



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR.CHANNABASANNAGOWDA {T0001}  
ASSO.PROF  
DEPT. OF MEDICAL  
KOPPAL INSTITUTE OF MEDICAL SCIENCES  
KOPPAL  
Coll Ph.:  
Mobile : 9481562274

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
A251	TARANATH GOVERNMENT AYURVEDIC MEDICAL COLLEGE ANATAPUR ROAD,, , BELLARY - 583 101

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

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R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.N.C.Desai {T0002}  
ASST.PROF  
DEPT. OF DENTAL  
K.L.E Society's Institute of Dental Sciences  
No 20,, Yeshwantpura Suburb II Stage,, Tumkur  
Road,, Bangalore - 560 022  
Coll Ph.: 23474137 (O) 41744031 ®  
Mobile : 9448832833

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

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Cntr Code Centre Name with Address

NO01 GOVERNMENT COLLEGE OF NURSING  
VICTORIA HOSPITAL COMPLEX,, FORT., , BANGALORE - 560 002

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

Sd/-

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

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R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VINOD KUMAR K {T0006}  
ASST.PROF  
DEPT. OF DENTAL  
AECS Maaruti College of Dental Sciences & Research  
Centre  
108, Hulimavu Tank Bund Road, BTM 6th Stage, 1st  
Phase, Kammanahalli, Off Bannerghatta Road,  
Bangalore - 560 076  
Coll Ph.: 080 - 26583010 (O) 26722301  
Mobile : 8971867286

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

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Cntr Code	Centre Name with Address
MO04	KEMPEGOWDA INSTITUTE OF MEDICAL SCIENCES, BANASHANKARI 2ND STAGE,, (NEAR BDA COMPLEX),, BANGALORE - 560 070

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
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**Dr. M K Ramesh**  
**Registrar (Evaluation)**

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. PRASHANTH G V {T0007}  
ASST.PROF  
DEPT. OF DENTAL  
K.L.E Society's Institute of Dental Sciences  
No 20,, Yeshwantpura Suburb II Stage,, Tumkur  
Road,, Bangalore - 560 022  
Coll Ph.: 23474137 (O) 41744031 ®  
Mobile : 9449638113

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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MO04	KEMPEGOWDA INSTITUTE OF MEDICAL SCIENCES, BANASHANKARI 2ND STAGE,, (NEAR BDA COMPLEX),, BANGALORE - 560 070

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

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Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR.PRASHANTH.K.S {T0008}  
ASST.PROF  
DEPT. OF MEDICAL  
Bangalore Medical College & Research Institute,  
Fort, K R Road, Bangalore - 560 002  
Coll Ph.: 26701529M 26700810  
Mobile : 9844100250

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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MO07	VYDEHI INSTITUTE OF MEDICAL SCIENCES & RESEARCH CENTRE, NO.82,EPIP ROAD., WHITEFIELD,, NALLURAHALLI,, BANGALORE - 560 066
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.

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R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. ANAND {T0009}  
ASST.PROF  
DEPT. OF MEDICAL  
Belgaum Institute of Medical Sciences,  
District Hospital,, , Belgaum - 590 001  
Coll Ph.: 2403126  
Mobile : 7259678077

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
MO08	B V V SANGHA'S S. NIJALINGAPPA MEDICAL COLLEGE & HANAGAL SHRI KUMARESHWAR HOSPITAL & RESEARCH CENTRE, NAVANAGAR,, , BAGALKOT - 587 102

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
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R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr. S. M. Choukimath {T00010}  
ASST.PROF  
DEPT. OF MEDICAL  
Karnataka Institute Of Medical Sciences  
, , , Hubli - 580 021  
Coll Ph.: 2373348  
Mobile : 94483 16911

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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Your's faithfully,

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R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Jyothi A Raj {T00012}  
ASSO.PROF  
DEPT. OF MEDICAL  
Rajarajeswari Medical College & Hospital  
Kambipura,, Mysore Road,, Kengeri Hobli,,  
Bangalore - 560 074  
Coll Ph.: 65661805  
Mobile : 9900570122

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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Cntr Code Centre Name with Address

U516 NATIONAL INSTITUTE OF UNANI MEDICINE  
KOTTIGEPALYA, MAGADI MAIN ROAD, , BANGALORE - 560 091

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. RAVINDRAGOUDA PATIL {T00013}  
ASST.PROF  
DEPT. OF MEDICAL  
B V V Sangha's S. Nijalingappa Medical College &  
Hanagal Shri Kumareshwar Hospital & Research  
Centre,  
Navanagar,, , Bagalkot - 587 102  
Coll Ph.: 234340 (O), 200219 ®  
Mobile : 9448192336

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
M227	BELGAUM INSTITUTE OF MEDICAL SCIENCES, DISTRICT HOSPITAL,, , BELGAUM - 590 001

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
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**Registrar (Evaluation)**

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. NEELKANT PATIL {T00014}  
ASSO.PROF  
DEPT. OF DENTAL  
A.M.E'S Dental College and Hospital,  
Near Govt. Polytechnic, Bijanagere Road, Raichur -  
584 103.  
Coll Ph.: 08532-240718, 240944  
Mobile : 9480222044

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

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Cntr Code Centre Name with Address

M227 BELGAUM INSTITUTE OF MEDICAL SCIENCES,  
DISTRICT HOSPITAL,, , BELGAUM - 590 001

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

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Your's faithfully,

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**Registrar (Evaluation)**

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. CHANDRAKANTH V RATHOD {T00015}  
ASSO.PROF  
DEPT. OF MEDICAL  
GULBARGA INSTITUTE OF MEDICAL SCIENCES  
GULABRAGA  
Coll Ph.:  
Mobile : 9886116701

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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M252	RAICHUR INSTITUTE OF MEDICAL SCIENCES, SY. NO. 307 & 308,, HYDERARABAD ROAD,, , RAICHUR - 584102
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
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**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Veerendra S Patil {T00016}  
READER  
DEPT. OF DENTAL  
HKE's S Nijalingappa Institute of Dental  
Sciences and Research,, Sedam Road,, , Gulbarga -  
585 105  
Coll Ph.: 247745, 245997, 253993 (O)  
Mobile : 9741709990

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

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Cntr Code Centre Name with Address

M252 RAICHUR INSTITUTE OF MEDICAL SCIENCES,  
SY. NO. 307 & 308,, HYDERARABAD ROAD,, , RAICHUR - 584102

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Your's faithfully,

Sd/-

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

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**Dr. M K Ramesh**  
**Registrar (Evaluation)**

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr. Mohammed Ali {T00017}  
ASST.PROF  
DEPT. OF MEDICAL  
A J Institute Of Medical Sciences,  
N.H-17,, Kuntikana,, , Mangalore - 575 004  
Coll Ph.: 2225533 (7 lines)  
Mobile : 9164110968

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

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Cntr Code	Centre Name with Address
-----------	--------------------------

M401	FATHER MULLER MEDICAL COLLEGE P. B. NO. 501,, FR. MULLER ROAD,, KANKANADY,, MANGALORE - 575 002
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. HEMANTH M {T00018}  
READER  
DEPT. OF DENTAL  
SRINIVASA INSTITUTE OF DENTAL SCIENCES  
MANGALORE  
Coll Ph.:  
Mobile : 9880048427

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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M401	FATHER MULLER MEDICAL COLLEGE P. B. NO. 501,, FR. MULLER ROAD,, KANKANADY,, MANGALORE - 575 002
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

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Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

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Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. AMAR SINGH L {T00019}  
ASSO.PROF  
DEPT. OF MEDICAL  
Father Muller Medical College  
P. B. No. 501,, Fr. Muller Road,, Kankanady,,  
Mangalore - 575 002  
Coll Ph.: 2436352  
Mobile : 9901042452

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

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Cntr Code	Centre Name with Address
T406	LAXMI MEMORIAL COLLEGE OF PHYSIOTHERAPY A J TOWERS,, BALMATTA,, , MANGALORE - 575 002

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Raghu K N {T00020}  
READER  
DEPT. OF DENTAL  
S J M DENTAL COLLEGE & HOSPITAL  
P. B Road, Chitradurga - 577 501  
Coll Ph.:  
Mobile : 9886693937

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
M426	J.J.M.MEDICAL COLLEGE, , , , DAVANGERE - 577 004

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. RAMESH V L {T00021}  
ASSO.PROF  
DEPT. OF MEDICAL  
Basaveshwara Medical College & Hospital  
SJM College Campus,, National Highway-4 (Byepass),  
NH4,, Chitradurga - 577 502  
Coll Ph.: 227937, 226564  
Mobile : 9880489902/9739295374

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
M428	SHIMOGA INSTITUTE OF MEDICAL SCIENCES, MC.GANN HOSPITAL CAMPUS,, SAGAR ROAD (B.H. ROAD),, SHIMOGA - 577201

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Nagesh Patil {T00025}  
READER  
DEPT. OF DENTAL  
MARATHA MANDAL'S DENTAL COLLEGE  
NEAR K.S.R.P GROUND, RS NO. 47A/2, BAUXITE  
ROAD, BELGAUM - 590 010.  
Coll Ph.:  
Mobile : 9483615068

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
M503	BIDAR INSTITUTE OF MEDICAL SCIENCES, UDGIR ROAD, , , BIDAR - 585401

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SANJEEV KUMAR {T00026}  
ASST.PROF  
DEPT. OF MEDICAL  
Mandya Institute of Medical Sciences,  
District Hospital Premises,, , Mandya - 571 401  
Coll Ph.: 231001, 222086  
Mobile : 9844622141

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N143	RAJARAJESHWARI COLLEGE OF NURSING KAMBIPURA, MYSORE ROAD,, , KENGERI HOBLI, BANGALORE - 560 074

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. PRASHANT PATIL {T00029}  
READER  
DEPT. OF DENTAL  
P.M. Nadagouda Memorial Dental College & Hospital  
, , , Bagalkot - 587 101  
Coll Ph.: 220435 & 225835  
Mobile : 9900004208

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
D451	SRI DHARMASTHALA MANJUNATHESHWARA COLLEGE OF DENTAL SCIENCES & HOSPITAL, SATTUR, DAVALANAGAR, DHARWAD - 580 009.

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SHESHIDHAR BANNALE {T00032}  
ASST.PROF  
DEPT. OF MEDICAL  
B V V Sangha's S. Nijalingappa Medical College &  
Hanagal Shri Kumareshwar Hospital & Research  
Centre,  
Navanagar,, , Bagalkot - 587 102  
Coll Ph.: 234340 (O), 200219 ®  
Mobile : 9844479091

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A229	SHRI JAGADGURU GURUSIDDHESHWAR CO - OPERATIVE HOSPITAL SOCIETY'S AYURVEDIC MEDICAL COLLEGE, , TQ: GOKAK, DIST: BELGAUM, GHATAPRABHA - 591 321

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

RAVI K V {T00033}  
ASST.PROF  
DEPT. OF PHARMACY  
D.R.Karigowda College of Pharamcy  
Udayagiri Extension, Kuvempu Nagar, Hassan  
Coll Ph.:  
Mobile : 8970628715

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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A301	AVS AYURVEDA MAHAVIDYALAYA VIDYANAGAR,, BAGALKOT ROAD,, , BIJAPUR - 586 101
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr. Sharath Kumar {T00034}  
ASST.PROF  
DEPT. OF MEDICAL  
A J Institute Of Medical Sciences,  
N.H-17,, Kuntikana,, , Mangalore - 575 004  
Coll Ph.: 2225533 (7 lines)  
Mobile : 9945684880

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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A351	ALVAS AYURVEDIC MEDICAL COLLEGE ALVAS HEALTH CENTRE COMPLEX,, , MOOBBIDRI - 574 227
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Gurudath G {T00035}  
READER  
DEPT. OF DENTAL  
FAROOQIA DENTAL COLLEGE & HOSPITAL  
FAROOQIA EDUCATIONAL COMPLEX, UMER  
KHAYAM ROAD, EIDGAH, MYSORE - 570 021.  
Coll Ph.: 0821-2499588, 2494890, 2494830,  
2490350, 4254700  
Mobile : 9844493489

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A401	K V G AYURVEDA MEDICAL COLLEGE & HOSPITAL AMBATEDKA,, KURUNJIBAG,, , SULLIA - 574 327

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. PRAKASH. S.B {T00036}  
ASST.PROF  
DEPT. OF MEDICAL  
KOPPAL INSTITUTE OF MEDICAL SCIENCES  
KOPPAL  
Coll Ph.:  
Mobile : 9900815960

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

A476	SHRI D G MELMALAGI AYURVEDIC MEDICAL COLLEGE & HOSPITAL SHIVANANDA NAGAR,, KALASAPUR ROAD,, , GADAG - 582 103
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.CHIKKANNA D. {T00037}  
ASSO.PROF  
DEPT. OF MEDICAL  
Adichunchanagiri Institute of Medical Sciences  
Balagangadharanatha Nagara,, Nagamangala Taluk,,  
Mandya District,, BG Nagar - 571 448  
Coll Ph.: 287433,287455, 287436 (O)  
Mobile : 9986054348

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A526	S D M COLLEGE OF AYURVEDA & HOSPITAL P.B. NO.164, B M ROAD,, THANNIRUHALLA,, , HASSAN - 573 201

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr. R.Purushotham {T00038}  
READER  
DEPT. OF DENTAL  
Sharavathi Dental College  
Alkola,, T.H Road,, , Shimoga - 577 204  
Coll Ph.: 250167, 250816  
Mobile : 9448255826

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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A626	A L N RAO AYURVEDIC MEDICAL COLLEGE , , CHIKMAGALUR DIST,, KOPPA - 577126
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Santosh Kumaran {T00039}  
READER  
DEPT. OF DENTAL  
FAROOQIA DENTAL COLLEGE & HOSPITAL  
FAROOQIA EDUCATIONAL COMPLEX, UMER  
KHAYAM ROAD, EIDGAH, MYSORE - 570 021.  
Coll Ph.: 0821-2499588, 2494890, 2494830,  
2490350, 4254700  
Mobile : 9886269275

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A676	GOVERNMENT AYURVEDIC MEDICAL COLLEGE SAYYAJI RAO ROAD,, VISHWESHWARAIAH CIRCLE,, , MYSORE - 570 021

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. AMAR D N {T00040}  
ASST.PROF  
DEPT. OF DENTAL  
SRINIVASA INSTITUTE OF DENTAL SCIENCES  
MANGALORE  
Coll Ph.:  
Mobile : 9632046902

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
A801	SDM COLLEGE OF AYURVEDA LAXMINARAYAN NAGAR,, P.O. KUTHPADY,, UDUPI TQ.,, KUTHPADY - 574 118

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.MAHESH CHANDRA .K {T00042}  
READER  
DEPT. OF DENTAL  
AECS Maaruti College of Dental Sciences & Research  
Centre  
108, Hulimavu Tank Bund Road, BTM 6th Stage, 1st  
Phase, Kammanahalli, Off Bannerghatta Road,  
Bangalore - 560 076  
Coll Ph.: 080 - 26583010 (O) 26722301  
Mobile : 9845571071 / 9845571071

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO03	M S RAMAIAH INSTITUTE OF NURSING SCIENCES, EDUCATION & RESEARCH , M S RAMAIAH NAGAR, MSRIT POST, BANGALORE - 560 054
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. RASHMI {T00043}  
READER  
DEPT. OF DENTAL  
K.G.F. College of Dental Sciences  
No. 36, D.K. Plantation,, BEML Nagar Post,, , KGF -  
563 115  
Coll Ph.: 263315,263178  
Mobile : 9886239708

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO04	THE OXFORD COLLEGE OF NURSING No. 6/9 & 6/11, 1ST CROSS, BEGUR ROAD, HONGASANDRA,, , BANGALORE - 560 068

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.A. G. Shabana {T00044}  
READER  
DEPT. OF DENTAL  
The Oxford Dental College & Hospital,  
Bommanahalli, Hosur Road, Bangalore - 560 068  
Coll Ph.: 080 - 25737275 upto 78 (O)  
Mobile : 9945660826

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO05	ST. JOHN'S COLLEGE OF NURSING ST.JOHN'S NATIONAL ACADEMY OF HEALTH SCIENCES,, BANGALORE, SARJAPUR ROAD, BANGALORE - 560 034
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Siddeswaran V {T00045}  
READER  
DEPT. OF DENTAL  
SRI RAJIV GANDHI COLLEGE OF DENTAL SCIENCE  
& HOSPITAL  
Cholanagar, Hebbal ,R T Nagar Post, Bangalore - 560  
032.  
Coll Ph.:  
Mobile : 9448559560

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO19	KEMPEGOWDA COLLEGE OF NURSING , , K R ROAD, V V PURAM, BANGALORE - 560 004

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. NANDEESH {T00046}  
ASST.PROF  
DEPT. OF MEDICAL  
Bangalore Medical College & Research Institute,  
Fort, K R Road, Bangalore - 560 002  
Coll Ph.: 26701529M 26700810  
Mobile : 9886489386

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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N092	SMT. NAGARATHANAMMA COLLEGE OF NURSING 89/90, SOLADEVANAHALLI, CHIKKABABAVAR POST, HESARAGHATTA ROAD, BANGALORE - 560 090
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VIKRAM BHAT {T00047}  
ASST.PROF  
DEPT. OF DENTAL  
A J INSTITUTE OF DENTAL SCIENCES  
N.H. 17, KUNTIKANA, MANGALORE - 575 004  
Coll Ph.: 0824-2225533, 2221466, 2221465  
Mobile : 9900434756

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N092	SMT. NAGARATHANAMMA COLLEGE OF NURSING 89/90, SOLADEVANAHALLI, CHIKKABABAVAR POST, HESARAGHATTA ROAD, BANGALORE - 560 090

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SOMNATH REDDY KUNSI {T00048}  
ASST.PROF  
DEPT. OF DENTAL  
Navodaya Dental College  
No. 6-2-139/5,, Navodayanagar,, Mantralayam Road,,  
Raichur - 584 103  
Coll Ph.: 223449, 223448,  
Mobile : 9449011202

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N157	PAVANA COLLEGE OF NURSING No. 193/4, SONDE KOPPA CIRCLE,, BYARAWESHWARA NAGAR,, NELAMANGALA, NH-4, BANGALORE RURAL DIST - 562123

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr. Pradeep B.S {T00049}  
ASSO.PROF  
DEPT. OF MEDICAL  
Rajarajeswari Medical College & Hospital  
Kambipura,, Mysore Road,, Kengeri Hobli,,  
Bangalore - 560 074  
Coll Ph.: 65661805  
Mobile : 9845452250

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N157	PAVANA COLLEGE OF NURSING No. 193/4, SONDE KOPPA CIRCLE,, BYARAWESHWARA NAGAR,, NELAMANGALA, NH-4, BANGALORE RURAL DIST - 562123

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Abhinay Sorake {T00050}  
READER  
DEPT. OF DENTAL  
A J INSTITUTE OF DENTAL SCIENCES  
N.H. 17, KUNTIKANA, MANGALORE - 575 004  
Coll Ph.: 0824-2225533, 2221466, 2221465  
Mobile : 8861351377

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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N401	FR. MULLER'S COLLEGE OF NURSING , , P.B.No.501, KANKANADY, MANGALORE - 575 002
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VINAY RAO {T00051}  
ASSO.PROF  
DEPT. OF MEDICAL  
Father Muller Medical College  
P. B. No. 501,, Fr. Muller Road,, Kankanady,,  
Mangalore - 575 002  
Coll Ph.: 2436352  
Mobile : 9972745325

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N402	DR. M V SHETTY INSTITUTE OF HEALTH SCIENCES , VIDYANAGAR, PANJIMOGURU POST, MANGALORE - 575 013

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Ramesh Kumar {T00052}  
READER  
DEPT. OF DENTAL  
Krishnadevaraya College of Dental Sciences  
Krishnadevaraya Nagar, Via Yelahanka,  
Hunasamaranahalli, Bangalore - 562 157  
Coll Ph.: 080 - 28467083, 28477083, 28467084,  
28467088  
Mobile : 9035656529

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N602	SRI DEVARAJ URS COLLEGE OF NURSING SRI DEVARAJ URS COLLEGE OF NURSING, , TAMAKA, KOLAR - 563 101

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.VENKATA BHARATH KUMAR .P {T00053}  
ASSO.PROF  
DEPT. OF DENTAL  
Vydehi Institute of Dental Sciences & Research Centre,  
No.82, EPIP Area, Nallurahalli,, K.R.Puram (H),  
Whitefield,, Bangalore - 560 066  
Coll Ph.: 28413381/82/83/84  
Mobile : 9448008696

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N602	SRI DEVARAJ URS COLLEGE OF NURSING SRI DEVARAJ URS COLLEGE OF NURSING, , TAMAKA, KOLAR - 563 101

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr.Manoj K.V. {T00054}  
READER  
DEPT. OF DENTAL  
K.G.F. College of Dental Sciences  
No. 36, D.K. Plantation,, BEML Nagar Post,, , KGF -  
563 115  
Coll Ph.: 263315,263178  
Mobile : 9916480098

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N752	SIDDAGANGA INSTITUTE OF NURSING SCIENCES AND RESEARCH CENTRE , , B H ROAD, TUMKUR - 572 102

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SATISH YADAV {T00055}  
ASST.PROF  
DEPT. OF DENTAL  
GOVERNMENT DENTAL COLLEGE,  
VICTORIA HOSPITAL PREMISES, FORT,  
BANGALORE - 560 002  
Coll Ph.:  
Mobile : 9886239708

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
T007	PADMASHREE INSTITUTE OF PHYSIOTHERAPY 23, GURUKRUPA LAYOUT,, 80 FEET ROAD,, NAGARABHAVI CIRCLE,, BANGALORE - 560 072

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. NIRANJAN P. KHADILKAR {T00056}  
ASSO.PROF  
DEPT. OF MEDICAL  
Father Muller Medical College  
P. B. No. 501,, Fr. Muller Road,, Kankanady,,  
Mangalore - 575 002  
Coll Ph.: 2436352  
Mobile : 9448296731

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

T406 LAXMI MEMORIAL COLLEGE OF PHYSIOTHERAPY  
A J TOWERS,, BALMATTA,, , MANGALORE - 575 002

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

Sd/-

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Dr. Shivashankara A.R. {T00057}  
ASSO.PROF  
DEPT. OF MEDICAL  
Father Muller Medical College  
P. B. No. 501,, Fr. Muller Road,, Kankanady,,  
Mangalore - 575 002  
Coll Ph.: 2436352  
Mobile : 9880146133

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
T409	SRINIVAS COLLEGE OF PHYSIOTHERAPY, HOTEL SRINIVAS BUILDING,, GHS ROAD,, , MANGALORE - 575 006

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SHARMILA TAPASHETI {T00058}  
ASSO.PROF  
DEPT. OF DENTAL  
Sri Dharmasthala Manjunatheshwara College of Dental  
Sciences & Hospital,  
Sattur, Davalanagar, Dharwad - 580 009.  
Coll Ph.:  
Mobile : 9742730246

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
A451	AYURVEDA MAHAVIDYALAYA HEGGERI EXTENSION,, OLD HUBLI,, , HUBLI - 580 024

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. GAVIRAJ {T00059}  
PROFESSOR  
DEPT. OF PHARMACY DEPT.  
BLDE Associations College of Pharmacy  
P.O. Box.No.40, Ashram Road,  
Coll Ph.:  
Mobile : 9449650441

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NOO1	GOVERNMENT COLLEGE OF NURSING VICTORIA HOSPITAL COMPLEX,, FORT., , BANGALORE - 560 002
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. B SHIVAKUMAR {T00062}  
ASSO.PROF  
DEPT. OF PHARMACY DEPT.  
BLDE Associations College of Pharmacy  
P.O. Box.No.40, Ashram Road,  
Coll Ph.:  
Mobile : 9008839355

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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N676	J S S COLLEGE OF NURSING , I MAIN, SARASWATHIPURAM,, , MYSORE - 570 009
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VASUDHA {T00063}  
ASST.PROF  
DEPT. OF DENTAL  
The Oxford Dental College & Hospital,  
Bommanahalli, Hosur Road, Bangalore - 560 068  
Coll Ph.: 080 - 25737275 upto 78 (O)  
Mobile : 9886253898

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A006	SRI SRI COLLEGE OF AYURVEDIC SCIENCES & RESEARCH 21ST KM, UDAYPURA POST,, KANAKAPURA ROAD,, BANGALORE SOUTH,, BANGALORE - 560 082

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SANTHOSH KUMAR {T00064}  
ASST.PROF  
DEPT. OF DENTAL  
A.M.E'S Dental College and Hospital,  
Near Govt. Polytechnic, Bijanagere Road, Raichur -  
584 103.  
Coll Ph.: 08532-240718, 240944  
Mobile : 9986243809

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
NO03	M S RAMAIAH INSTITUTE OF NURSING SCIENCES, EDUCATION & RESEARCH , M S RAMAIAH NAGAR, MSRIT POST, BANGALORE - 560 054

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. MANJUNATH GANDHAGI {T00065}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
HKE'S COLLEGE OF PHARMACY,  
MR ROAD, GULBARGA - 585 105.  
Coll Ph.: 08472-221392/232825  
Mobile : 9632326585

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO05	ST. JOHN'S COLLEGE OF NURSING ST.JOHN'S NATIONAL ACADEMY OF HEALTH SCIENCES,, BANGALORE, SARJAPUR ROAD, BANGALORE - 560 034
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. D N PATIL {T00066}  
PROFESSOR  
DEPT. OF PHARMACY DEPT.  
Soniya Education Trust College of Pharmacy  
S R Nagar, Near Microwave Tower, Dharwad  
Coll Ph.:  
Mobile : 9449029040

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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M428	SHIMOGA INSTITUTE OF MEDICAL SCIENCES, MC.GANN HOSPITAL CAMPUS,, SAGAR ROAD (B.H. ROAD),, SHIMOGA - 577201
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. KARAN BIRADAR {T00067}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
RRK Samithi College of Pharmacy  
Naubad  
Coll Ph.:  
Mobile : 9242302070

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

NO01 GOVERNMENT COLLEGE OF NURSING  
VICTORIA HOSPITAL COMPLEX,, FORT., , BANGALORE - 560 002

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. SANJAY PATIL {T00069}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
S V E T College of Pharmacy  
Kallur Road,Bidar Dist, Humanbad  
Coll Ph.:  
Mobile : 9035668458

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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N752	SIDDAGANGA INSTITUTE OF NURSING SCIENCES AND RESEARCH CENTRE , , B H ROAD, TUMKUR - 572 102
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. JAGADISH HIREMATH {T00070}  
PROFESSOR  
DEPT. OF AYURVEDA  
Rajiv Gandhi Education Society's Ayurvedic Medical  
College & Hospital,  
, , Gadag District, Ron - 582 209  
Coll Ph.: 267452  
Mobile : 9448551527

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO04	THE OXFORD COLLEGE OF NURSING No. 6/9 & 6/11, 1ST CROSS, BEGUR ROAD, HONGASANDRA,, , , BANGALORE - 560 068

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VEERABHADRA {T00071}  
ASST.PROF  
DEPT. OF HOMOEOPATHIC PHARMACY  
Government Homoeopathic Medical College  
Dr. Siddaiah Puranik Road,, Basaveshwaranagar,, ,  
Bangalore - 560 079  
Coll Ph.: 23359413, 25705235 ®  
Mobile : 9738112794

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

M503 BIDAR INSTITUTE OF MEDICAL SCIENCES,  
UDGIR ROAD, , , BIDAR - 585401

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

Sd/-

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VEERENDRA PATIL {T00072}  
READER  
DEPT. OF DENTAL MATERIALS  
HKE's S Nijalingappa Institute of Dental  
Sciences and Research,, Sedam Road,, , Gulbarga -  
585 105  
Coll Ph.: 247745, 245997, 253993 (O)  
Mobile : 9741709990

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
AO01	GOVERNMENT AYURVEDIC MEDICAL COLLEGE DHANVANTRI ROAD,, , BANGALORE - 560 009

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. UMESH ALLAD {T00073}  
LECTURER  
DEPT. OF DENTAL  
HKE's S Nijalingappa Institute of Dental  
Sciences and Research,, Sedam Road,, , Gulbarga -  
585 105  
Coll Ph.: 247745, 245997, 253993 (O)  
Mobile : 984464399

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A006	SRI SRI COLLEGE OF AYURVEDIC SCIENCES & RESEARCH 21ST KM, UDAYPURA POST,, KANAKAPURA ROAD,, BANGALORE SOUTH,, BANGALORE - 560 082

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. HEMANTH BATTUR {T00074}  
ASST.PROF  
DEPT. OF DENTAL  
KVG Dental College & Hospital  
Kurunjibagh,, Vidyanagar,, , Sullia - 574 327  
Coll Ph.: 233248,  
Mobile : 9448453088

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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A526	S D M COLLEGE OF AYURVEDA & HOSPITAL P.B. NO.164, B M ROAD,, THANNIRUHALLA,, , HASSAN - 573 201
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. BIMANNA HOKRANE {T00075}  
ASST.PROF  
DEPT. OF NURSING  
Mangala Education Trust [R]  
Mangala College of Nursing, Plot No. 1A, KIADB,  
Industrial Area, B. Katihally, B.M.Road,, , Hassan -  
573201  
Coll Ph.: 240009, 240232  
Mobile : 8897243427

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code      Centre Name with Address

A203      SV M V V SANGHAS SHRI VIJAY MAHANTESH  
AYURVEDIC MEDICAL COLLEGE  
P B NO 15,, BAGALKOT DIST., , ILKAL - 587 125

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VINODH M REDDY {T00076}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
BLDE Associations College of Pharmacy  
P.O. Box.No.40, Ashram Road,  
Coll Ph.:  
Mobile : 9341120912

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO04	THE OXFORD COLLEGE OF NURSING No. 6/9 & 6/11, 1ST CROSS, BEGUR ROAD, HONGASANDRA,, , BANGALORE - 560 068
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. V A PATIL {T00077}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
BLDE Associations College of Pharmacy  
P.O. Box.No.40, Ashram Road,  
Coll Ph.:  
Mobile : 9844164121

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
NO41	CHINAI COLLEGE OF NURSING No.9, SAPTHAGIRI MANSON, BHANU NURSING HOME ROAD, BOMMANAHALLI, BANGALORE - 560 068

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. MANJUNATH AKKI {T00078}  
ASST.PROF  
DEPT. OF AYURVEDA  
Sri Jagadguru Gavisiddeswar Ayurvedic Medical  
College  
Gavimath Campus,, , Koppal - 583 231  
Coll Ph.: 222517 (c), 221989 (H), 222162 (M)  
Mobile : 9886325907

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO12	SARVODAYA COLLEGE OF NURSING NO. 11/2, BESIDES RAHEJA PARK APARTMENTS,, AGRAHARA DASARAHALLI,, MAGADI MAIN ROAD,, BANGALORE - 560 079

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. PARAMESHWARAPPA K D {T00079}  
ASST.PROF  
DEPT. OF MEDICAL  
Bidar Institute of Medical Sciences,  
Udgir Road, , Bidar - 585401  
Coll Ph.: 228366(QH), 228356 ®  
Mobile : 7411741148

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO67	NOOR COLLEGE OF NURSING No. 5, NOOR BUILDING,, RMV II STAGE,, BHOOPASANDRA MAIN ROAD,, BANGALORE - 560 094
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. MALLIKARJUN {T00081}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
Karnataka College of Pharmacy  
No.33/2, Thirumenahalli, Hegde Nagar Main  
Road,Jakkur Post, Yelahanka Hobli, Bangalore  
Coll Ph.:  
Mobile : 9448208261/9739205393

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO59	SMT. LAKSHMI DEVI COLLEGE OF NURSING SY. NO. 128/1,, SIDDHARTHA NAGAR,, CHINTAMANI ROAD, HOSKOTE,, BANGALORE -

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. C S MADIVALAR {T00082}  
PROFESSOR  
DEPT. OF AYURVEDA  
Shri Kalidas Ayurvedic Medical College  
Shri Banashankari Road,, , Badami - 587 201  
Coll Ph.: 221003  
Mobile : 9480242869

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
-----------	--------------------------

NO41	CHINAI COLLEGE OF NURSING No.9, SAPTHAGIRI MANSON, BHANU NURSING HOME ROAD, BOMMANAHALLI, BANGALORE - 560 068
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SWETHA S NIDAVANI {T00083}  
ASST.PROF  
DEPT. OF DENTAL  
Al-Ameen Dental College  
Athani Road,, , Bijapur - 586 108  
Coll Ph.: 270355 (O), 270964 ®  
Mobile : 9743166415

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
A451	AYURVEDA MAHAVIDYALAYA HEGGERI EXTENSION,, OLD HUBLI,, , HUBLI - 580 024

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. JAYALAKSHMI M NAGOOR {T00084}  
ASST.PROF  
DEPT. OF AYURVEDA  
Kalmathada Pujyas Sri Virupaksha Shivacharya  
Ayurvedic Medical College  
Sindhanur Road,, Manvi,, Raichur Dist., Manvi - 584  
123  
Coll Ph.: 221124, M - 9845654947  
Mobile : 9739503098

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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N507	AL KAREEM COLLEGE OF NURSING H. NO. 4-601/43/1/35, BAREY HILLS,, NEAR ADARSH NAGAR RING ROAD, , GULBARGA - 585 104
------	--

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

KOKILA M {T00085}  
ASST.PROF  
DEPT. OF NURSING DEPT.  
Spurthy College of Nursing,  
No. 328, Marasur Gate,, Anekal Main Road,, Marasur  
Post, Anekal Taluk, Bangalore Dist - 562106  
Coll Ph.: 080-27827776, 27827777  
Mobile : 9591645555

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A626	A L N RAO AYURVEDIC MEDICAL COLLEGE , , CHIKMAGALUR DIST,, KOPPA - 577126

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. DAYANAND R {T00086}  
ASST.PROF  
DEPT. OF MEDICAL  
Mysore Medical College & Research Institute,  
Irwin Road,, , Mysore - 570 021  
Coll Ph.: 2520512  
Mobile : 9900076248

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
-----------	--------------------------

NO15	FLORENCE COLLEGE OF NURSING # 507 & 509, 1'D' MAIN,, 3RD BLOCK, KALYANNAGAR,, HRBR LAYOUT,, BANGALORE - 560 043
------	---

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. MAHADEVAPPA A GODI {T00087}  
ASST.PROF  
DEPT. OF NURSING DEPT.  
HKES College of Nursing  
Basaveshwar T & G Hospital, Sedam Road, ,  
Gulbarga - 585 105  
Coll Ph.: 247582, 2446670@  
Mobile : 97416934441

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A627	SRI JAGADGURU GAVISIDDESWAR AYURVEDIC MEDICAL COLLEGE GAVIMATH CAMPUS,, , KOPPAL - 583 231

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. SAVITHA S PATIL {T00088}  
ASST.PROF  
DEPT. OF AYURVEDA  
Sri Jagadguru Gavisiddeswar Ayurvedic Medical  
College  
Gavimath Campus,, , Koppal - 583 231  
Coll Ph.: 222517 (c), 221989 (H), 222162 (M)  
Mobile : 9742133553

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

E101 ESIC MEDICAL COLLEGE  
SEDAM ROAD, GULBARGA

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

Sd/-

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

POF. H V MAIL {T00089}  
PROFESSOR  
DEPT. OF PHARMACY DEPT.  
Karnataka College of Pharmacy  
No.33/2, Thirumenahalli, Hegde Nagar Main  
Road,Jakkur Post, Yelahanka Hobli, Bangalore  
Coll Ph.:  
Mobile : 9448225141

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO97	DHANVANTARI NURSING COLLEGE #41/3, VINAYAK NAGAR, NEAR CHIKKABANAVAR RAILWAY STN., HESSARGHATTA ROAD, CHIKKABANAVAR, BANGALORE NORTH, BANGALORE - 560 090

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. ASHOK PATIL {T00090}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
Karnataka College of Pharmacy  
No.33/2, Thirumenahalli, Hegde Nagar Main  
Road,Jakkur Post, Yelahanka Hobli, Bangalore  
Coll Ph.:  
Mobile : 9448947512

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO59	SMT. LAKSHMI DEVI COLLEGE OF NURSING SY. NO. 128/1,, SIDDHARTHA NAGAR,, CHINTAMANI ROAD, HOSKOTE,, BANGALORE -

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. MAHANTESH {T00091}  
PROFESSOR  
DEPT. OF AYURVEDA  
AVS Ayurveda Mahavidyalaya  
Vidyanagar,, Bagalkot Road,, , Bijapur - 586 101  
Coll Ph.: 250406 & 221350 ®  
Mobile : 8951867109

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO67	NOOR COLLEGE OF NURSING No. 5, NOOR BUILDING,, RMV II STAGE,, BHOOPASANDRA MAIN ROAD,, BANGALORE - 560 094
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. VINODH JADHAV {T00092}  
ASST.PROF  
DEPT. OF AYURVEDA  
SV M V V Sanghas Shri Vijay Mahantesh Ayurvedic  
Medical College  
P B No 15,, Bagalkot Dist., , Ilkal - 587 125  
Coll Ph.: 270518 (O), 270501  
Mobile : 7204343105

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO12	SARVODAYA COLLEGE OF NURSING NO. 11/2, BESIDES RAHEJA PARK APARTMENTS,, AGRAHARA DASARAHALLI,, MAGADI MAIN ROAD,, BANGALORE - 560 079

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. C THYAGARAJ {T00093}  
PROFESSOR  
DEPT. OF AYURVEDA  
Ayurveda Mahavidyalaya  
Heggeri Extension,, Old Hubli,, , Hubli - 580 024  
Coll Ph.: 2305422  
Mobile : 9886245072

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO24	S B COLLEGE OF NURSING , C A SITE # 21, K H B COLONY, NEAR 5TH PHASE BUS STAND,, YELAHANKA NEW TOWN, BANGALORE - 560 106
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. LINGARAJ TEGGI {T00094}  
ASST.PROF  
DEPT. OF AYURVEDA  
Shri Jagadguru Gurusiddeshwar Co - Operative  
Hospital Society's Ayurvedic Medical College,  
, Tq: Gokak, Dist: Belgaum, Ghataprabha - 591 321  
Coll Ph.: 286229  
Mobile : 9902042881

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N115	BETHAL MEDICAL INSTITUTE OF NURSING SCIENCES BETHAL MEDICAL MISSION HOSPITAL CAMPUS,, BETHAL STREET, PREETHI NAGAR, NEAR LAGGERE RING ROAD BRIDGE,, BANGALORE - 560 058

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. NEELAKANT PATIL {T00095}  
ASST.PROF  
DEPT. OF DENTAL  
A.M.E'S Dental College and Hospital,  
Near Govt. Polytechnic, Bijanagere Road, Raichur -  
584 103.  
Coll Ph.: 08532-240718, 240944  
Mobile : 9342151099

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
N507	AL KAREEM COLLEGE OF NURSING H. NO. 4-601/43/1/35, BAREY HILLS,, NEAR ADARSH NAGAR RING ROAD, , GULBARGA - 585 104

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

DR. DANDHA VINAY KUMAR {T00096}

LECTURER

DEPT. OF DENTAL

A.M.E'S Dental College and Hospital,

Near Govt. Polytechnic, Bijanagere Road, Raichur -  
584 103.

Coll Ph.: 08532-240718, 240944

Mobile : 9035002480

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
N115	BETHAL MEDICAL INSTITUTE OF NURSING SCIENCES BETHAL MEDICAL MISSION HOSPITAL CAMPUS,, BETHAL STREET, PREETHI NAGAR, NEAR LAGGERE RING ROAD BRIDGE,, BANGALORE - 560 058

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.





**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MR. RAVI K V {T00097}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
D.R.Karigowda College of Pharamcy  
Udayagiri Extension, Kuvempu Nagar, Hassan  
Coll Ph.:  
Mobile : 8970628775

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
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NO11	KTG COLLEGE OF NURSING SCIENCES HEGGANAHALLY CROSS, SUNKADAKATTE ROAD, VIA. MAGADI ROAD,, VISHWANEEDAM POST, BANGALORE - 560 091
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You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.

2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

MRS. MOHSINA {T00098}  
ASST.PROF  
DEPT. OF PHARMACY DEPT.  
Luqman College of Pharmacy  
Post Box No. 86, Behind P & T Quarters, Old Jewargi  
Road, Gulbarga  
Coll Ph.:  
Mobile : 8904588538

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
NO97	DHANVANTARI NURSING COLLEGE #41/3, VINAYAK NAGAR, NEAR CHIKKABANAVAR RAILWAY STN., HESSARGHATTA ROAD, CHIKKABANAVAR, BANGALORE NORTH, BANGALORE - 560 090

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGHHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Ranjith {T00099}  
ASST.PROF  
DEPT. OF NURSING DEPT.  
ABHAYA COLLEGE OF NURSING  
NO. 75, SURVEYAR STREET, BASAVANAGUDI  
BANGALORE - 560 004, , Bangalore - 560 004  
Coll Ph.:  
Mobile : 9964280276

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

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**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code	Centre Name with Address
A203	SV M V V SANGHAS SHRI VIJAY MAHANTESH AYURVEDIC MEDICAL COLLEGE P B NO 15,, BAGALKOT DIST., , ILKAL - 587 125

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.



**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Ph. : 080-26961930, 26961946, 26961945  
Fax. : 080-26961931 E-mail : registrar\_evaluation@yahoo.co.in

R(E)/DR(E)-I/Ex-I/PG /Oct - 2016

Date : 01-10-2016

**REPLY URGENT**

To,

Mr. Sridhar {T000100}  
ASST.PROF  
DEPT. OF NURSING DEPT.  
R R College of Nursing  
R R Educational Institutions,, # 40, Near  
Chikkabanavara Railway Staion,, Chikkabanavara,,  
Bangalore - 560 090  
Coll Ph.: 080-28391555, 55326100, 9845172776  
Mobile : 9945116447

Sir / Madam,

Sub: Post-Graduate Nursing, Ayurveda, Physiotherapy, Allied Health  
Sciences Courses theory examination during October - 2016.

~ ~ ~ ~ ~

**Appointment as OBSERVER CUM SQUAD**

I am happy to inform you, that the Hon'ble Vice-Chancellor is pleased to appoint you as OBSERVER CUM SQUAD in connection with the conduct of Post Graduate Theory examination scheduled from 03.10.2016 TO 13.10.2016 in the following centre.

Cntr Code Centre Name with Address

Cntr Code	Centre Name with Address
A401	K V G AYURVEDA MEDICAL COLLEGE & HOSPITAL AMBATEDKA,, KURUNJIBAG,, , SULLIA - 574 327

You are requested to contact the Principal and Chief Superintendent of the said examination centre and get yourself acquainted with the assigned work.

Your co-operation to conduct the examination in a smooth manner is solicited.

Your's faithfully,

**Sd/-**

**Dr. M K Ramesh**  
**Registrar (Evaluation)**

Encl: 1. Observer / Squad - Power and functions / Daily Report Check List (Refer RGUHS website).

Note: 1. Examination work is mandatory.  
2. In case, if you have previously done your duties as "Observer/Squad" in the same centre, you are hereby directed to decline this appointment and intimate this office forthwith.