Phone : 0141-2791928 0141-2795529 Fax : 0141-2795550



## राजस्थान स्वास्थ्य विज्ञान विश्वविद्यालय

**RAJASTHAN UNIVERSITY OF HEALTH SCIENCES** 

Sector-18, Kumbha Marg, Pratap Nagar, Tonk Road, Jaipur-302033 (Raj.)

No. F.8 ( ) Acad./RUHS/2012/9915

### The Secretary,

**Dental Council of India** Aiwan-E-Galib Marg, Kotla Road, Temple Lane New Delhi- 110002

# Sub: - Consent letter/NOC to start MDS Course in 2 (TWO) specialties from the Academic Session 2013-14 at Surendær@Dental College, Sri Ganganagar.

Dear Sir,

Surendar Dental College, Sri Ganganagar (Raj.) has applied for fresh provisional affiliation in MDS Course in following TWO specialties from the Academic Session 2013-14:-

S.No.	Name of Specialty	Annual
9. s		intake
1	Oral Medicine & Radiology	06
2	Public Health Dentistry	06

In this connection, I am directed to inform that the University has '**No Objection**' in case Dental Council of India, New Delhi grants permission to the said college for starting above courses on the condition that the institution shall follow the rules and regulations of the University. The University shall allow admission in this course only after the receipt of permission from the Dental Council of India, New Delhi, concerned authorities in Government of India and also after the fulfillment of the requirements necessary for the affiliation under the 'Act' and 'Statute' of the University.

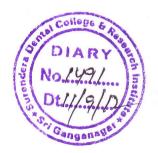
Yours faithfully,

Registrar .1.0-09-2012

### No. F.8 () Acad./RUHS/2012/ 33/6-18-

### Copy forwarded for information and necessary action to:-

- 1. The Dy. Secretary, Medical Education (Gr-1) Department, Govt. of Rajasthan, Jaipur (Raj.)
- 2. The Principal, SURENDARIDENTAL COLLEGE SRI GANGANAGAR (Raj.)
- 3. Guard File.



Régistrar