

Indian Academy of Oral Medicine & Radiology AWARD FOR THE HIGHEST SCORER IN THE SUBJECT OF ORAL MEDICINE & RADIOLOGY AT THE B.D.S. EXAMINATION FROM INDIVIDUAL COLLEGES

NOMINATION FORM FOR HIGHEST SCORER AWARD IN COLLEGE (2020-2021)

Name of the student : Mr./Ms./Dr	•				
Percentage of marks scored in Or	al Medicine	& Radiology	(Theory + Practicals included) :	%	
Full postal residential address					
of the participant with pincode :					
	State		Pincode		
Participant's telephone nos. (STD	code)	(R)	(C)		
			@		
Fax no.	Mobile nos				
Name of the college					
(Only entries from DCI recognize					
Full postal address					
of the college with pincode :					
State			Pincode		
College telephone nos. (with STD	code)				
e-mail address	(0	0	Fax no		
Name of the university					
Location of the university : Place			State		
Is your college the <u>only</u> dental coll	lege affiliate	ed to the unive	ersity (Please 🗸) 🛛 : 🗌 YES 🛛	NO	

Is your college the <u>only</u> dental college atfinited to the university (Please \checkmark) : \Box YES \Box NO Are you also the university topper in Oral Medicine & Radiology (Please \checkmark) : \Box YES \Box NO

(Note : Before filling up the nomination form, please ascertain that you have indeed scored the highest in the subject of Oral Medicine & Radiology (Theory + Practicals included) at the college / university level. Only entries received by the Head Office will be considered for the award and candidates who have NOT put in their nomination for this award even though they have scored the highest at the college level, shall forfeit their right to claim the award).

Cont'd Page - 2



Indian Academy of Oral Medicine & Radiology AWARD FOR THE HIGHEST SCORER IN THE SUBJECT OF ORAL MEDICINE & RADIOLOGY AT THE B.D.S. EXAMINATION FROM INDIVIDUAL COLLEGES DECLARATION

I, Mr./Ms./Dr., hereby

submit my nomination for the IAOMR Highest Scorer (Theory + Practicals included) in Oral Medicine & Radiology subject at the college level. The particulars given on prepage are true. I have passed the First, Second, Third & Final B.D.S. examinations in the first attempt and have NOT taken a drop / absented myself / failed in any subject anytime at any scheduled university examination which I should have answered in the normal course of events. I confirm that my college is recognized by the DCI.

I am herewith enclosing self-attested photocopies of my first, second, third and final (semester I & II where applicable) B.D.S. university marks lists, in support of my nomination. I confirm that I have passed the final B.D.S. university examination during the period from 1st July, 2020 to 31st October, 2021.

Date :	Signature of the student :
Place :	Name of the student : Mr./Ms./Dr

ENDORSEMENT

The particulars given on prepage by Mr./Ms./Dr., who is a contestant for the '2020-21 IAOMR Highest Scorer Award', are true to the best of my knowledge and belief. I recommend considering him / her for the Award.

Signature of HOD :	
Name of HOD :	Dr

Department seal

(Oral Medicine, Diagnosis & Radiology) :

Telephone Nos. (With STD Code)	: (R)	(C)
E-Mail Address :	•••••	
Fax No. :	Mobile Nos. :	
Full Correspondence		
Address of the HOD	•••••	
with Pin Code :	••••••	
	State	Pin Code
Place:		Date: