

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)


Certificate of Registration

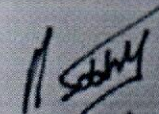
This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-15570

Name:	Dr. SHIKHA RATURY
Father's Name:	Sh. JEET RAM RATURY
Date of Birth:	26-12-1995
Qualification:	B.D.S (2019)
College:	I.T.S. DENTAL COLLEGE HOSPITAL AND RESEARCH CENTRE, GREATER NOIDA
University:	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT
Date of First Registration:	10-04-2019
Valid / Renewed Upto:	31-12-2023
Professional Address:	HOUSE NO. 125, F-BLOCK, STREET NO. 4, WEST VINOD NAGAR, DELHI -10092
Residential Address:	HOUSE NO.125, F-BLOCK, STREET NO. 4, WEST VINOD NAGAR, DELHI -110092




SIGNATURE OF THE REGISTERED DENTIST


Lt Col Dr. Anil Sabhlok (Retd)
Officiating Registrar
DELHI DENTAL COUNCIL

DDC/Registration/2019/ 4232

NOTE: Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

(Outer Foil)

Certificate No. : 2964 -A

Date : 16th Sept, 2019



ASSAM STATE DENTAL COUNCIL

P. O. Indrapur, Guwahati - 781 032

DENTISTS REGISTRATION CERTIFICATE

This is to certify that the person named below is registered as
DENTAL SURGEON in Part - A of the Dentists Act, 1948, as amended.

Name : DR. RIMI SAIKIA
 Nationality : Indian
 Address : Chutiakari Gaon, P.O.- North Lakhimpur, Pin-787001,
Lakhimpur, Assam.
 Father's Name : DILIP SAIKIA
 Qualification : Bachelor of Dental Surgery (BDS).
Year of passing: September, 2019.
 Institution : I.T.S Dental College, Hospital & Research Centre, Gr. Noida.
 University : Chaudhary Charan Singh University, Meerut.
 Date of first registration : 16-09-2019

This certificate shall remain valid upto 31st March, 2024

Renewal of registration is compulsory under Section 39 of the
Dentists Act, 1948, after expiry of the validity of the first registration.

B. R. Bhuyan
 PRESIDENT
 Assam State Dental Council



REGISTRAR
 Assam State Dental Council

Dr. Sachin Anand Arora
 Dr. Sachin Anand Arora
 Principal
 I.T.S. Dental College,
 Hospital & Research Centre
 47, Knowledge Park -III, Gr. Noida (U.P.)

Jharkhand State Dental Council



Certificate of Registration

(Certified under Section 34 of Dental Act 1948 (Act No. 16/1948))
Dental Institute, RIIMS Campus, Bariatu Road, Ranchi 834009



Jharkhand State Dental Council

Certificate No. JH213/19

Dr. Aparna Raj is registered as Dentist (Dental Surgeon)

Details of Registration are as follows:

1. Name: Dr. Aparna Raj
2. Father's /Husband's Name; Dr Sunil Kumar Singh
3. Qualification for Registration
& Authority Granting Qualification: BDS (CH.C.S University) MEERUT
4. Year of Passing: 2017
5. Registration No. & Date: 213A 02.04.2019
6. Additional Qualification acquired later: N/A
7. Registration will be valid till* : 01.04.2020



[Signature]
Dr. Sachit Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

[Signature]
21/4/19
Registrar
Registrar
Jharkhand State Dental Council

HARYANA STATE DENTAL COUNCIL



Registration No. HN 009439

CERTIFICATE OF REGISTRATION

This is to certify that the person named below has been registered as Dentist under the provision of Dentists Act, 1948

Name Dr. Ankita Sharma

Father's Name Sh. Ashwani Sharma

Date of Birth 07.03.1995

Address H. No. 710, Sector-10, Gurugram

Qualifications:-

- BDS: Ch. Charan Singh University, Meerut
- Name of the College: I.T.S. Dental College, Hosp. & Resh. Centre, G. Noida
- Date of Completion of Internship: 29.03.2019

Date of First Registration 29.06.2019 Part in which Registered A

This Certificate shall remain valid till 31.12.2019

Agarwal
REGISTRAR

IMPORTANT NOTICE

Every registered Dentist should be careful to renew his/her registration, regularly before the 1st day of April of preceding year. Failure to do so, a Dentist is liable to have his/her name removed from the Register of Registered Dentists under Sub Section (2) of Section 39 of the Dentists Act 1948. Any Change in address should be immediately intimated to the registrar.

NOTE:- PLEASE DONOT LAMINATE THIS CERTIFICATE AS IT CONTAINS RENEWAL PART ON BACK SIDE

Sharma
Dr. Sanchit Sharma
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park-II, G. Noida (U.P.)

Certificate No. 41321

Serial No. AB/1919

41321

JAMMU AND KASHMIR STATE DENTAL COUNCIL



J&K STATE DENTAL COUNCIL

Dentists' Registration Certificate

(Certificate of Registration under the Dentists Act XVI of 1948)

Registration No. A-4399 (Fussor)

Dated Sgr./Jmu 22.05.2019

This is to certify that the person named below has been registered as REGISTERED DENTIST in Part A/B of the State Register under the provisions of the Dentists Act, 1948.

Name: Dr. Barkan Kharshid

Father's Name: Kharshid Ahmad

Address: 22, Parry Bagh, Jammu Nagar, Jammu

8pk, Srinagar, Jammu & K

BDS

Qualification for:

Registration

Name of the Instt. through which passed: I.T.S. Dental College's Hospital and Research Centre, Gualtar, Jammu

Date of first admission

22.05.2019

Name of the Registrar

[Signature]
PRESIDENT

J&K STATE DENTAL COUNCIL



[Signature]
Principal

[Signature]
SECRETARY
J&K STATE DENTAL COUNCIL

Certificate No. : 2846-A

Dated: 29th March, 2019



ASSAM STATE DENTAL COUNCIL

P. O. Indrapur, Guwahati - 781 032, Assam

DENTISTS' REGISTRATION CERTIFICATE

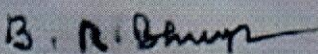
This is to certify that the person named below has been registered as DENTAL SURGEON under the provisions of the Dentists' Act, 1948.

Registration in Part : A

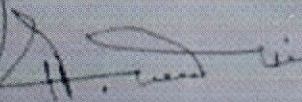
Name : DR. DAIJEE GOGOI
Father's Name : KUMUD CHANDRA GOGOI
Qualification : Bachelor of Dental Surgery (BDS) year of passing November, 2017
College : I.T.S Dental College, Hospital & Research Centre, Greater Noida
University : CHAUDHARY CHARAM SINGH UNIVERSITY, MEERUT
Place & Date of registration : 29-03-2019.
Address : KATHPAR, P.O.- BANMUKH, SIVASAGAR- 785663, ASSAM

This certificate shall remain in force upto : 31st March, 2023.

After that, on payment of prescribed yearly fee, it will be renewed and a separate Renewal Certificate shall be issued.


PRESIDENT




REGISTRAR

ASSAM STATE DENTAL COUNCIL, GUWAHATI

Dr. Sachit Arora

Principal
I.T.S. Dental College,
Hospital & Research Centre

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist
in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-15601

Name: Dr. DEEPA KUMARI
Father's Name: Sh. GUMAN SINGH
Date of Birth: 05-10-1994
Qualification: B.D.S (2019)
College: I.T.S. DENTAL COLLEGE HOSPITAL
AND RESEARCH CENTRE,
GREATER NOIDA
University: CHAUDHARY CHARAN SINGH
UNIVERSITY, MEERUT

Date of First Registration: 22-04-2019
Valid / Renewed Upto: 31-12-2023
Professional Address: RZC2/151A, SECOND FLOOR, VIJAY
ENCLAVE, NEW DELHI -110045

Residential Address: RZC2/151A, SECOND FLOOR, VIJAY
ENCLAVE, NEW DELHI -110045



SIGNATURE OF THE
REGISTERED DENTIST

Lt Col Dr. Anil Sabhlok (Retd.)
Officiating Registrar

DELHI DENTAL COUNCIL

Dated: 22-04-2019

DDC/Registration/2019/ 4285

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in

Dr. Sachin Anand Arora
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



DELHI DENTAL COUNCIL

6TH FLOOR, C-BLOCK, VIKAS BHAWAN-II, CIVIL LINES, NEW DELHI



Aradhya

Name: Dr. ARADHYA HOM CHOWDHURY
D/o Sh. ANIRUDDHA HOM CHOWDHURY
Regn. No.: A-15600
Mobile No.: 9810624087
DOB: 18-08-1995
Regn. Date: 22-Apr-2019
Valid Upto: 31-Dec-2023

Anil Sabhlok

DR. ANIL SABHLOK
OFFICIATING REGISTRAR

Anand Anora
Principal
Dental College,
Research Centre
Park -III, Gr. Noida (U.F.,

U.P. Dental Council

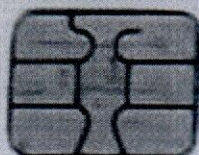
(Act No. XVI of 1948)

5, Sarvpalli, Mall Avenue Road, Lucknow



IDENTITY CARD

No. 6912



Holder DR. ARCHITA SAROJ




Father Name RAJENDRA PRASAD

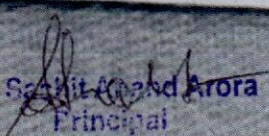
Reg No 19697 / 02/07/2019

Date of Birth 09/08/1994

Qualification B.D.S.

UTTAR PRADESH DENTAL COUNCIL


Registrar


Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

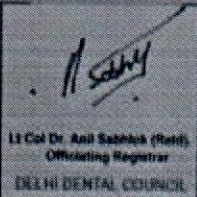
This is to certify that the person named below has been Registered as Dentist
in Delhi Dental Council under the provisions of the Dentists Act, 1948

Registration No. A-15964

Name:	Dr. BARIRA AYESHA
Father's Name:	Sh. GUL MOHD KHAN
Date of Birth:	05-12-1995
Qualification:	B.D.S (2019)
College:	I.T.S DENTAL COLLEGE, HOSPITAL AND RESEARCH CENTRE, GREATER NOIDA
University:	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT
Date of First Registration:	15-10-2019
Valid / Renewed Upto:	31-12-2023
Professional Address:	D-60/2, SANJAY MOHALLA, BHAJANPURA, DELHI-110053
Residential Address:	D-60/2, SANJAY MOHALLA, BHAJANPURA, DELHI-110053



SIGNATURE OF THE
REGISTERED DENTIST



Lt Col Dr. Anil Saini (Retd.)
Officiating Registrar
DELHI DENTAL COUNCIL

DDC/Registration/2019/ 4995

Dated: 15-10-2019

NOTE: Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
Park -III, Gr. Noida (U.P.)

WEST BENGAL DENTAL COUNCIL

(CONSTITUTED UNDER THE DENTISTS ACT 1948 OF THE GOVT. OF INDIA
AND ADMINISTERED BY THE GOVT. OF WEST BENGAL)
PURTA BHAVAN, 3RD FLOOR, ROOM NO. 303, DF-BLOCK
SECTOR-1, SALT LAKE CITY, KOLKATA - 700 091

CERTIFICATE OF REGISTRATION



Signature of the Dental Surgeon

REGISTRATION NO. : 5024 PART : A
NAME : SOURADEEP SANYAL
SON OF : SHIVAJI SHANKAR SANYAL
DATE OF BIRTH : 31-Mar-1993 SEX : Male
PERMANENT ADDRESS : BH-146, SECTOR-1, SALT LAKE, KOLKATA-700091.
QUALIFICATION : BDS
COLLEGE/UNIVERSITY : CH. CHARAN SINGH UNIVERSITY, MEERUT
DATE OF DEGREE OR DIPLOMA : 2017
ADDITIONAL QUALIFICATION 1 :
COLLEGE/UNIVERSITY :
DATE OF DEGREE OR DIPLOMA :
ADDITIONAL QUALIFICATION 2 :
DATE OF 1ST ADMISSION INTO THE REGISTER : 5-Jun-2017
THIS CERTIFICATE SHALL REMAIN IN FORCE TILL : 31-Dec-2018

This is to certify that above named person has been duly registered as a Dental Surgeon under Section 33/34 of the Dentists Act, 1948(XVI of 1948).

DATE: 5th June 2017.



Dr. Sandeep Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park - III, Gr. Noida (U.P.)

REGISTRAR
Registrar,
West Bengal Dental Council

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-11844

Name:	Dr. ALPANA SINGH
Father's Name:	Mr. KOMAL SINGH
Date of Birth:	18-07-1988
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2014)
M.D.S.	RAJASTHAN UNIVERSITY OF HEALTH SCINECES, JAIPUR (2017)
Date of First Registration:	30-06-2014
Date of MDS Addition:	28-09-2017
Valid / Renewed Upto:	31-12-2019
Professional Address:	D-29 JAI DURGA APPT. UPPER GROUND FLOOR, KIRAN GARDEN,UTTAM NAGAR,NEW DELHI- 110059
Residential Address:	D-29 JAI DURGA APPT. UPPER GROUND FLOOR, KIRAN GARDEN,UTTAM NAGAR,NEW DELHI- 110059



SIGNATURE OF THE
REGISTERED DENTIST

ISSUING AUTHORITY-

DR. RISHI RAJ
REGISTRAR
DELHI DENTAL COUNCIL

DDC/Registration/2017/ 1433

Dated: 28-09-2017

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be Immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist
in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-10103

Name:	Dr. SONAL
Father's Name:	Sh. OM PRAKASH
Date of Birth:	19-04-1987
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2012)
M.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2019)
Date of First Registration:	25-04-2012
Date of M.D.S. Addition:	11-11-2019
Valid / Renewed Upto:	31-12-2019
Professional Address:	FLAT NO-55-B, POCKET-6, MIG COMPLEX, MAYUR VIHAR PHASE-3, DELHI-110096
Residential Address:	FLAT NO-55-B, POCKET-6, MIG COMPLEX, MAYUR VIHAR PHASE-3, DELHI-110096



SIGNATURE OF THE
REGISTERED DENTIST

Lt Col Dr. Anil Sabhlok (Retd.)
Officiating Registrar
DELHI DENTAL COUNCIL

DDC/Registration/2019/ 5246

Dated: 11-11-2019

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

UTTAR PRADESH DENTAL COUNCIL



ADDITIONAL QUALIFICATION CERTIFICATE

No. 2300

Date 16/09/2019

I hereby certify that Dr. **SHRADHA KALRA (KM.)**

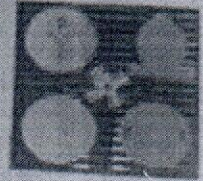
Mother's Name Smt.

SHIKHA KALRA

Father's Name

ARUN KUMAR KALRA

R/o E-6, SECTOR-40, NOIDA, GAUTAM BUDH NAGAR - 201301 UTTAR PRADESH



is registered under Dentist's Act, 1948 under part A (DENTIST) on the registration No. 9494 dated 24/01/2012

He/She Studied from **ITS DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA**

and has obtained following additional qualification from **CH. CHARAN SINGH UNIVERSITY, MEERUT**

1- **M.D.S (PERIODONTICS & ORAL IMPLANTOLOGY) - 2015**

UTTAR PRADESH DENTAL COUNCIL

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

rapalli,
venue Road,
w - 226001



Signature valid

Digitally Signed by **DR. SHRADHA KALRA**
(REGISTRAR, U.P. DENTAL COUNCIL)
Date: 16/09/2019 11:51:59



Registrar
U.P. Dental Council



UTTAR PRADESH DENTAL COUNCIL

5-Sarvapalli, Mall Avenue Road, Lucknow

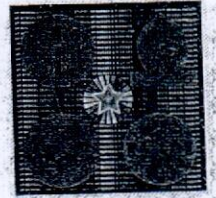
(Issued under section 32(2) / 35(4) of the Dentists Act, 1948)

UTTAR PRADESH DENTIST'S REGISTRATION CERTIFICATE

Certificate No. **17768**

Dated : 16/03/2018

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



Registration in Part **A**
Name **MEENU PARIHAR (KM)**
Mother's Name Smt. **RAJKUMARI**
Father's Name Sri **R.S. PARIHAR**
Qualification : Bachelor of Dental Surgery (B.D.S.), Year of Passing **FEB-2018**
College **I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA**
University **CH.CHARAN SINGH UNIVERSITY, MEERUT**
Date & Place of registration **16/03/2018**, Lucknow
Address **VILL-GHARAMPUR POST-AMOUR NARWAL DIST- KANPUR - 209401 UTTAR PRADESH**

This certificate shall remain in force upto :- **31/12/2023**

Underwent rotatory Internship Training from **23/02/2017** To **22/02/2018**

at **I.T.S. DENTAL COLLEGE, HOSPITAL & RESEARCH CENTRE & Hospital GREATER NOIDA**

Place : Lucknow

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

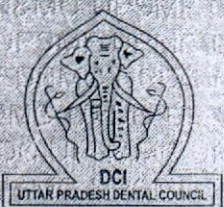


Meenu
Candidate Signature In Upper Box
PROF. (DR.) AKSHAY BHARGAVA
MDS (Prosth.), AFAAID, DICOI, DWCOI
Director- Principal
I.T.S Dental College,
Hospital & Research Centre
Greater Noida (U.P.)



Meenu
h

REGISTRAR
U.P. DENTAL COUNCIL,
LUCKNOW



R- 1189151

ASSAM SCHEDULE III (Sec. I) FORM NO 81
CERTIFICATE OF TRANSFER CHARGE.

To,

The Commissioner Secretary to the Government of Assam,
Health and Family Welfare (B) Department, Dispur, Guwahati-6.
The Accountant General, Assam, Guwahati-28.
The Director of Medical Education, Assam, Guwahati-6.
The Principal, Government Dental College, Silchar.
The Treasury Officer,

Sir,

With reference to Rule 145 of the Assam Financial Rules, the undersigned have the honour to report that we have this day of 31st March, 2018 at o'clock in the afternoon forenoon respectively received/handed over charge of the office of the Dept. of Orthodontics & Dentofacial Orthopedics in the Government Dental College, Silchar District of Cachar.

I have vacated the official residence allotted to me with effect from day of

Siddhartha Kanwar Konwar
Relieving Officer (SKonwar).

I have vacated the official residence allotted me with effect from day of

Relieved Officer

And with reference to Rule 32 (a) (VII) of the Assam Finance Rules, I (The Reliving Officer) acknowledge to pay receive Rs. (Rupees) of the permanent Advance and that the full amount of such advance is due from and be accounted for me.

Relieving Officer's District

Signature
Designation

Memo No.RDC/
Copy to :-

..0.. Dated Guwahati, the20

- 1) The Commissioner Secretary to the Government of Assam, Health and F. W. (B) Department, Dispur, Guwahati-6. With reference to letter No.HLB..... dtd.....
- 2) The Accountant General, Assam, Guwahati-28.
- 3) The Director of Medical Education, Assam, Guwahati-6.
- 4) The Treasury Officer,
- 5) Office file.

Dr. Sachit Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
27, Knowledge Park -III, Gr. Noida (U.P.)

Director of Medical Education
Principal, Hanapara, Ghy- 22
Government Dental College, Silchar

HARYANA STATE DENTAL COUNCIL



Registration No. HN 007534

CERTIFICATE OF REGISTRATION

This is to certify that the person named below has been registered as Dentist under the provision of Dentists Act, 1948

Name Dr. Parmender Kumar Vaidik

Father's Name Sh. Shri Lal Shastri

Date of Birth 19.2.1991

Address Vill. Simli Bass, v.P.O. Mansar Bass Th. Tasham, Bhiwani

Qualifications:-

● BDS: Ch. Charan Singh University, Meerut

● Name of the College I.T.S. Dental College G. Noida

● Date of Completion of Internship: 21.2.2015

Date of First Registration 20.4.2015 Part in which Registered 1

Added MDS Qualification on 06.07.2019 in Orthodontics and Dentofacial

This Certificate shall remain valid till 31.12.2020 Orthopaedics from Pacific Academy, Udaipur (Raj.) in the year 2019.

IMPORTANT NOTICE

Every registered Dentist should be careful to renew his/her registration, regularly before the 1st day of April of preceding year. Failure to do so, a Dentist is liable to have his/her name removed from the Register of Registered Dentists under Sub Section (2) of Section 39 of the Dentists Act 1948. Any Change in address in should be immediately intimated to the registrar.

NOTE:- PLEASE DONOT LAMINATE THIS CERTIFICATE AS IT CONTAINS RENEWAL PART ON BACK SIDE

[Signature]
Principal
I.T.S. Dental College

Research Centre
G. Noida (U.P.)

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-14610

Name:	Dr. RISHABH DUBEY
Father's Name:	Mr. VINOD DUBEY
Date of Birth:	15-08-1995
Qualification:	B.D.S (2018)
College:	I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTER, GREATER NOIDA
University:	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT
Date of First Registration:	12-03-2018
Valid / Renewed Upto:	31-12-2022
Professional Address:	148, SURYA NIKETAN, NEAR SHREE DURGA MANDIR, DELHI- 110092
Residential Address:	148, SURYA NIKETAN, NEAR SHREE DURGA MANDIR, DELHI- 110092



Rishabh

SIGNATURE OF THE REGISTERED DENTIST

-ISSUING AUTHORITY-

Il Sablok

Lt Col Dr. Anil Sabhlok (Retd).
Officiating Registrar
DELHI DENTAL COUNCIL

Dr. Sachit Arora
Principal
I.T.S. Dental College,
Muzaffarnagar, U.P.

DDC/Registration/2018/ 2379

Dated: 12-03-2018

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from the Council. Any Change in his/her particulars should be Immediately Intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC



DELHI DENTAL COUNCIL



6th FLOOR, C-BLOCK, VIKAS BHAWAN - II, CIVIL LINES, DELHI - 110054
 (Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.
 Registration No. A-14850

Name: Dr. AASTHA RAWAT	
Father's Name: Mr. NARENDER SINGH RAWAT	SIGNATURE OF THE REGISTERED DENTIST 
Date of Birth: 27-09-1994	
Qualification: B.D.S (2018)	Dated: 27-06-2018
College: ITS DENTAL COLLEGE, HOSPITAL & RESEARCH CENTRE, GREATER NOIDA	
University: CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT	U Col. Dr. Anil Sahbhak (Retd), Officiating Registrar DELHI DENTAL COUNCIL
Date of First Registration: 27-06-2018	
Valid / Renewed Up to: 31-12-2022	THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC www.delhidentalcouncil.in
Professional Address: CB-11D, DDA FLATS, HARI NAGAR, NEW DELHI-110064	
Residential Address: CB-11D, DDA FLATS, HARI NAGAR, NEW DELHI-110064	

DOC/Registration/2018/ 2944
 NOTE: Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (3) of section 39 of the Dentists Act 1948 from the Delhi Dental Council. Any Change in further particulars should be immediately intimated to the Registrar.

Dr. Sahit Anand
 I.T.S. Principal
 Hospital & Research Centre
 47, Knowledge Park -III, Gr. Noida (U.P.)

Certificate No. : 2632- A

Dated: 18th August, 2018



ASSAM STATE DENTAL COUNCIL

P. O. Indrapur, Guwahati - 781 032, Assam

DENTISTS' REGISTRATION CERTIFICATE

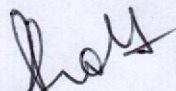
This is to certify that the person named below has been registered as DENTAL SURGEON under the provisions of the Dentists' Act, 1948.

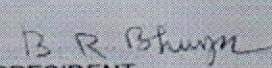
Registration in Part : A

Name : DR. ARNAB CHANDRA GOSWAMI
Father's Name : Mukut Chandra Goswami
Qualification : Bachelor of Dental Surgery (BDS), year of passing March, 2017.
College : I.T.S. Dental College, Hospital & Research Centre, Greater Noida.
University : CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT.
Place & Date of registration : 18-08-2018.
Address : HOUSE NO. 23, LANE: 1, ADARSHAPUR, KAHILIPARA ROAD,
PO: KAHILIPARA, GUWAHATI, PIN: 781019, ASSAM.

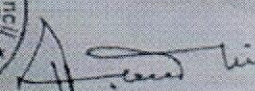
This certificate shall remain in force upto : 31st March, 2023.

After that, on payment of prescribed yearly fee, it will be renewed and a separate Renewal Certificate shall be issued.


Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Greater Noida (U.P.)


B. R. Bhunia
PRESIDENT




REGISTRAR

ASSAM STATE DENTAL COUNCIL, GUWAHATI

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054

(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-11392

Name:	Dr. ISHAN
Father's Name:	Mr. MAHABIR SINGH
Date of Birth:	20-08-1988
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2013)
M.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2017)
Date of First Registration:	28-11-2013
Date of MDS Addition:	15-06-2018
Valid / Renewed Upto:	31-12-2019
Professional Address:	B-116, SECTOR-SIGMA-1, GAUTAM BUDDHA NAGAR, GREATER NOIDA, U.P.-201310
Residential Address:	B-116, SECTOR-SIGMA-1, GAUTAM BUDDHA NAGAR, GREATER NOIDA, U.P.-201310



SIGNATURE OF THE REGISTERED DENTIST

Lt Col Dr. Anil Sabhlok (Retd).
Officiating Registrar
DELHI DENTAL COUNCIL

Dated: 15-06-2018

DDC/Registration/2018/ 2914

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change In his/her particulars should be Immediately Intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

First Registration

No. A/B ...62595

DDC/2017/86

Dated13.01.2017

Certificate of Registration/Renewal of Registration under the Dentist Act, 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2017-2021

Name : Dr. Piyali Chakrabarti

Qualifications : B.D.S. (Ch. Charan Singh Univ.) 2016

Registration No. : A-13694

This certificate shall remain in force till 31.12.2021

Sarabjit Singh
Registrar
Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

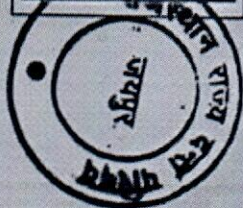
FORM-G-1

Rule 61 (5) RSSDC (RULES, 2008)

Certificate of Registration under the Dentists Act

1948, (XVI of 1948)

Reg. No. A-4565



This is to certify that the person named below has been registered as a Dentist in Part-A of the State Register under the provision of the Dentists Act, 1948.

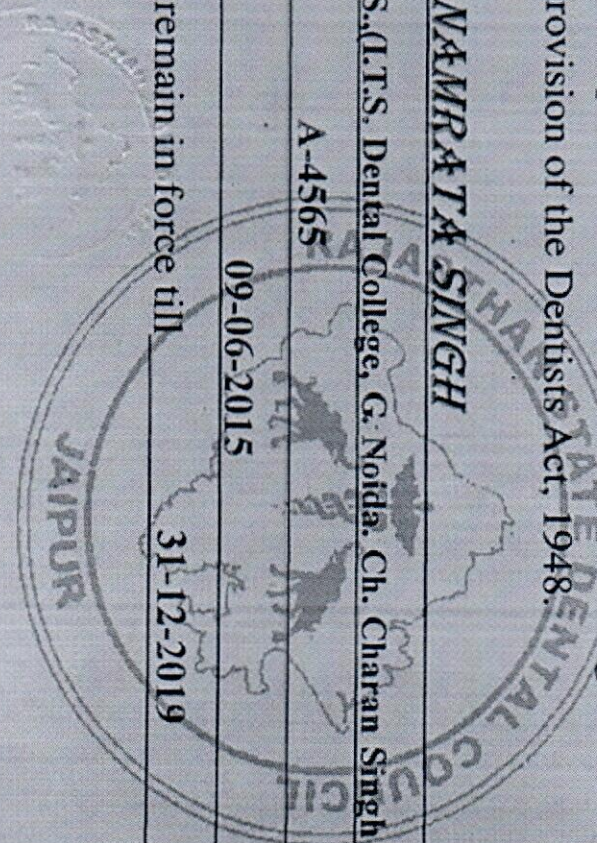
Name DR. NAMRATA SINGH

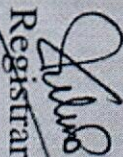
Qualification B.D.S.(I.T.S. Dental College, G. Noida. Ch. Charan Singh University, Meerut. Year-2015)

Registered No. A-4565

Date of Registration 09-06-2015

This certificate shall remain in force till 31-12-2019




Registrar

Rajasthan State Dental Council, Jaipur

IMPORTANT NOTICE:

1. Every registered dental practitioner should pay a renewal fee of Rs. 400/- between 1st January and 31st March every year. If the renewal fee is not paid before the due date, the Registrar shall remove the name of the defaulter from the register, under section 39 (2) of the Dentists Act 1948.
2. After removal of name from the register the person has to surrender his certificate of the registration to the Registrar under sub-section (5) of section 41.
3. Every registered dental practitioner should be careful to send to the Registrar immediately notice of any change in his address.

Dr. Sandeep Anand Arora

I.T.C. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

UTTAR PRADESH DENTAL COUNCIL

5-Sarvapaali, Mall Avenue Road, Lucknow
(Issued under section 32(2) / 35(4) of the Dentists Act, 1948)

UTTAR PRADESH DENTISTS REGISTRATION CERTIFICATE

Certificate No. **15210**



Dated: 16/02/2016

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

Registration in Part **A**

Name **AMIT KUMAR**

Father's Name Sri **RAM KUMAR**

Qualification **Bachelor of Dental Surgery (B.D.S.)**, Year of Passing **FEB-2016**

College **I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA**

University **CH. CHARAN SINGH UNIVERSITY, MEERUT**

Date & Place of registration **16/02/2016** **Lucknow**

Address **VILL. POST. RESARI TEH. KHAIR ALIGARH - 202141 UTTAR PRADESH**

This certificate shall remain in force upto **31/12/2021**

Underwent rotatory Internship Training from **13/02/2015** To **12/02/2016**
at **I.T.S. DENTAL COLLEGE & HOSPITAL GREATER NOIDA**

Place : **Lucknow**

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



Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park - III, Greater Noida (U.P.)

Principal
I.T.S. Dental College
Hospital & Research Centre
47, Knowledge Park - III, Greater Noida (U.P.)

REGISTRAR
U.P. DENTAL COUNCIL, LUCKNOW





DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

No. A/B 82103....

DDC/2016/17005

Dated 24.08.2016

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Robin Malik

Qualifications : B.D.S. (Ch. Charan Singh Univ.) 30.09.2012

..... M.D.S. (Ch. Charan Singh Univ.) 2016

..... (MDS entry recorded in the DDC register on 24.08.2016)

Registration No. : A-11000

This certificate shall remain
in force till 31.12.2019

Sarabjit Singh
Registrar
Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054

Dr. Sachin Arora
Principal
A.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

SANTOSH



UNIVERSITY

(Established u/s 3 of the UGC Act, 1956)

No.1 Santosh Nagar, Ghaziabad-201 009, India

Ph. No. 0120-2743419 Fax No. 0120-2741140 Email-ID: santosh@santoshuniversity.com

F. No.SU/2017/931[16]

Date: 07.09.2017

MEMORANDUM

Subject: Admission to Ph.D. course in the Department of Orthodontics & Dentofacial Orthopedics, Santosh Medical/ Dental Colleges & Hospitals, Ghaziabad.

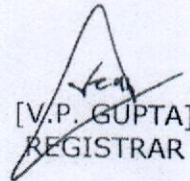
With reference to his/ her Entrance Test (MCQ) and Interviews dated 06/09/2017 for admission to Ph.D. course in the Department of **Orthodontics & Dentofacial Orthopedics**, Dr./ Mr./ Ms./ Mrs. **Robin Malik** is informed that he/ she has been selected for admission to Ph.D. Course in the Department of **Orthodontics & Dentofacial Orthopedics**. He/ She will be required to deposit the requisite fee. This may be remitted either in cash or through **Bank Draft** drawn **in favour of Santosh Trust payable at New Delhi within 10 days from the date of issue of this letter**. Fees once paid are not refundable in any case and no correspondence will be entertained in this regard. In case no reply is received then it will be assumed that he/ she does not intend to join the course.

The detailed Terms & Conditions for the Ph.D. course at Santosh University **are enclosed** for information and compliance. He/ she is advised to collect the Joining Report from the **Academic Section** after completion of certain formalities, before he/ she report to the Head of the concerned Department of Santosh Medical/ Dental Colleges on 15/09/2017. The last date of joining the Ph.D. course is 30/09/2017.

Dr. Sachit Arora
Principal
I.T. Dental College,
Hospital & Research Centre
47, Knowledge Park- III, Gt. Noida (U.P.)

He/ She is required to submit immediately his/ her **consent (in the prescribed format as enclosed herewith along with the Terms and Conditions)** or otherwise to join the Ph.D. course so that if he/ she does not desire to join, the seat may be offered to the next candidate on the waiting list well in time. **In case the candidate is In-Service then he/ she is required to bring the NO OBJECTION CERTIFICATE in original from the employer.**

He/ She will not be paid any fellowship for the duration of his/ her registration period. The period of registration in his/her case will be according to the Terms & Conditions of the Ph.D. course.

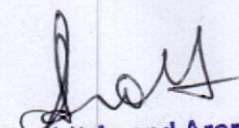

[V.P. GUPTA]
REGISTRAR

Encl. As above.

Dr./ Mr./ Ms./ Mrs. **Robin Malik**
Email ID: robin143in@gmail.com

Copy to:

1. Head of the Department of Orthodontics & Dentofacial Orthopedics.
2. P.S. to Vice Chancellor
3. Dean, Santosh Medical/Dental College & Hospital, GZB
4. Medical Superintendent, Santosh Hospital
5. Co-Coordinator of Research Advisory Committee[RAC]
(Santosh Medical/ Dental College)
6. Finance Controller
7. Chief Librarian


Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



FORM B

DELHI DENTAL COUNCIL
MAULANA AZAD DENTAL COLLEGE & HOSPITAL COMPLEX
Bahadur Shah Zaffer Marg, New Delhi - 110002

First Registration

No. A/B **40210**

Dated 25.8.2010

(Certificate of renewal of registration under the Dentists Act 1948)

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his/her registration is renewed for the year 20...10 to 14

Name Dr. Ravi Sachdeva

Qualification B.D.S.(Dr. B.R.A. Univ.) 2010

Regd. No. A-8679

This Certificate shall remain in force till 31-12-20

Dr. MAHESH VERMA
Registrar
Delhi Dental Council
Delhi

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



UTTAR PRADESH DENTAL COUNCIL

5-Sarvapalli, Mall Avenue Road, Lucknow

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

UTTAR PRADESH DENTIST'S REGISTRATION CERTIFICATE

Certificate No. **10471**

Dated : 27/09/2012



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

Registration Part **A**
Name **YUSRA AKHTAR**
Father's Name Sri **NAEEM AKHTAR**
Qualification Bachelor of Dental Surgery (B.D.S.), Year of Passing **SEP-2012**
College **DENTAL COLLEGE & HOSPITAL, FACULTY OF MED., A.M.U., ALIGARH**
University **ALIGARH MUSLIM UNIVERSITY, ALIGARH**
Date & Place of registration **27/09/2012** Lucknow

Address **H.NO-486 NEAR MASJID NABI KAREEM, HAMDARD NAGAR B, ANOOPSHAHAR ROAD, ALIGARH - 202002 UTTAR PRADESH**

This certificate shall remain in force upto :- **31/12/2017**

Underwent rotatory Internship Training from **12/09/2011** To **11/09/2012**
at **DENTAL COLLEGE & Hospital ALIGARH**

Place Lucknow

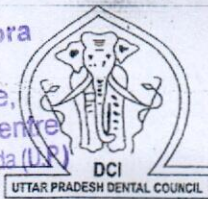


Candidate Signature in Upper Box
Seal & Signature of Attesting Authority
04 1989

REGISTRAR

U.P. DENTAL COUNCIL, LUCKNOW

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)





DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrardelhidentalcouncil@gmail.com, presidentdelhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

First Registration

No. A/B **53387**

DDC/2015/15209

Dated 21.10.2015

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

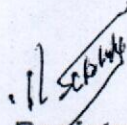
This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

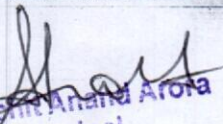
Name : Dr. Suhani Goel

Qualifications : B.D.S. (Dr. B.R. Ambedkar Univ.) 20.10.2015

Registration No. : A-12789

This certificate shall remain
in force till 31.12.2019


Registrar
Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054


Dr. Sashmit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

56787
No. A/B

DDC/2015/

Dated 27.03.2015

Certificate of Registration/Renewal of Registration under the Dentist Act, 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and 2015-19 his / her registration is renewed for the year from

Name : Dr. Malik Moharnmad Naiyer

Qualifications : B.D.S.(Jamia Millia Islamia Univ.) 31.8.2014

Registration No. : A-12021

Registrar

This certificate shall remain
in force till 31.12.2019

Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi

Dr. Anand
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



DELHI DENTAL COUNCIL

FORM B

5th FLOOR CHANGING VIRAS BHAWAN - 11 CIVIL LINES, DELHI 110054
E-mail: registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website: www.delhidentalcouncil.org.in

55371

No. A/B

DDC/2015/10911

Dated 10.3.2015

Certificate of Registration/Renewal of Registration under the Dentist Act, 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and 2015-19 his / her registration is renewed for the year from

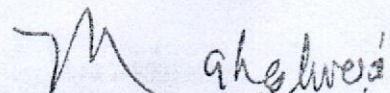
Name Dr. Aakriti Sharma

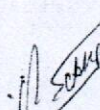
Qualifications B.D.S. (Dr. B.R. Ambedkar Univ.) 29.6.2013

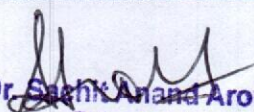
Registration No. A-11121

This certificate shall remain

in force till 31.12.2019


Registrar


Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi


Dr. Sachin Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

No. A/B **55675** DDC/2015/11218

Dated 12.3.2015

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Mandira Gulati

Qualifications : B.D.S.(Dr. B.R.A. Univ.) 2011

Registration No. : A-9315

This certificate shall remain
in force till 31.12.2019

Registrar

Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

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. **15427**

Dated **11/05/2016**

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

Registration in Part **A**
Name **KRISHNA KUMAR VARSHNEY**

Mother's Name Smt. **MITHLESH VARSHNEY**
Father's Name Sri **SURAJ PAL VARSHNEY**

Qualification : Bachelor of Dental Surgery (B.D.S.), Year of Passing **MAR-2016**

College **I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA**

University **CH.CHARAN SINGH UNIVERSITY, MEERUT**

Date & Place of registration **11/05/2016**, Lucknow

Address **3/132 MITHLA NIWAS VIDHYA NAGAR COLONY RAMGHAT ROAD ALIGARH - 202001 UTTAR PRADESH**

This certificate shall remain in force upto :- **31/12/2021**

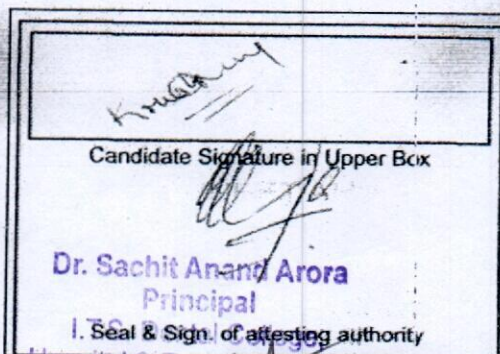
Underwent rotatory Internship Training from **13/02/2015** To **14/03/2016**

at **I.T.S. DENTAL COLLEGE &**

Hospital **GREATER NOIDA**

Place : Lucknow

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

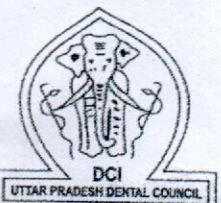


Hospital & Research Centre
47, Knowledge Park - III, Gr. Noida (U.P.)



L

**REGISTRAR
U.P. DENTAL COUNCIL,
LUCKNOW**



R- 1.00441.6



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

First Registration

No. A/B **57786**DDDC/2015/13233

Dated 01.05.2015

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Harchintan Kaur

Qualifications : B.D.S.(Ch. Charan Singh Univ.) 08.04.2015

Registration No. : A-12461

This certificate shall remain

in force till 31.12.2019

Registrar

Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi

Attested
Stamp

SUSHIL ARORA
Administrative Officer (Judicial)
O/c. Principal Judge (HQs)
Family Court, Dwarka
New Delhi

Dr. Sachit Anand Arora
Principal

I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

SL. No. 0094921

098336

Secondary Education Council



স্বতন্ত্র মাধ্যমিক শিক্ষা সংসদ

অসম উচ্চতৰ মাধ্যমিক শিক্ষা সংসদ
BAMUNIMADAM : GUWAHATI-781021

This is to certify that **Abhi jeet Bursagohain**
son/daughter of **Nandeswar Bursagohain** and
Anjali Bursagohain

Roll No. 0363 No. 20014 passed the Higher
Secondary Final Examination, 2009 of this Council in SCIENCE
stream and was placed in
SECOND Division.

GUWAHATI - 781021
DATE: 26TH MAY, 2009

Jitendra
SECRETARY

Dr. Sahil Chandra
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

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

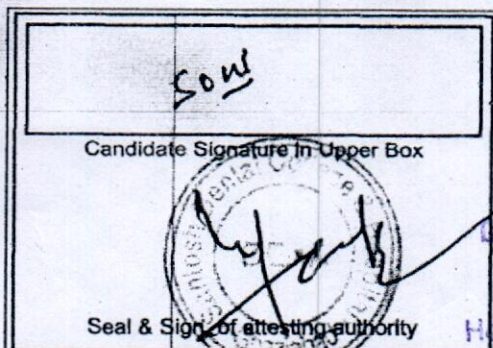
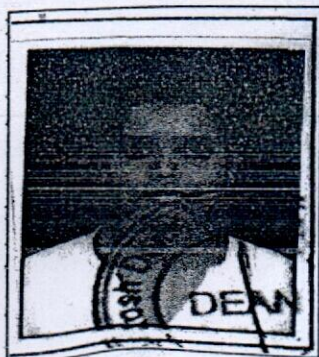
Certificate No. **13536**

Dated : 15/12/2014

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

Registration in Part **A**
Name **SONI SHARMA (KM)**
Father's Name Sri **HARI SHANKAR SHARMA**
Qualification : Bachelor of Dental Surgery (B.D.S.), Year of Passing **SEP-2014**
College **SANTOSH DENTAL COLLEGE, GHAZIABAD**
University **SANTOSH UNIVERSITY, GHAZIABAD**
Date & Place of registration **15/12/2014 Lucknow**
Address **B-2,39 A, SAI APPARTMENT SEC-71, NOIDA - 201301 UTTAR PRADESH**
This certificate shall remain in force upto :- **31/12/2019**
Underwent rotatory Internship Training from **19/09/2013** To **18/09/2014**
at **SANTOSH DENTAL COLLEGE & Hospital GHAZIABAD**

Place : Lucknow



REGISTRAR

U.P. DENTAL COUNCIL, LUCKNOW

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College
Hospital & Research Centre
47, Knowledge Park - II, G
UTTAR PRADESH DENTAL COUNCIL

U.P. DENTAL COUNCIL

5, Sarvpalli, Mall Avenue Road, Lucknow

Identity Card

8244

12762/10/04/2014

PRIYANKA KOTIA D/o Sri SATISH KOTIA



Qualification B.D.S.

College I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA

Address 31, RATAN PURA NAGRA, JHANSI - 264003 UTTAR PRADESH



DENTAL COUNCIL

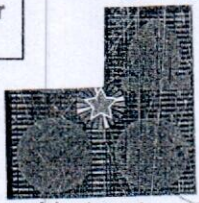
Avenue Road, Lucknow

5(4) of the Dentists Act, 1948)

'S REGISTRATION CERTIFICATE

Certificate No. **12762**

Dated : 10/04/2014



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

Registration in Part **A**
Name **PRIYANKA KOTIA (KM)**

Father's Name Sri **SATISH KOTIA**

Qualification : Bachelor of Dental Surgery (B.D.S.), Year of Passing **MAR-2014**

College **I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA**

University **CH. CHARAN SINGH UNIVERSITY, MEERUT**

Date & Place of registration **10/04/2014** , Lucknow

Address **31, RATAN PURA NAGRA, JHANSI - 264003 UTTAR PRADESH**

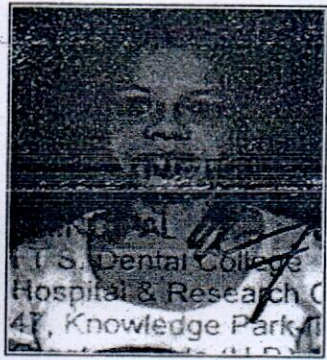
This certificate shall remain in force upto :- **31/12/2019**

Underwent rotatory Internship Training from **01/04/2013** To **31/03/2014**
at **I.T.S. DENTAL COLLEGE & Hospital GREATER NOIDA**

Place : Lucknow

REGISTRAR

U.P. DENTAL COUNCIL, LUCKNOW



Priyanka Kotia
Candidate Signature in Upper Box
M.D.S.
PRINCIPAL
I.T.S. Dental College
Hospital & Research Centre
47, Knowledge Park-III
Greater Noida (U.P.)
Seal & Sign. of attesting authority

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College
Hospital & Research Centre
47, Knowledge Park-III, Greater Noida (U.P.)
DCI
UTTAR PRADESH DENTAL COUNCIL



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

55831

No. A/B DDC/2015/11366

Dated 13.3.2015

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

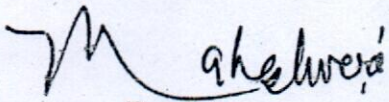
Name : Dr. Sonal


Qualifications : B.D.S.(Ch. Charan Singh Univ.) 2012

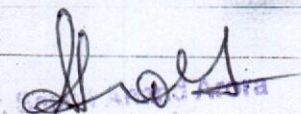
Registration No. : A-10103

This certificate shall remain

in force till 31.12.2019


Registrar


Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi


Dr. Anil Kumar
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrardelhidentalcouncil@gmail.com, presidentdelhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

53315

First Registration

No. A/B

DDC/2015/15144

Dated 16.10.2015

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Meghali Diwaker

Qualifications : B.D.S. (Santosh Univ.) 07.09.2015

.....

.....

Registration No. : A-12769

This certificate shall remain

in force till 31.12.2019

Registrar

Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054

Dr. Sachin Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

No. A/B **56145** DDC/2015/11696

Dated 19.03.2015

Certificate of Registration/Renewal of Registration under the Dentist Act, 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Preeti Nagar

Qualifications : B.D.S.(Ch. Charan Singh Univ.) 7.4.2014

Registration No. : A-11636

This certificate shall remain

in force till 31.12.2019

Registrar

Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi

Dr. **Arora**
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

[Signature]
Dr. Sandhya Anand Airoa
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

BIHAR STATE DENTAL COUNCIL



REGISTRATION CERTIFICATE

Certified that Under Section 34 of Dentist Act 1948 (Act No. 16/1948)

Dr. SHRICHHA SUMAN is registered as Dentist (Dental

Surgeon) Details of registration are as follows :-

1. Name DR. SHRICHHA SUMAN
2. Father's Name GANGA DHAL DUTTA
3. Qualification for registration
and authority granting qualification. B.D.S. (V.B. Univ) Hazaribagh J.K.
4. Registration Number and Date. 6504/A Dated: 18/12/16
5. Additional qualifications acquired later. Nil

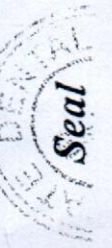
Registration will remain enforce till 2020 After that on payment of prescribed yearly

fee it will be renewed every year and separate receipt for such renewal will be given as certificate.



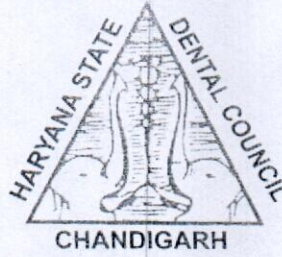
[Signature]
REGISTRAR

Bihar State Dental Council
Patna



REGISTRAR

HARYANA STATE DENTAL COUNCIL



Registration No. HN.....006898

CERTIFICATE OF REGISTRATION

is to certify that the person named below has been registered as Dentist under the provision of Dentists Act, 1948

Dr. Nivedita

Dr. R.K. Chaudhary

Date of Birth 20.10.1989

Address H-62, Jal Vidgut Apts. Sector-21C, Faridabad, Haryana

Qualifications:-

BDS: Himachal Pradesh University Shimla (HP)

Name of the College Bhojia Dental College & Hospital Baddi, Solan (HP)

Date of Completion of Internship: 9.12.2013

Date of First Registration 1.2.2014 Part in which Registered.....A.....

Certificate shall remain valid till 31.12.2019

Sethi
REGISTRAR

IMPORTANT NOTICE

Registered Dentist should be careful to renew his/her registration, regularly before the 1st day of April of preceding year, Failure to do so, a Dentist is liable to have his/her name removed from the Register of Registered Dentists under Sub Section (2) of Section 39 of the Dentists Act 1948. Any Change in address should be immediately intimated to the registrar.

PLEASE DONOT LAMINATE THIS CERTIFICATE AS IT CONTAINS RENEWAL PART ON BACK SIDE

Dr. Sachit Anand Arora
Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

BIHAR STATE DENTAL COUNCIL



REGISTRATION CERTIFICATE

Certified that Under Section 34 of Dentist Act 1948 (Act No. 16/1948)

Dr. SUMIT ANAN is registered as Dentist (Dental Surgeon) Details of registration are as follows :-

1. Name.....DR. SUMIT ANAN.....
2. Father's Name.....RAHINANDAN PRASAD SINHA.....
3. Qualification for registration and authority granting qualification.....B.S.(K.B.univ)Hoshiarpur,TKA.....
4. Registration Number and Date.....6454/A.....7/1/16.....Bihar State Dental Council
5. Additional qualification acquired later.....NIL..... Patna



Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park - III, G. Noida (U.P.)

Registration will remain enforce till.....2.2.20.....After that on payment of prescribed yearly fee it will be renewed every year and separate receipt for such renewal will be given as certificate.

REGISTRAR

BIHAR STATE DENTAL COUNCIL



REGISTRATION CERTIFICATE

Certified that Under Section 34 of Dentist Act 1948 (Act No. 16/1948)

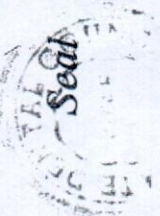
Dr. ...NIDHT. SHARMA..... is registered as Dentist (Dental Surgeon) Details of registration are as follows :-

1. Name ...DR. NIDHT. SHARMA.....
2. Father's Name ...SHANKER PRASAD SHARMA.....
3. Qualification for registration
and authority granting qualification...B.D.S.(M.V.)AllahGays.....
4. Registration Number and Date...4734/A Dated-16/11/14.....
5. Additional qualifications acquired later.....NIL.....



Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

Registration will remain enforce till.....2018..... After that on payment of prescribed yearly fee it will be renewed every year and separate receipt for such renewal will be given as certificate.



REGISTRAR 16/11/14

Certificate No.2833

Serial No. A/B 2611

JAMMU AND KASHMIR STATE DENTAL COUNCIL



Dentists' Registration Certificate

(Certificate of Registration under the Dentists Act XVI of 1948)

Registration No. A-2695(J&KSDC)

Dated Sgr./Jmu. : 17.08.2015

This is to certify that the person named below has been registered as REGISTERED DENTIST in Part A/B of the State Register under the provisions of the Dentists Act, 1948.

Name..... DR. INSHA NISSAR.

Father's name..... MR. NISSAR AHMAD SHAHGLOO.

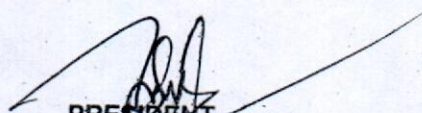
Address..... BAGHATH BARZULLA, SRINAGAR.


..... KASHMIR.

Qualification for Registration..... B.D.S (Govt. Dental College & Hosp. Shireen Bagh, Srinagar).

Date of first admission in to the Register..... 17.08.2015




PRESIDENT
J&K STATE DENTAL COUNCIL


REGISTRAR
J&K STATE DENTAL COUNCIL

Important Notice :-

1. Every Registered Dental Practitioner should get his/her Registration Certificate renewed between 1st January to 31st March of the subsequent year.
2. Change of address, if any, should be communicated to the Registrar.
3. All enquiries made should be answered promptly with regard to any matter pertaining to Registration etc. failing which his/ her name shall be erased from the Register of Registered Dentists under sub-section(2) of section 39 of the Dentists Act, 1948.

Certificate No. 2545.

Serial No. A/B 2322

JAMMU AND KASHMIR STATE DENTAL COUNCIL



Dentists' Registration Certificate

(Certificate of Registration under the Dentists Act XVI of 1948)

Registration No. A-2409 (J&KSDC)

Dated Sgr./Jmu. 06-12-14.

This is to certify that the person named below has been registered as **REGISTERED DENTIST** in Part A/B of the State Register under the provisions of the Dentists Act, 1948.

Name Dr. Kirti Raina.

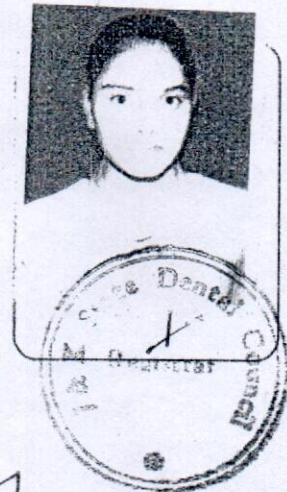
Father's name Sh. Kewal Krishan Raina

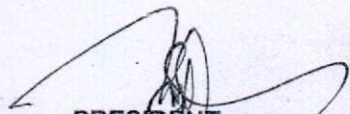
Address H.No. 2, Brij Nagar,


R.S. Pura, Jammu.

Qualification for Registration B.D.S(Himachal Instt: of Dental Sciences).

Date of first admission in to the Register 06-12-2014.




PRESIDENT
J&K STATE DENTAL COUNCIL


REGISTRAR
J&K STATE DENTAL COUNCIL

Important Notice :-

1. Every Registered Dental Practitioner should get his/her Registration Certificate renewed between 1st January to 31st March of the subsequent year.
2. Change of address, if any, should be communicated to the Registrar.
3. All enquiries made should be answered promptly with regard to any matter pertaining to Registration etc. failing which his/ her name shall be erased from the Register of Registered Dentists under sub-section(2) of section 39 of the Dentists Act, 1948.

Dr. Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

Certificate No. : 1981- A

Dated: 21st March, 2016



ASSAM STATE DENTAL COUNCIL

P. O. Indrapur, Guwahati - 781 032, Assam

DENTISTS' REGISTRATION CERTIFICATE


This is to certify that the person named below has been registered as DENTAL SURGEON under the provisions of the Dentists' Act, 1948.

Registration in Part : A

Name : DR. ABHIJEET BURAGOHAIN
Father's Name : NANDESWAR BURAGOHAIN
Qualification : Bachelor of Dental Surgery (BDS) Year of Passing Oct, 2014
College : I. T. S Dental College & Hospital, Greater Noida (U.P.).
University : CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT.
Place & Date of registration : 21-03-2016.
Address : GODAPANI NAGAR, THANESWAR BARUAH PATH, P.O.- RUDRASAGAR, SIBSAGAR-785665, ASSAM.

This certificate shall remain in force upto : 31st March, 2019.

After that, on payment of prescribed yearly fee, it will be renewed and a separate Renewal Certificate shall be issued.


PRESIDENT




REGISTRAR

ASSAM STATE DENTAL COUNCIL, GUWAHATI

Dr. Sachit Anand Arora
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park - III, Gr. Noida (U.P.)

Certificate No 3004

Serial No A/B 2782

JAMMU AND KASHMIR STATE DENTAL COUNCIL



Dentists' Registration Certificate

(Certificate of Registration under the Dentists Act XVI of 1948)

Registration No. A-2866 (J&K SDC)

Dated Sgr./Jmu. 27-01-2016

This is to certify that the person named below has been registered as REGISTERED DENTIST in Part A/B of the State Register under the provisions of the Dentists Act, 1948.

Name Dr. ANA GUPTA


Father's name Mr. RAJESH GUPTA


Address 15, A/D GANDHI NAGAR
JAMMU (J&K)

Qualification for Registration B.D.S [INSTITUTE OF DENTAL SCIENCES, SEHORA, JAMMU]

Date of first admission in to the Register 27-01-2016




PRESIDENT
J&K STATE DENTAL COUNCIL


REGISTRAR
J&K STATE DENTAL COUNCIL

Important Notice :-

1. Every Registered Dental Practitioner should get his/her Registration Certificate renewed between 1st January to 31st March of the subsequent year
2. Change of address, if any, should be communicated to the Registrar
3. All enquiries made should be answered promptly with regard to any matter pertaining to Registration etc. failing which his/ her name shall be erased from the Register of Registered Dentists under sub-section(2) of section 39 of the Dentists Act, 1948.

Dr. Sachit Anand Arora

Printed at the Ranbir Government Press, Jammu

Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park - III, Gr. Noida (U.P.)

KARNATAKA STATE DENTAL COUNCIL

ಕರ್ನಾಟಕ ರಾಜ್ಯ ದಂತ ವೈದ್ಯ ಪರಿಷತ್ತು

No. 23, Appajappa Agrahara, 1st Main, Chamarajpet, Bangalore - 560 018, INDIA
ಸಂ. 23, ಅಪ್ಪಾಪ್ಪ ಅಗ್ರಹಾರ, 1ನೇ ಮುಖ್ಯರಸ್ತೆ, ಚಾಮರಾಜಪೇಟೆ, ಬೆಂಗಳೂರು - 560 018 ಭಾರತ



Certificate of Registration

ನೋಂದಣಿ ಪ್ರಮಾಣ ಪತ್ರ

Under the Dentists Act, 1948
ದಂತ ವೈದ್ಯ ಅಧಿನಿಯಮ 1948 ಅಡಿಯಲ್ಲಿ

Sl. 4267

Date : 28 August 2013

Regn. No..... 31974 A

This is to certify that the person named below has been registered as a Dentist in Part 'A' of the State Register Under the provisions of the Dentists Act 1948 and is permitted to practice Dentistry.

ಈ ಕೆಳಕಾಣಿಸಿದ ವ್ಯಕ್ತಿಯ ಹೆಸರನ್ನು ರಾಜ್ಯ ನೋಂದಣಿ ಪುಸ್ತಕದ ಭಾಗ ಎ ಯ ಅಡಿಯಲ್ಲಿ ದಂತ ವೈದ್ಯ ಅಧಿನಿಯಮ 1948ರ ಉಪಬಂಧಗಳನ್ವಯ ದಂತ ವೈದ್ಯರೆಂದು ನೋಂದಾಯಿಸಲಾಗಿದ್ದು ಅವರಿಗೆ ದಂತ ವೈದ್ಯರಾಗಿ ವೃತ್ತಿ ನಿರ್ವಹಿಸಲು ಅನುಮತಿ ನೀಡಲಾಗಿದೆ ಎಂದು ಈ ಮೂಲಕ ದೃಢೀಕರಿಸಿದೆ.

Name..... Dr. SHRIYAM SHARAN

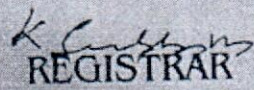
Date of Birth..... 19 August 1989

Father's Name :..... SHRI SANJEEV SHARAN

Qualification :..... BDS (JSS UNIVERSITY) June 2012


(PRESIDENT) DR. J. N. TILAKRAJ
PRESIDENT
ಅಧ್ಯಕ್ಷರು




REGISTRAR
ನೋಂದಣಾಧಿಕಾರಿ

Every Registered Dental Practitioner should renew their registration before 31st December of every year.
ನೋಂದಾಯಿಸಲಾಗಿರುವ ವ್ಯಕ್ತಿಯವರ ದಂತ ವೈದ್ಯರು ಅವರ ನೋಂದಣಿಯನ್ನು ಪ್ರತಿವರ್ಷ ಡಿಸೆಂಬರ್ 31ನೇ ತಾರೀಖಿನೊಳಗೆ ನವೀಕರಿಸತಕ್ಕದ್ದು.

For further details logon to www.karnatakastatedentalcouncil.com

KARNATAKA STATE DENTAL COUNCIL

ಕರ್ನಾಟಕ ರಾಜ್ಯ ದಂತ ವೈದ್ಯ ಪರಿಷತ್ತು

No 23, Appajappa Agrahara, 1st Main, Chamaraipet, Bangalore - 560 018 INDIA
ನಂ. 23, ಅಪ್ಪಾಪ್ಪ ಅಗ್ರಹಾರ, 1ನೇ ಮುಖ್ಯ ರಸ್ತೆ, ಚಾಮರಾಜವೇಟೆ, ಬೆಂಗಳೂರು - 560 018 ಭಾರತ



Certificate of Registration

ನೋಂದಣಿ ಪ್ರಮಾಣ ಪತ್ರ

Under the Dentists Act, 1948

ದಂತ ವೈದ್ಯ ಅಧಿನಿಯಮ 1948 ಅಡಿಯಲ್ಲಿ

Sl. No. **3333** Date: **17 April 2015** Regn. No. **35126 A**

This is to certify that the person named below has been registered as a Dentist in Part 'A' of the State Register Under the provisions of the Dentists Act 1948 and is permitted to practice Dentistry.

ಈ ಕೆಳಕಾಣಿಸಿದ ವ್ಯಕ್ತಿಯ ಹೆಸರನ್ನು ರಾಜ್ಯ ನೋಂದಣಿ ಪುಸ್ತಕದ ಭಾಗ ಎ ಯ ಅಡಿಯಲ್ಲಿ ದಂತ ವೈದ್ಯ ಅಧಿನಿಯಮ 1948ರ ಉಪಬಂಧಗಳನ್ವಯ ದಂತ ವೈದ್ಯರೆಂದು ನೋಂದಾಯಿಸಲಾಗಿದ್ದು ಅವರಿಗೆ ದಂತ ವೈದ್ಯರಾಗಿ ವೃತ್ತಿ ನಿರ್ವಹಿಸಲು ಅನುಮತಿ ನೀಡಲಾಗಿದೆ ಎಂದು ಈ ಮೂಲಕ ದೃಢೀಕರಿಸಿದೆ.

Dr. PALLAWI RAI

Name.....

08 August 1986

Date of Birth.....

SHRI BIRENDRA RAI

Father's Name :

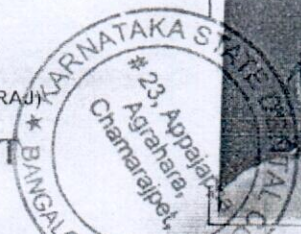
BDS (RGUHS, KARNATAKA) December 2013

Qualification :

(PROF. DR. N. MILAKRAJ)

PRESIDENT

ಅಧ್ಯಕ್ಷರು



REGISTRAR

ನೋಂದಣಾಧಿಕಾರಿ

Every Registered Dental Practitioner should renew their registration before 31st December of every year.

ನೋಂದಾಯಿಸಲಾಗಿರುವ ವೃತ್ತಿನಿರತ ದಂತ ವೈದ್ಯರು ಅವರ ನೋಂದಣಿಯನ್ನು ಪ್ರತಿವರ್ಷ ಡಿಸೆಂಬರ್ 31ನೇ ತಾರೀಖಿನೊಳಗೆ ನವೀಕರಿಸತಕ್ಕದ್ದು.

For further details logon to : www.karnatakastatedentalcouncil.com

Dr. Sachit Anand Arora

Principal

I.C.S. Dental College,

Hospital & Research Centre

47, Knowledge Park -III, Gr. Noida (U.P.)

FORM C
(Rule 63)

Certificate of Registration under the Dentists Act, 1948 (XVI of 1948)

MAHARASHTRA STATE DENTAL COUNCIL

Extension Office : Third Floor, Government Dental College and Hospital,
St. George Hospital Compound, Near CST Railway Station,
Mumbai 400 001. Website : www.msdc Mumbai.org.in

Dated 22/8/2014

This is to certify that the person named below has been registered as a Dentist in Part A / ~~Part B~~ / ~~Part C~~ of the state Register under the provisions of the Dentists Act, 1948 ~~and his~~ ~~her~~ registration was ~~last~~ ~~renewed~~ ~~on~~ ~~.....~~).

This Certificate shall remain in force till

31st December 2015.

Name SONAWANE (MS.) NIKITA SUBHASHRAO
Qualification B.D.S.(M.U.H.S., NASHIK)
Registered No. A-27382



Sachit Anand Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

Registrar,
Maharashtra State Dental Council,
Maharashtra State Dental Council;

Registrar,
State Dental Council,

IMPORTANT NOTICE

1. Every registered dental practitioner should pay a renewal fee of Rs. 200/- between 1st January and 31st March every year. if the renewal fee is not paid before the due date the Registrar shall remove the name of the defaulter from the Register.
2. Every registered dental practitioner should be careful to send to the Registrar immediate notice of any change in his address.

Certificate No. 2884.

Serial No. A/B 2622

JAMMU AND KASHMIR STATE DENTAL COUNCIL



Dentists' Registration Certificate

(Certificate of Registration under the Dentists Act XVI of 1948)

Registration No. **A-2706 (J&KSDC)**

Dated Sgr./Jmu. : **19-08-15.**

This is to certify that the person named below has been registered as **REGISTERED DENTIST** in Part A/B of the State Register under the provisions of the Dentists Act, 1948.

Name..... **Dr. Rimjhim Bakshi.**

Father's name..... **Mr. V. P. Bakshi.**

Address..... **H.No.,268, Sarwal Colony,
Jammu.**



Qualification for Registration..... **B.D.S (Institute of Dental Sciences, Sehora, Jammu).**

Date of first admission in to the Register..... **19-08-2015.**



PRESIDENT

J&K STATE DENTAL COUNCIL

REGISTRAR
J&K STATE DENTAL COUNCIL

Important Notice :-

1. Every Registered Dental Practitioner should get his/her Registration Certificate renewed between 1st January to 31st March of the subsequent year.
2. Change of address, if any, should be communicated to the Registrar.
3. All enquiries made should be answered promptly with regard to any matter pertaining to Registration etc. failing which his/ her name shall be erased from the Register of Registered Dentists under sub-section(2) of section 39 of the Dentists Act, 1948.

Dr. Sachit Anand Arora
Principal

J.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park III, G.T. Noida (U.P.)



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

54551

No. A/B

DDC/2015/10052

Dated 5.2.2015

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Bushra Rahman

Qualifications : B.D.S.(Jamia Millia Islamia Univ.) 9.10.2014

Registration No. : A-11989

This certificate shall remain

in force till 31.12.2019

Registrar


Dr. Mahesh Verma
Registrar
Delhi Dental Council
Delhi

Dr. Sachit Anand Arora
Principal

I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park -III, Gr. Noida (U.P.)

Certificate 2516.

Serial No. A/B 2293



JAMMU AND KASHMIR STATE DENTAL COUNCIL

Dentists' Registration Certificate

(Certificate of Registration under the Dentists Act XVI of 1948)

Registration No. A-2380 (J&KSDC)

Dated Sgr./Jmu. : 22-11-2014

This is to certify that the person named below has been registered as **REGISTERED DENTIST** in Part A/B of the State Register under the provisions of the Dentists Act, 1948.

Name. DR. SANA FAROOQ

Father's name DR. MOHAMAD. FAROOQ MIR.

Address. SANAT NAGAR RAWALPORA
HOUSING COLONY, SRINAGAR


Qualification for Registration B.D.S (GOVT. DENTAL COLLEGE + HOSPITAL, SRINAGAR.)

Date of first admission in to the Register 22-NOV-2014




PRESIDENT

J&K STATE DENTAL COUNCIL


REGISTRAR

J&K STATE DENTAL COUNCIL

Important Notice :-

1. Every Registered Dental Practitioner should get his/her Registration Certificate renewed between 1st January to 31st March of the subsequent year.
2. Change of address, if any, should be communicated to the Registrar.
3. All enquiries made should be answered promptly with regard to any matter pertaining to Registration etc. failing which his/ her name shall be erased from the Register of Registered Dentists under sub-section(2) of section 39 of the Dentists Act, 1948.

Dr. Sachit Anand Arora
 Principal

I.T.S. Dental College,
 Hospital & Research Centre
 47, Knowledge Park -III, G.T. Noida (U.P.)

DELHI DENTAL COUNCIL



DELHI DENTAL COUNCIL

6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054

(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-14095

Name:	Dr. SANCHIT GOYAL
Father's Name:	Mr. SATYA PRAKASH GOYAL
Date of Birth:	12-01-1988
Qualifications:	
B.D.S.	CH. CHARAN SINGH UNIVERSITY, MEERUT (2012)
M.D.S.	MEENAKSHI UNIVERSITY, CHENNAI (2016)
Date of First Registration:	23-08-2017
Date of MDS Addition:	23-08-2017
Valid / Renewed Upto:	31-12-2021
Professional Address:	B-20, UPPER GROUND FLOOR, SANJAY NAGAR, MANGOL PUR KALAN, ROHINI SECTOR-2, NEW DELHI- 110085
Residential Address:	B-20, UPPER GROUND FLOOR, SANJAY NAGAR, MANGOL PUR KALAN, ROHINI SECTOR-2, NEW DELHI- 110085



SIGNATURE OF THE REGISTERED DENTIST

-ISSUING AUTHORITY-

Rishi Raj

DR. RISHI RAJ
REGISTRAR
DELHI DENTAL COUNCIL

DDC/Registration/2017/ 1279

Dated: 23-08-2017

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

Dr. Sanchit Anand Arora
Principal
registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in

Dr. Sanchit Anand Arora
Hospital & Research Centre
47, Knowledge Park II, Gurgaon (U.P.)

BIHAR STATE DENTAL COUNCIL

REGISTRATION CERTIFICATE



Dr. Sanchit Arora
Principal
I.T.S. Dental College,
Hospital & Research Centre
47, Knowledge Park - III, Gr. Noida (U.P.)

Certified that Under Section 34 of Dentist Act 1948 (Act No. 16/1948)
Dr. AMIT KUMAR is registered as Dentist (Dental
Surgeon) Details of registration are as follows :-

1. Name DR. AMIT KUMAR
2. Father's Name SHIDHESHVAR PRASAD SINHA
3. Qualification for registration
and authority granting qualification: D.S. (C.H.S. Univ) West UP
4. Registration Number and Date 6506/A Dated - 18/2/16
5. Additional qualifications acquired later MD (Oral Health & Surgery) M.V. D.A.C. (G)

Registration will remain enforce till 18/2/17 After that on payment of prescribed yearly
fee it will be renewed every year and separate receipt for such renewal will be given as certificate.

REGISTRAR 18/2/16



DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-9903

Name:	Dr. RICHA CHOWDHARY
Father's Name:	Mr. BHIM SINGH CHOWDHARY
Date of Birth:	30-09-1987
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2012)
M.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2017)
Date of First Registration:	09-04-2012
Date of MDS Addition:	08-01-2018
Valid / Renewed Upto:	31-12-2019
Professional Address:	9/5251 A VILL-OLD SEELAMPUR ,GANDHI NAGAR, DELHI- 110031
Residential Address:	9/5251 A VILL-OLD SEELAMPUR ,GANDHI NAGAR, DELHI- 110031



Richa

SIGNATURE OF THE REGISTERED DENTIST

-ISSUING AUTHORITY-

Rishi Raj

DR. RISHI RAJ
REGISTRAR
DELHI DENTAL COUNCIL

DDC/Registration/2018/ 2013

Dated: 09-01-2018

NOTE :-Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately Intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in

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



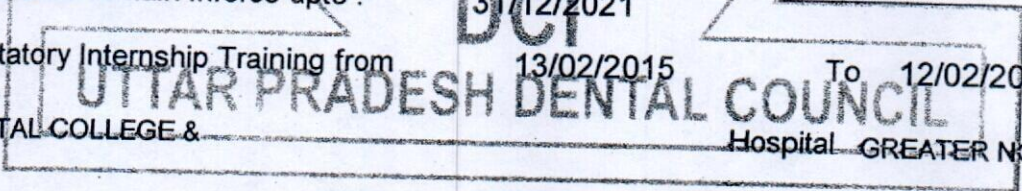
Certificate No. **15210**

Dated : 16/02/2016

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

Registration in Part **A**
 Name **AMIT KUMAR**
 Father's Name Sri **RAM KUMAR**
 Qualification : Bachelor of Dental Surgery (B.D.S.), Year of Passing **FEB-2016**
 College **I.T.S. DENTAL COLLEGE HOSPITAL & RESEARCH CENTRE, GREATER NOIDA**
 University **CH. CHARAN SINGH UNIVERSITY, MEERUT**
 Date & Place of registration **16/02/2016 Lucknow**
 Address **VILL- POST- RESARI TEH- KHAIR ALIGARH - 202141 UTTAR PRADESH**

This certificate shall remain Inforce upto :- **31/12/2021**
 Underwent rotatory Internship Training from **13/02/2015** To **12/02/2016**
 at **I.T.S. DENTAL COLLEGE & Hospital GREATER NOIDA**



Place : Lucknow

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

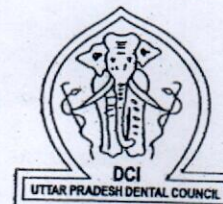
Handwritten signature

Handwritten signature

**REGISTRAR
U.P. DENTAL COUNCIL, LUCKNOW**



Handwritten signature
 Candidate Signature in Upper Box
D. PUNDE AHUJA
M.B.S.
PRINCIPAL
I.T.S. Dental College
Hospital & Research Centre
47, Knowledge Park-II
Greater Noida, U.P.



Self attested
Reenu

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

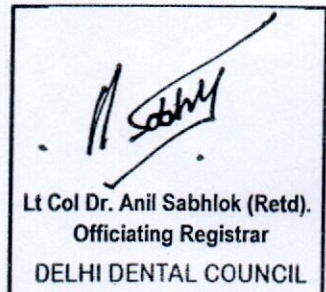
This is to certify that the person named below has been Registered as Dentist in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-12458

Name:	Dr. REENU SARAH KURIEN
Father's Name:	Sh. RAJU KURIEN
Date of Birth:	03-06-1991
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2015)
M.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2018)
Date of First Registration:	01-05-2015
Date of M.D.S. Addition:	22-11-2018
Valid / Renewed Upto:	31-12-2019
Professional Address:	43-A, POCKET-12, KALKAJI EXTENSION, DELHI
Residential Address:	43-A, POCKET-12, KALKAJI EXTENSION, DELHI



SIGNATURE OF THE REGISTERED DENTIST



Lt Col Dr. Anil Sabhlok (Retd.)
Officiating Registrar
DELHI DENTAL COUNCIL

DDC/Registration/2018/ 3621

Dated: 22-11-2018

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately Intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist
in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-11387

Name:	Dr. SACHIN
Father's Name:	Mr. MADAN
Date of Birth:	15-08-1990
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2013)
M.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2017)
Date of First Registration:	25-11-2013
Date of MDS Addition:	08-01-2018
Valid / Renewed Upto:	31-12-2019
Professional Address:	JAMMU MOHALLA BAND GALI 176/3 MAUJPUR DELHI 110053
Residential Address:	JAMMU MOHALLA BAND GALI 176/3 MAUJPUR DELHI 110053



SIGNATURE OF THE
REGISTERED DENTIST

ISSUING AUTHORITY-

DR. RISHI RAJ
REGISTRAR
DELHI DENTAL COUNCIL

DDC/Registration/2018/ 2014

Dated: 09-01-2018

NOTE : Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub section (2) of section 39 of the Dentists Act 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately Intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

No. A/B **62106** DC/2016/17004

Dated 24.08.2016

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Nitin Malik

Qualifications : B.D.S. (Dr. B.R. Ambedkar Univ.) 31.03.2013

..... M.D.S. (Ch. Charan Singh Univ.) 2016

..... (MDS entry recorded in the DDC register on 24.08.2016)

Registration No. : A-10962

This certificate shall remain
in force till 31.12.2019

Sanjay Singh
Registrar

for
Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054

N Malik



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalouncil@gmail.com, president@delhidentalouncil@gmail.com
Website : www.delhidentalouncil.org.in

62920

No. A/B DDC/2017/344

Dated 15.02.2017

Certificate of Registration/Renewal of Registration under the Dentist Act, 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-2019

Name : Dr. Mansi Punjabi

Qualifications : B.D.S. (Ch. Charan Singh Univ.) 2013

..... M.D.S (Ch. Charan Singh Univ.)2017

..... (MDS entry recorded in DDC register on 15.02.2017)

Registration No. : A-10855

Mansi

This certificate shall remain
in force till 31.12.2019

Sarabjit

Registrar

Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054

DELHI DENTAL COUNCIL



6TH FLOOR, C-BLOCK, VIKAS BHAWAN- II, CIVIL LINES, DELHI - 110054
(Incorporated Under The Dentists Act, 1948)

Certificate of Registration

This is to certify that the person named below has been Registered as Dentist
in Delhi Dental Council under the provisions of the Dentists Act, 1948.

Registration No. A-11409

Name:	Dr. EJA SHARMA
Father's Name:	Sh. VIVEKANAND
Date of Birth:	10-06-1989
Qualifications:	
B.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2013)
M.D.S.	CHAUDHARY CHARAN SINGH UNIVERSITY, MEERUT (2018)
Date of First Registration:	05-12-2013
Date of M.D.S. Addition:	31-10-2018
Valid / Renewed Upto:	31-12-2019
Professional Address:	A-15, FIRST FLOOR, AUGUST KRANTI MARG, GULMOHAR PARK, DELHI-110049
Residential Address:	A-15, FIRST FLOOR, AUGUST KRANTI MARG, GULMOHAR PARK, DELHI-110049




Lt Col Dr. Anil Sahasr (Retd.)
Officiating Registrar
DELHI DENTAL COUNCIL

DDC/Registration/2018/ 3536

Dated: 31-10-2018

NOTE: Every registered Dentist should renew his/her registration timely. Failure to do so, the Dentist is liable to have his/her name removed from the Register of Dentists under sub-section (2) of section 39 of the Dentists Act, 1948 from Delhi Dental Council. Any Change in his/her particulars should be immediately intimated to the Registrar.

THIS CERTIFICATE IS REQUIRED TO BE DISPLAYED IN THE CLINIC

registrardelhidentalcouncil@gmail.com | www.delhidentalcouncil.in



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

62743

No. A/B DDC/2017/428

Dated 28.02.2017

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-2019

Name : Dr. Shivesh Kumar Mishra

Qualifications : B.D.S. (Ch. Charan Singh Univ.) 2013

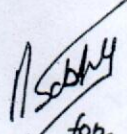
..... M.D.S (Ch. Charan Singh Univ.)2016

..... (MDS entry recorded in DDC register on 28.02.2017)

Registration No. : A-11092

This certificate shall remain

in force till 31.12.2019


for
Registrar

Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - B, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil.org.in, president@delhidentalcouncil.org.in
Website : www.delhidentalcouncil.org.in

53782

No. A/B

DDC/2015/15042

Dated 05.01.2016

Certificate of Registration/Renewal of Registration under the Dentist Act, 1948

This is to certify that the person named below is duly registered under Part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-16

Name : Dr. Abhishek Gakhar

Qualifications : B.O.S.(M.D Univ.) 2011

M.D.S (Ch. Charan Singh Univ.) 28.12.2015

(MDS Entry recorded in DDC register on 05.01.2016)

Registration No. A-9599

This certificate shall remain

in force till 31.12.2019


Registrar
Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054



DELHI DENTAL COUNCIL

FORM B

6th FLOOR, C-WING, VIKAS BHAWAN - II, CIVIL LINES, DELHI-110054
E-mail : registrar@delhidentalcouncil@gmail.com, president@delhidentalcouncil@gmail.com
Website : www.delhidentalcouncil.org.in

61329

No. A/B DDC/2016/17133 Dated 20.09.2016

Certificate of Registration/Renewal of Registration under the Dentist Act. 1948

This is to certify that the person named below is duly registered under part A/B as Dental Surgeon under the provisions of the Dentists Act, 1948 and his / her registration is renewed for the year from 2015-19

Name : Dr. Sapna Arya

Qualifications : B.D.S.(Dr. B.R.A. Univ.) 2012

..... M.D.S.(Ch. Charan Singh Univ.) 2015
..... (MDS entry recorded in DDC Register on 20.09.2016)

Registration No. : A-10064

[Signature]
Dr. Sachin Anand Arora
Principal

[Signature]

This certificate shall remain in force till 31.12.2019

Registrar
Office of the Registrar
Delhi Dental Council
C-Wing, 6th Floor,
Vikas Bhawan-II,
Civil Lines, Delhi-110054