUB:-Appointment to the post of SENIOR LECTURER in the department of ORAL MEDICINE & RADIOLOGY in the INSTITUTE OF DENTAL SCIENCES,BAREILLY

Dear Sir,

With reference to your discussion with the management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **SENIOR LECTURER** in the department of **ORAL MEDICINE & RADIOLOGY** on the following terms and conditions:-

1. That your pay is **Rs.18,000/-(Rupees Eighteen Thousand only) per month**.
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the Institute strictly.
4. That you will be on a probation period of 6 months from date of your joining.
5. That you will serve this institution as least for terms of one year and in case you desire to leave the institution after this period you will give 3 months' notice before leaving the job.
6. That during your service in this Institution, you will be entitled to avail maximum twenty four days leave in a calendar year in addition to all notified holidays during the year.
7. That the management may terminate your services giving one month's prior notice or one month's salary in lieu thereof when your services are not required by the college.
8. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
9. That you are required to join the post from as earliest and report to the Principal, falling which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

SUSHIL KUMAR THAKUR

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DR. ASHOK KR. AGARWAL
(President)

INSTITUTE OF DENTAL SCIENCES

Pilibhit By Pass Road, Bareilly. (U.P.) 243006 INDIA
Phone : 0581-2526244 (Reception), 2526051 (Office) Fax : 0581 :2526054, 2303345
e-mail : info@rmcbareilly.com, www.rmcbareilly.com

REF. NO:- IDS/APPT/2019

DATED:-01.08.2019

To,
DR. AISHWARYA
SENIOR LECTURER

SUB:-Appointment to the post of SENIOR LECTURER in the department of CONSERVATIVE DENTISTRY & ENDODONTICS in the INSTITUTE OF DENTAL SCIENCES,BAREILLY

Dear Madam,

With reference to your discussion with the management the undersigned takes pleasure to inform you that the management of the institution has been pleased to appoint you to the post of **SENIOR LECTURER** in the department of **CONSERVATIVE DENTISTRY & ENDODONTICS** on the following terms and conditions:-

1. That your pay is **Rs.25,000/-(Rupees Twenty Five Thousand only) per month**.
2. That you will be required to perform all the duties relating to the post from 09.00 AM to 05.00 PM and also assigned by the management to you time to time.
3. That you will be required to follow all the rules, regulations and discipline of the Institute strictly.
4. That you will be on a probation period of 6 months from date of your joining.
5. That you will serve this institution as least for terms of one year and in case you desire to leave the institution after this period you will give 3 months notice before leaving the job.
6. That during your service in this Institution, you will be entitled to avail maximum twenty four days leave in a calendar year in addition to all notified holidays during the year.
7. That the management may terminate your services giving one month's prior notice or one month's salary in lieu thereof when your services are not required by the college.
8. That in the case of breach of discipline, rules and regulations by you, the management may terminate your services without giving any prior notice for the same.
9. That you are required to join the post from as earliest and report to the Principal, falling which this letter of appointment shall be treated automatically cancelled.

Please send your acceptance at the earliest.

Accepted and Recieved
28/8/19
Aishwarya

SUSHIL KUMAR THAKUR

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DR. ASHOK KR. AGARWAL
(President)

Institute of Dental Sciences
Phone
2526051
2526011
Bareilly

From:-

Dr Yesha Yadav
House No G-6,
Durgavihar, Pipeline Road
Hyderabad – 500055
Mobile No : 8686304129
Mail Id : yeshayadav.yy@gmail.com

To

The Principal
ACDS, Secunderabad

SUBJECT: JOINING LETTER

1. Refer Appointment letter No 349A/ACDS/Est dated Aug 2022.

2. I hereby report to join duty as Senior Lecturer on adhoc basis in the department of Conservative Dentistry and Endodontics in this Institution on 3rd Aug 2022

Thanking you,

Yours faithfully

Yesha

(Dr Yesha Yadav)

SUSHIL KUMAR THAKUR

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