



2.4.2 – DVV- Copies of Guide-ship letters or authorization of research guide's provided by the university

YEAR 2016-2017 (Total number of teachers – 8)

YEAR	SR NO.	NAME OF STAFF /PHD	HD PAGE NO. OF SUPPORTING			
		GUIDE	DOCUMENT			
	1	Dr. Girish Parmar	Page 6			
	2	Dr. Sunita Garg	Page 7			
	3	Dr. Rupal J. Shah	Page 9			
2016 - 17	4	Dr. Neeta Bhavsar	Page 10			
	5	Dr. Mahesh Chavda	Page 11			
	6	Dr. Jigna Shah	Page 12			
	7	Dr. Shilpa Parikh	Page 13			
	8	Dr. Jyoti Chavda	Page 17,18 & 19			





2.4.2 - full-time teachers for recognition as PhD guides during the last five years

YEAR 2017-2018 (Total number of teachers – 8)

YEAR	SR NO.	NAME OF STAFF /PHD GUIDE	PAGE NO. OF SUPPORTING DOCUMENT
	1	Dr. Girish Parmar	Page 6
	2	Dr. Sunita Garg	Page 7
	3	Dr. Rupal J. Shah	Page 9
2017 - 18	4	Dr. Neeta Bhavsar	Page 10
	5	Dr. Mahesh Chavda	Page 11
	6	Dr. Jigna Shah	Page 12
	7	Dr. Shilpa Parikh	Page 13
	8	Dr. Falguni Mehta	Page 14





2.4.2 - full-time teachers for recognition as PhD guides during the last five years

YEAR 2018-2019 (Total number of teachers – 9)

YEAR	SR NO.	NAME OF STAFF /PHD	PAGE NO. OF SUPPORTING			
	SICTIO.	GUIDE	DOCUMENT			
	1	Dr. Girish Parmar	Page 6			
	2	Dr. Sunita Garg	Page 7			
	3	Dr. Geeta Asthana	Page 8			
2018- 19	4	Dr. Rupal J. Shah	Page 9			
	5	Dr. Neeta Bhavsar	Page 10			
	6	Dr. Mahesh Chavada	Page 11			
	7	Dr. Jigna Shah	Page 12			
	8	Dr. Shilpa Parikh	Page 13			
	9	Dr. Falguni Mehta	Page 14			





2.4.2 - full-time teachers for recognition as PhD guides during the last five years

YEAR 2019-2020 (Total number of teachers – 9)

YEAR	SR NO.	NAME OF STAFF /PHD GUIDE	PAGE NO. OF SUPPORTING DOCUMENT
	1	Dr. Girish Parmar	Page 6
	2	Dr. Sunita Garg	Page 7
	3	Dr. Geeta Asthana	Page 8
	4	Dr. Rupal J. Shah	Page 9
2019 - 20	5	Dr. Neeta Bhavsar	Page 10
	6	Dr. Mahesh Chavada	Page 11
	7	Dr. Jigna Shah	Page 12
	8	Dr. Shilpa Parikh	Page 13
	9	Dr. Falguni Mehta	Page 14





2.4.2 - full-time teachers for recognition as PhD guides during the last five years

YEAR 2020-2021 (Total number of teachers – 11)

YEAR	SR NO.	NAME OF STAFF /PHD GUIDE	PAGE NO. OF SUPPORTING DOCUMENT
	1	Dr. Girish Parmar	Page 6
	2	Dr. Sunita Garg	Page 7
	3	Dr. Geeta Asthana	Page 8
	4	Dr. Rupal J. Shah	Page 9
2020 - 21	5	Dr. Neeta Bhavsar	Page 10
	6	Dr. Mahesh Chavda	Page 11
	7	Dr. Jigna Shah	Page 12
	8	Dr. Shilpa Parikh	Page 13
	9	Dr. Falguni Mehta	Page 14
	10	Dr. Shantanu Choudhari	Page 15
	11	Dr. Sonal Anchlia	Page 16

देविकोन : २५७०१७४१-२५७००७४२-४७

२५३००१२५ भने २५३००५५४,

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ટેલિગામ : યુનિગુજરાત



nn : (017) 20202024

Phone: 26301341-26300342-43,

26300126 & 26300664, 26300834

Crams : UNIGUJARAT

ું ગુજ રાત્ત યુ નિ-વૃક્ષિ ટી GUJARAT: UNIVERSITY

ગુજરાત યુનિવર્સિટી કાયલિય, પોસ્ટ બોક્સ નં. ૪૦૧૦ નવરંગપુરા, અમદાવાદ-૩૮૦ ૦૦૯.

OFFICE OF THE GUJARAT UNIVERSITY
POST BOX NO. 4010
NAVRANGPURA,
AHMEDABAD-380 009 (INDIA).

No. / P.G. / B 2 19 3 /2006

Date 37 - 1-2006

fo. Dr. Girish J. Parmar Govt. Dental College, Civil Hospital Campus, Asharva, Ahmedabad-16

Sub:-Recognition as a Ph. D. Guide in the subject of Conservative Dentistry.

Sir,

Please refer to your application dated 25-1-2005 on the subject cited above. In this connection, under orders of the Vice-Chancellor, I am, pleased to inform you that you have been recognised as a Ph. D. Guide of this University, in the subject of Conservative Dentistry.

It is for your kind information that as per P.G. Rule 25 of this University your are entitle to enroll the students in the following manners:

- .1 Maximum to a limit of three in all at the beginning. And after the result of the one candidate has been declared successful, maximum to a limit of four.
- 2. After the result of two have been declared successful five of seven as the case may be.

Yours faithfully.

of Registra

Copy forwarded with compliments to:

14 The Dean, Govt, Dental College, Civil Hospital Compus, Asharva, Alimedabad-16

> Copy to C.C. of Ph. D. Registration, Post-Graduate Section.

En jo

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: (૦૭૯) ૨૬૩૦૨૬૫૪

ટ્રેલિફોન : ૨૬૩૦૧૪૧-૨૬૩૦૦૩૪૨-૪૩

૨૬૩૦૦૧૨૬ અને

29300998

ટેલિગ્રામ : યુનિ.ગુજરાત



: (079) 26302654 Tele Phone : 26301341-26300342

26300126 & 26300664

Tele Gram : UNIGUJARAT

गु ४ रात यु नि व र्सि टी GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાયોલય પોસ્ટ બોક્સ નં. ૪૦૧૦ નવરંગપુરા અમદાવાદ - ૩૮૦ ૦૦૯ OFFICE OF THE GUJARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA, AHMEDABAD - 380 009 (INDIA)

No /PG / Medi 309 (2/2015

Date- [8/08/2015

To. Dr. Sunita A. Garg Government Dental College, Civil Hospital Compound, Asarva. Ahmedabad - 16

Sub:- Recognition as the Ph,D guide in the Conservative Dentistry

Please refer to your application dated 26-09-2014 on subject cited above. In the Sir. connection, under the orders of the Vice-Chancellor, I am ,please to inform you that you have been recognized as a Ph.D. Guide of this University as per O.Ph.D.5(5.4) in the subject of Conservative Dentistry.

It is for your kind information that as per Ph.D.Programme, Rules, Regulations and Ph.D.Ordinances (O.Ph.D.6.1(i)(a)) of this university you are entitles in enroll the students in the manners.

EST

Yours Faithfully

Copy forwarded with compliments to:

2 The Dean, Government Dental College, Civil Hospital Compound, Asarva, Ahmedabad - 16

& Hospital, Ahmedabad.

: (७७७) २५३०२५५४ रेविशेन : २५३०१४१-२५३००३४२-

રક૩૦૦૧૨૬ અને

25300558

ટેલિગ્રામ : યુનિ.ગુજરાત



: (079) 26302654 Tele Phone : 26301341-26300342 26300126 & 26300664

Tele Gram : UNIGUJARAT

ગુજરાત યુનિવર્સિટી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કત્યલિય પોસ્ટ બો સ નં. ૪૦૧૦ નવરંગપુરા અમદાવાદ - ૩૮૦ ૦૦૯ OFFICE OF THE GUJARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA. AHMEDABAD - 380 009 (INDIA)

No/PG/Medi / 51318

Date - 15 9/2018

Dr.Geeta Asthana Professor of Conservative Dentistry& Endodontics Govt Dental College & Hospital

conservative Dentistry Ahmedabad Sub: Recognition as the Ph.D Guide in the subject of Ophthalmology (Faculty

of Medicine)

Sir. Kindly refer to your application dated 9-7-2018 .In that connection, we are pleased to inform you that as per order of the Hon. Vice Chancellor you are being recognized as a Ph.D Guide of this University as per O.Ph.D.5(5.4)&O.Ph.D.6(i)(a) in the subject of Ophthalmology (Feculty of Medicine)

Kindly note that as per Ph.D.Ordinance (o.Ph.D.6(i)(a)) of this university you

are entitled to enroll Ph.d students in the manner.

Yours Faithfully

Copy forwarded with comliments to:

1.The Dean.

Govt Dental College & Hospital

Ahmedabad

2.Copy to C.C.of Ph.D, Registrestion P.G. Section

: (०७८) २५३०२५५४

देखिकोन : २९३०१४१-२५३००३४२-४३

૨૬૩૦૦૧૨૬ અને ૨૬૩૦૦૬૬૪

ટેલિગ્રામ : યુનિ.ગુજરાત



Fax : (079) 26302654 Tele Phone : 26301341-26300342

26300126 & 26300664

Tele Gram : UNIGUJARAT

ગુજરાત યુનિવિસીંટી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાર્યાલય પોસ્ટ બોકસ નં. ૪૦૧૦ નવરંગપુરા અમદાવાદ - ૩૮૦ ૦૦૯ No /PG / Medi /60 137/2015 OFFICE OF THE GUIARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA, AHMEDABAD – 380 009 (INDIA)

Date- // /08/2015

To,
Dr. Rupal J. Shah
Government Dental College,
Civil Hospital Compound,
Asarva,
Ahmedabad - 16

Sub:- Recognition as the Ph,D guide in the Prosthetic Denstitry

Sir.

Please refer to your application dated 26-09-2014 on subject cited above. In the connection, under the orders of the Vice-Chancellor, I am ,please to inform you that you have been recognized as a Ph.D, Guide of this University as per O.Ph.D.5(5.4) in the subject of Prosthetic Denstitry.

It is for your kind information that as per Ph.D.Programme, Rules, Regulations and Ph.D.Ordinances (O.Ph.D.6.1(i)(a)) of this university you are entitles in enroll the students in the manners.

Yours Faithfully

Registrar

Copy forwarded with compliments to:

The Dean, Government Dental College, Civil Hospital Compound, Asarva, Ahmedabad - 16

87.9" (est

Inward No. 6016
Datel: 313
Govt. Dental College
& Hospital, Ahmedabad.

: (09e) 29302948

टेबिकोन : २५३०१४१-२५३००**३**४२-४३

રક૩૦૦૧૨ક અને ૨૬૩૦૦૬૬૪

ટેલિગ્રામ : યુનિ.ગુજરાત



Fax : (079) 26302654 Tele Phone : 26301341-26300342

26300126 & 26300664

Tele Gram : UNIGUJARAT

ગુજરાત યુનિવર્સિટી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાર્યાલય પાસ્ટ બોક્સ નં. ૪૦૧૦ નવરંગપુરા અમાવા - ૩૮૦ ૦૦૯

Ahmedahad.

OFFICE OF THE GUJARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA, AHMEDABAD – 380 009 (INDIA)

No /PG / Medi /6944 /2013

Date- 2 309/2013

Dr. Paci Nita V Bhavsar
Professor&Head,
Periodontics,
Govt.Dental College & Hospital,
Civil Hospital Campuds, Asarva

Sub:- Recognition as the Ph,D guide in the subject of Periodontics, (Faculty of Medicine)

Sir.

Please refer to your application dated 15-2-2013 on subject cited above. In the connection, under the orders of the Vice-Chancellor, I am ,please to inform you that you have been recognized as a Ph.D. Guide of this University as per O.Ph.D.5(5.4) in the subject of Periodontics,, (Faculty of Medicine)

It is for your kind information that as per Ph.D.Programme, Rules, Regulations and D Ordinances (O.Ph.D.6.1(i)(a)) of this university you are entitles in enroll the students in the nanners.

Yours Faithfully Kadra RK For Registrar

Copy forwarded with compliments to:

- The Dean, Govt.Dental College & Hospital, Civil Hospital Campuds, Asarva Ahmedabad
- 2. Copy to C.C.of Ph,D. registration P.G.Section
- 3. Dean medical faculty

हे*स्स*ः (०७८)२६३०२*६५*४

2801 : 15304384-25300161 163

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FAX : (079) 26302654

Phone: 26201341-26300342,

-342, 26300126 & 26300664

ગુજરાત યુનિવર્સિટી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાર્યાલય. પોસ્ટ લોક્સ નં. ૪૦૧૦ નવરંગપુરા, અમદાવાદ-૩૮૦ ૦૦૯

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OST BOX NO.4010, NAVRANGPURA,

AHMEDABAD - 380 009.

No/PG/Medi/C4067/2015

Date- 10/2015

To,

Dr. Mahesh G. Chavda B/703, Vasant Vihar, Dafnala, Shahibaug, Ahmedabad

Sub :- Recognition as the Ph.D guide in the Periodontia

Sir.

Please refer to your application dated 03-09-2015 on subject cited above. In the connection, under the orders of the Vice-Chancellor, I am please to inform you that you have been recognized as a Ph.D, Guide of this University as per O.Ph.D.5(5.4) in the subject of Periodontia.

It is for your kind information that as per Ph.D Programme, Rules, Regulations and Ph.D. Ordinances (O.Ph.D.6.1(i)(a)) of this university you are entitles in enroll the students in the manners.

Yours mithful

Copy Forwarded with compliments to:

The Dean,
 Govt. Dental College, Civil Hospital Campus,
 Asarva, Ahmedabad

: (050) = 3 30 E 948

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દેતિયામ : યુનિ.ગુજરાન



Fax : (079) 26302654 Tele Phone : 26301341-26300342 26300126 & 26300664

I cle Gram : UNIGUJARAT

ગુજરાત યુનવિસ્ટિી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાર્યાલય પોસ્ટ બોક્સ નં. ૪૦૧૦ નવરંત્રપુરા અમદાવાદ - ૩૮૦ ૦૦૯

OFFICE OF THE CLIARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA. AHMEDABAD - 380 009 (INDIA)

No PG / Medi /30911 /2015

Date- 18 /08/2015

To.

Dr. Jigna S Shah Government Dental College. Civil Hospital Compound. Asarva. Ahmedabad - 16

Sub:- Recognition as the Ph.D guide in the Oral Medicine & Radiology.

Sir.

Please refer to your application dated 09-06-2015 on subject cited above. In the connection, under the orders of the Vice-Chancellor, I am .please to inform you that you have been recognized as a Ph.D, Guide of this University as per O.Ph.D.5(5.4) in the subject of Oral Medicine & Radiology.

It is for your kind information that as per Ph.D.Programme, Rules, Regulations and Ph.D.Ordinances (O.Ph.D.6.1(i)(a)) of this university you are entitles in enroll the students in the manners.

Yours Faithfully

Ic Registron

Copy forwarded with compliments to:

The Dean,
Government Dental College,
Civil Hospital Compound,
Asarva,

Ahmedabad - 16

22.09.15

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Date! 11-9

& Hospital, minedabad.

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केडस : (०७८)२५३०२५५४

देखिशोन : २९३०१३४१-२५३००३४२-३४३

२९३००१२९ अने २९३००५९४



FAX : (079) 26302654 Phone : 26301341-26300342,

-342, 26300126 & 26300664

ગુજરાત યુનિવર્સિટી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાર્યાલય. પોસ્ટ બોક્સ નં. ૪૦૧૦

નવરંગપુરા, અમદાવાદ-૩૮૦ ૦૦૯ No/PG/Medi/ 6843 /2015 OFFICE OF THE GUJARAT UNIVERSITY
POST BOX NO.4010, NAVRANGEURA,

AHMEDABAD - 380 009.

Date- 7/10/2015

To, Dr. Shilpa J. Parikh 407, Shravasti Appt, B/H Suvidha Shopping Centre, Jain Nagar, Paldi, Ahmedabad

Sub :- Recognition as the Ph.D guide in the Oral Medicine & Radiology

Sir,

Please refer to your application dated 25-08-2015 on subject cited above. In the connection, under the orders of the Vice-Chancellor, I am please to inform you that you have been recognized as a Ph.D, Guide of this University as per O.Ph.D.5(5.4) in the subject Oral Medicine & Radiology.

It is for your kind information that as per Ph.D Programme, Rules, Regulations and Ph.D. Ordinances (O.Ph.D.6.1(i)(a)) of this university you are entitles in enroll the students in the manners.

Yours Flithfully Registrar

Copy Forwarded with compliments to:

1 The Dean, Govt. Dental College, Civil Hospital Campus, Asarva, Ahmedabad

ટેલિકોન : ૨**૬૩૦૧૪૧-૨**૬૩૦૦૩૪૨-૪૩

૨૬૩૦૦૧૨૭ અને ૨૬૩૦૦૬૬૪

ટેલિગ્રામ : યુનિ.ગુજરાત

Tele Phone : 26301341-26300342

26300664

UNIVERSITY

Date- 21 /12/2017

POST BOX NO. 4010

NAVARANGPURA,

Tele Gram : UNIGUJARAT

OFFICE OF THE GUJARAT

AHMEDABAD - 380 009 (INDIA)

26300126 &

યુનિવર્સિટી ગુજ રાત GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી ાર્યાલય પોસ્ટ બો સ નં. ૪૦૧૦ નવરંગપુરા અમાવા - ૩૮૦ ૦૦૯

No /PG / Medi

/2017

To,

Dr. Falguni N Mehta

Professor&Head,

Periodontics,

Govt.Dental College & Hospital,

Ahmedabad.

Sub:- Recognition as the Ph.D guide in the subject of Orthodontics.

Sir,

Kindly refer to your application dated 14-8-2017. In that connection, I am please to inform you that as per order of the Hon. Vice chancellor you are being recognized as a Ph.D Guide of this University as per O.Ph.D.5(5.4) & O.ph.D.6(i)(a) in the subject of Orthodontics.

Kindly note that as per Ph.D.Ordinance (O.Ph.D.6.1(i)(a)) of this university you are entitled to enroll the ph.d students in the manner.

Yours Faithfully

Copy forwarded with compliments to:

- 1. The Dean, Govt.Dental College & Hospital, Ahmedabad.
- 2. Copy to C.C of Ph,D,Registration P.G.Section

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ટેલિગ્રામ : યુનિ.ગુજરાત



Fax

: (079) 26302654

Tele Phone : 26301341-26300342 26300126 & 26300664

Tele Gram : UNIGUJARAT

गुकरात युनिवर्सिटी GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી- કાર્યાલય પોસ્ટ બોક્સ નં. ૪૦૧૦ નવરંગપુરા અમદાવાદ - ૩૮૦ ૦૦૯

OFFICE OF THE GUJARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA, AHMEDABAD - 380 009 (INDIA)

No /PG / Medi 44 4 132 /2020

Date- 29

To, Dr.Shantanu R.Choudhari, Govt' Dental College New civil Hospital Campus. Asarva Ahmedabad.16

> Sub:- Recognition as the Ph.D guide in the subject of - Pediatric & Preventive Dentistry (Faculty of Medicine)

Sir,

Kindly refer to your application dated 18/12/2019 In that connection, I am please to inform you that as per order of the Hon. Vice chancellor you are being recognized as a Ph.D Guide of this University as per O.Ph.D.5(5.4) & O.ph.D.6(i)(a) in the subject of - Pediatric & Preventive Dentistry .(Faculty of Medicine)

Kindly note that as per Ph.D.Ordinance (O.Ph.D.6.1(i)(a)) of this university you are entitled to enroll the ph.d students in the manner.

Yours Faithfully

Deputy Registrar

Copy forwarded with compliments to:

1. The Dean, Govt' Dental College New civil Hospital Campus. Asarva Ahmedabad.16

2. Copy to C.C of Ph,D,Registration P.G.Section

imperdiso. 03/06/2000

Francisco Committee of the Committee of

: (0૭૯) ૨૬૩૦૨૬૫૪ ટેલિફોન: ૨૬૩૦૧૪૧-૨૬૩૦૦૩૪૨-૪૩ ૨૬૩૦૦૧૨૬ અને ૨૬૩૦૦૬૬૪ ટેલિગ્રામ : યુનિ.ગુજરાત



Fax : (079) 26302654 Tele Phone : 26301341-26300342 26300126 & 26300664

Tele Gram : UNIGUJARAT

ગુજરાત યુનિવર્સિટી GUJARAT UNIVERSITY

ગુજરાત યુનિવર્સિટી કાર્યાલય પોસ્ટ બો સ નં. ૪૦૧૦ નવરંગપુરા અમદાવાદ - ૩૮૦ ૦૦૯ No/PG/Medi /3870 /2018

OFFICE OF THE GUJARAT UNIVERSITY POST BOX NO. 4010 NAVARANGPURA, AHMEDABAD – 380 009 (INDIA)

Date - 16 / 10/2018

To,
Dr.Sonal Anchalia
Professor & HOD Oral & Maxillofacial Surgery
Govt Dental College & Hospital
Ahmedabad

Sub: Recognition as the Ph.D Guide in the subject of Oral & Maxillofacial Surgery (Faculty of Medicine)

Sir.

Kindly refer to your application dated 6-6-19. In that connection, we are pleased to inform you that as per order of the Hon. Vice Chancellor you are being recognized as a Ph.D Guide of this University as per O.Ph.D.5(5.4)&O.Ph.D.6(i)(a) in the subject of Oral & Maxillofacial Surgery (Faculty of Medicine)

Kindly note that as per Ph.D.Ordinance (o.Ph.D.6(i)(a)) of this university you are entitled to enroll Ph.d students in the manner.

Yours Faithfully

Off.Registarar

Copy forwarded with comliments to:

1. The Dean,

Govt Dental College & Hospital

Ahmedabad

2.Copy to C.C.of Ph.D, Registrestion P.G. Section

GUJARAT UNIVERSITY

Regn. No: 7535

Registration Date: 20-09-2016



Fee Receipt No: 5350 Guide: Dr. Jyoti Chawda

Serial No:285 Faculty: Medical

CERTIFICATE OF REGISTRATION FOR Ph. D. DEGREE

Certified that <u>Rupakar Pratik Vinay</u> has registered himself / herself as a post graduate student of the University working for the Degree of Ph. D. in the subject of <u>Oral Pathology</u> and he/ she shall submit his/ her thesis latest by <u>20-09-2021</u>. The topic of Research is as follows:

A study of histopathologic changes in follicle of impacted mandibular third molar.

Ahmedabad

Gujarat University

Form II

Application for title clearance

(To be forwarded through the Head of Department/Institution of Research)

1. Faculty	MEDICAL
	ORAL PATHOLOGY & MICROBIOLOGY
2. Subject :	
3. Broad area of research :	ODONTOGIENIC LESIONS
3. Broad area of research .	USTOCIATED WITH TMPACTED
	THIRD MOLAR
	A STUPY OF HISTOPATHOLOGIC
4. Title of the thesis :	CHANGES IN FOLLICLE OF
То	IMPACTED MANDIBULAR
The Registrar	THIRD MOLAR.
Gujarat University	
Ahmedabad 380009	
Dear Sir	
I am submitting herewith my proposal	for title clearance of my Ph.D. thesis. The required
details are as follows:	
	DUDGU OG PRATIK VINJAY
Name in full (in Capital Letters): (Beginning with Surname, if any)	RUPAKAR PRATIK VINAY
Yours faithfully,	
Now.	
bear	
(Applicant)	
Date: 07/09/2016	Place: AHMEDABAD
Name of the Guide: DR. JYOTI CH	AWDA (Signature) (shawdos
Date : : Encl: Proposal (8 copies)	V

RUPAKAR Sex MALE Male/Female Name PRATIK Race and HINDU Religion Father's/ Husband's name VINAT Fee Receipt No. Date & Amount Residential Address BUNGLOWS, POR - KUDOM Pack of ligibility and the number of the provisional or final eligibility certificate issued No. The Name of the Institution where the applicant proposes to work: AND FORMAL COLLEGE & HOLFITAL, AHMERASAD The full title of the Problem of Research: in which Language the Synopsis & thesis will be submitted: A STUDY OF HISTOPATHOLDUL CHANGES TAN FOLLIGLE OF IMPACTED MANDLOUGH LANGUAGE: FULLISH EDUCATIONAL QUALIFICATIONS The examination for the Master's degree passed by the applicant with the date of passing, the name of the University proposes to work in the University optional subjects, if any, and the class obtained be mentioned. Name of the Year University Subject's Class Examination Masser's degree passed by the applicant with the date of passing, the name of the University optional subjects, if any, and the class obtained be mentioned. Name of the Year University Subject's Class Examination Masser's degree passed by the applicant with the date of passing, the name of the University optional subjects, if any, and the class obtained be mentioned. Present No. of students registered and Code No. of Students registered Registere		PRATIC	CULARS O	FTH	E CANDIDAT	re		
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Address BUNDLEWS, POR-KUDASH ROAD, KUDASAM, ROAD, KUDASAM, LANDRIDAGAM If Telephone No. (R) .079. 2340.0214 (O) 22. 373.33.39724 The Name of the Institution where the applicant proposes to work: GOUT. SENTAL COLLEGE & HOSTITAL. ATMEDAGAM The full title of the Problem of Research: in which Language the Synopsis & thesis will be submitted: A STUDY OF HISTOPATHOLUGIC CHANGES IN FOLLICLE OF IMPACTED MANDIBULAT THIRD MOLAR LANGUAGE: FOLISH EDUCATIONAL QUALIFICATIONS The examination for the Master's degree passed by the applicant with the date of passing, the name of the University, optional subjects, if any, and the class obtained be mentioned. Name of the Perblish Present No. of students registered and Working under a teacher Gignature of the University Teacher under Whom the applicant ryposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature of the University Teacher under CDR JYOTE CHANDAY whom the applicant proposes to work). Gignature and Stamp of the Director/Principal of the Institution where the teacher is attached) Date: 07/99/16 Checked By:		PAGIV						
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