



INDIAN ACADEMY OF ORAL MEDICINE AND RADIOLOGY

Dissertation Competition – 2024 **GUIDELINES**

Indian Academy of Oral Medicine & Radiology is pleased to announce the

DR GANDHI BABU BEST DISSERTATION AWARD -2024.

Entries are invited from all the eligible members, subject to the following rules: -

1. Only postgraduates of the specialty of Oral Medicine and Radiology who have joined the MDS course in the year 2021 are eligible to compete and the concerned participant is a member in good standing of the Indian Academy of Oral Medicine & Radiology.
2. Soft copy (or a file link without password protection and unrestricted access) of the dissertation should be sent to iaomrpgdissertation@gmail.com along with the filled and scanned copy of the entry form. Kindly note that the entry sent would be tallied with the original work submitted to the University prior to the prize distribution.
3. IMPORTANT: Name of the author, guide, college, city or university or other identifying data of the student / college should not appear anywhere in the text / images in the dissertation. Any references to these in 'Materials & Methods' and any other section should be deleted.
4. Each entry (sent by email) shall contain the following as attachments:
 - (a) Filled and scanned copy of the entry form (as per the format prescribed),
 - (b) A self-attested photocopy of their final M.D.S. university examination result sheet, or provisional / final M.D.S. degree certificate, and
 - (c) One scanned color photograph of the contestant.
5. All entries need to be sent as soft copies or as links (which are not password protected and with unrestricted access) to iaomrpgdissertation@gmail.com with the subject of the e-mail as "IAOMR Dissertation Competition-2024".
6. For any queries, the Hon. Gen. Secretary may be contacted at secretaryiaomr@gmail.com

7. Last date for the entries to reach the above e-mail ID is **20th October 2024**. Entries received after the last date will not be considered for the competition.
8. An Awards Committee constituted by IAOMR would go into the merits of all dissertations received, and decide the best among them. Originality of research theme, methodology, statistical analysis and Clinical relevance of results, inclusion of master charts and all observations, would carry more weightage in selection process.
9. The decision of the Awards Committee would be final & binding and no communications in this regard would be entertained.
10. Winners will be intimated by SMS / voice call / email.
11. IAOMR reserves the rights of publication of the award-winning dissertation in its official journal, JIAOMR, and IAOMR is not bound to publication of award-winning entries in JIAOMR.

Dr. SHIVA PRASAD
Hon. Gen. Secretary
IAOMR

Note: The competition is open only for the members of IAOMR. The persons not having IAOMR membership are requested to apply online for membership through IAOMR website and attach a screenshot of the same with payment details.



INDIAN ACADEMY OF ORAL MEDICINE AND RADIOLOGY

Dissertation Competition – 2024 Format for Entry Form

Name of the Participant: Dr.

Year of Admission to MDS..... (Only 2021 batch is eligible)

Title of Dissertation:

.....

.....

IAOMR Membership No:

Full Correspondence Address of the Participant

.....

.....

E-Mail Address : @

Mobile Nos. :

Name of College :.....

Full Postal Address of the College.....

.....

.....

University :.....

IAOMR membership of Guide:

Thesis acceptance year:

DECLARATION

I, Dr. hereby submit my Dissertation for the IAOMR Dissertation Competition-2024. I had taken admission for the post-graduation in the year 2021. The particulars given on pre page are true. I solemnly confirm to abide by the rules of competition.

Date : Signature of contestant:

Place : Name of contestant: Dr.

ENDORSEMENT

The particulars given on pre page by Dr., who is a contestant for the IAOMR Dissertation Competition-2024, are true to the best of my knowledge and belief. I recommend considering his / her Dissertation for the competition.

Signature of Guide:.....

Name of Guide: Dr.

Department seal

(Oral Medicine, Diagnosis & Radiology) :

Full Correspondence Address of the Guide.....

.....

.....

Mobile Nos. :

Date:

Note: KINDLY SEND YOUR DISSERTATION – IN PDF TO

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