

**Dr. NTR UNIVERSITY OF HEALTH SCIENCES, A.P., VIJAYAWADA-8**



Ref. No.3649/E3/BDS/Exams/2020-1

Date:02 /12/2020

To,  
THE PRINCIPAL,  
Mallareddy Inst of Dental Sciences  
HYDERABAD

Sir,

Sub: Dr. NTR UHS - 2<sup>ND</sup> BDS November, 2020 Practical Examinations - Change of centre informed - Reg.

\* \* \* \*

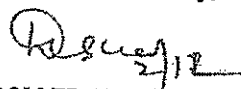
I am by direction to inform you to arrange to conduct the Practical Examinations for 2<sup>ND</sup> BDS November, 2020 Practical Examinations students of (1) Meghana Inst of Dental Sciences, Nizambad (2) Sri Balaji Dental College, Hyderabad (3) Mallareddy Dental College for Women, Hyderabad at your College, along with your college students as detailed below.

PRACTICAL EXAM DATES	SUBJECT	NO OF CANDIDATES APPEARING
07-12-2020*	PHARMACOLOGY	9
08-12-2020*	PATHOLOGY & MICROBIOLOGY	7
09-12-2020	DENTAL MATERIALS	4

I request your kind cooperation for smooth conduct of Practical exams to the students of the above colleges at your college.

This is for your information and necessary action.

Yours Sincerely,

  
CONTROLLER OF EXAMINATIONS

*2/12/2020*

Copy to the Principal,  
(1) Meghana Inst of Dental Sciences, Nizambad  
(2) Sri Balaji Dental College, Hyderabad  
(3) Mallareddy Dental College for Women, Hyderabad

With a kind request to send 3<sup>rd</sup> BDS Students Nov, 2020 exam going students of Your college to do practicals along with students of Mallareddy Inst of Dental Sciences, Hyd on the above said dates