



Sr. No. Prof. 2K22 1061670

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT - 2023

Class/Course : B.B.S. - IVth Prof.

Candidate's Name : AJAY SINGH

Roll No. : 7926006

Parent's Name : RAGHAV PRASAD SINGH / MALA SINGH

Enrol No. : M 10816789

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	20	10		100
ORTHODONTICS	016		40	15	09	67	69	06	75	142
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		20	17	08	45	45	06	51	96
GRAND TOTAL		400				238				

Ch. Charan Singh
13/03/24
FAILED IN 017

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 07/03/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.S. University Meerut

[Signature]
Principal



Sr. No. Prof. 2K22 1061664

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

01.10.2023

Class/Course : B.D.S. - 10th Prof.

Candidate's Name : SAURABH SINGH

Roll No. : 129909057

Parent's Name : JAGRAT SINGH / SANTOSH KUMARI

Enrol No. : M 1001571

Institution's Name : T.D.S.F., KAGRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	MIN MARKS	THEORY			PRACTICAL				
				TH	ORAL	INTASS	TOT	E.TOT			
				70	20	10	100	50	100		
PROSTHODONTICS	011			20	10	08	*43	75	08	83	*126
CONSERVATIVE DENTISTRY & ENDODONTICS	012			28	17	08	54	53	08	61	119
PERIODONTICS	013			20	10	09	56	55	09	64	120
ORAL SURGERY & ANEAESTHESIA	014			23	17	08	*48	57	08	65	*113
PERIODONTICS	015			37	17	08	62	52	08	60	102
ORTHODONTICS	016			38	18	09	65	60	08	76	141
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017			31	18	09	54	45	08	53	109
PUBLIC HEALTH DENTISTRY	018			20	10	09	50	57	07	44	114
		MAX. MARKS	MIN. MARKS	MARKS OBTAINED			RESULT				
GRAND TOTAL		1600	600	760			FAILED				
							011 014				

Shawar
27/3/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date :

07/01/24

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1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061678

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

01.11.2023

Class/Course : B.D.S. - 1st Prof.

Candidate's Name : ANUETA SINGH

Roll No. : 2224005

Parent's Name : JITENDER AVTAR & KUSHUM LATA

Enrol No. : M 900006

Institution's Name : B.D.S.I., KATRGHAD, CHAZIAPAD

SUBJECT	CODE NO.	MAX MARKS	MIN MARKS	THEORY			PRACTICAL			G.TOT	
				TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
				70	20	10	100	50	10	100	200
PROSTHODONTICS	011			42	12	00	*34	70	08	78	*110
PERIODONTICS	012			25	12	00	51	50	00	50	109
ORTHODONTICS	013			19	18	09	*46	65	06	71	*117
GRAND TOTAL		600	300				338				710
											011 012

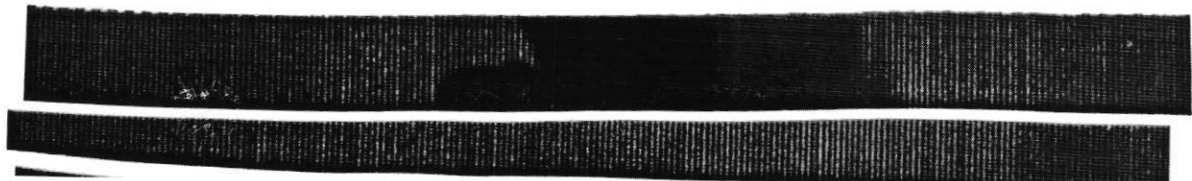
In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/11/2023

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE <i>[Signature]</i>
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut



Department of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061676

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

001-2023

Class/Course : P.O.S. - IVth Prof.

Candidate's Name : SAURABH ANAND

Roll No. : 995677

Parent's Name : BHUPENDRA PRASAD YADAV / MUNDRIKA DEVI

Enrol No. : M 10042652

Institution's Name : I.D.S.T. - KAIRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	GR	INTASS	PT	CL	INTASS	PT	GLT
			70	20	10	100	20	10	100	200
PROSTHODONTICS	011		15	14	08	*37	60	08	60	*100
CONSERVATIVE DENTISTRY & ENDODONTICS	012		26	17	07	50	47	06	53	104
PERIODONTICS	013		22	18	08	*48	46	08	54	*100
ORAL SURGERY & ANEAESTHESIA	014		22	18	08	*48	53	08	61	*109
PERIODONTICS	017		27	16	08	51	46	07	53	104
OROPROPHYLICS	016		29	17	09	54	60	06	66	120
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		24	18	07	*49	45	08	53	*100
PUBLIC HEALTH DENTISTRY	018		23	18	09	50	47	07	54	104
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1300	800	849	FAILED				
						011				
						013				
						016				
						017				

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date: 09/01/24

CHECKED BY:	
1. FULL SIGNATURE AVALHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061675

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT.-2022



Class/Course : B. D. S. - IVth Prof.

Candidate's Name : SAIMA

Roll No. : 9906068

Parent's Name : ANSARI / DANAR DANAR

Enrol No. : M 10848: 40

Institution's Name : I. D. S. I. - KANUNJ - GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL					
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT	
			20	20	10	100	90	10	100	200	
PROSTHODONTICS	011		15	14	08	*37	70	08	78	*115	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		13	17	07	*37	48	06	54	*91	
PEDODONTICS	013		17	18	08	*43	50	08	58	*101	
ORAL SURGERY & ANAESTHESIA	014		26	17	08	51	57	08	65	116	
PERI-IMPLANT	015		27	16	08	51	46	07	53	104	
ORAL BIOMATERIALS	016		24	10	05	51	59	06	65	115	
ORAL MEDICINE - DIAGNOSIS & RADIOLOGY	017		10	10	08	*40	46	06	52	*92	
PUBLIC HEALTH DENTISTRY	018		25	18	07	52	47	07	54	106	
GRAND TOTAL		1600	MIN. MARKS			890	MARKS OBTAINED			841	RESULT
011 012 013 017											

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 02/01/23

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1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE AVADHESH KUMAR FULL NAME

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C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061674

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT. 2023

Class/Course : B.D.S. - IVth Prof.



Name : NIBEDITA PANDA

Roll No. : 2023012

Name : PURNA CHANDRA PANDA / SARTIJI PRAVA PANDICHAH

Enrol No. : M 12345678

Institution's Name : T.D.S.T., KAGRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	MIN MARKS	THEORY			PRACTICAL				
				TH	ORAL	INTASS	TOT	LI.I	INTASS	TOT	G.TOT
				70	20	10	100	50	10	100	200
ORTHODONTICS	011			24	14	08	46	70	08	78	124
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017			35	17	08	60	47	05	52	112
GRAND TOTAL		400	200				236	PASS			

Nibedita Panda (08/04/24)

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 09/01/24

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1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061674

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

01.04.2023

Class/Course : B.D.S. IVth Prof.

Candidate's Name : NIBEDITA PANDA

Roll No. : 9221059

Parent's Name : PURNA CHANDRA PANDA / SABITRI PRAVA DANDICHAH

Enrol No. : M 10038231

Institution's Name : I.D.S.T., KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G. TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
PROSTHODONTICS	011		70	20	10	100	90	10	100	200
						50			50	100
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		24	14	08	46	70	08	78	124
			35	17	08	60	47	05	52	112
GRAND TOTAL		400				236				PASS

Nibedita Panda (08/04/24)

discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.

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1. <u>AVADHESH KUMAR</u> FULL SIGNATURE FULL NAME	2. <u>HARISH KUMAR</u> FULL SIGNATURE FULL NAME

[Signature]
Controller of Examination
 Institute of Dental Studies & Technologies
[Signature]
Principal



Sr. No. Prof. 2K22 1061672

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

07/01/2024



Class/Course : B.D.S. - 1stth Prof.

Candidate's Name : HARSHIT SAINI

Roll No. : 9981037

Parent's Name : MANOJ KUMAR / SEEMA SAINI

Enrol No. : M 15848817

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASO	TOT	CLI	INTASO		TOT
			70	20	10	100	90	10		100
PROSTHODONTICS	011		05	14	08	*27	70	08	78	*105
CONSERVATIVE DENTISTRY & ENDO DONTICS	012		13	17	07	*37	47	06	53	*90
PEDODONTICS	013		19	18	08	*45	45	08	53	*93
ORAL SURGERY & ANEA- STHESIA	014		23	17	07	*47	50	07	57	*104
PERIODONTICS	015		28	16	08	52	46	07	53	105
ORTHODONTICS	016		24	17	08	*49	61	06	67	*116
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		20	17	08	*45	44	07	51	*96
PUBLIC HEALTH DENTISTRY	018		17	18	09	*44	48	08	56	*100
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED			RESULT		
GRAND TOTAL		1600	800		814			FAILED		

Harshit
24/6/24

011
012
013
014
015
016
017
018

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



07/01/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061673

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

09/01/2024



Class/Course : B.D.S. IVth Prof.

Candidate's Name : IRFAN BASHIR

Roll No. : 9921034

Parent's Name : BASHIR AHMAD BHAI / ATEKA BANO

Enrol No. : M 1234567

Institution's Name : I.D.S.T., KARNABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL			G.TOT
			TH	ORAL	INTASB	TOT	CLI	INTASB	
		MIN MARKS	70	20	10	100	70	10	200
ORTHODONTICS	016		37	18	09	64	79	07	141
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		20	18	08	46	45	05	97

	MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT
GRAND TOTAL	400	200	238	

FAILED IN 017

Handwritten signature
15/04/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09/01/24

Date :

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE <i>[Signature]</i>
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

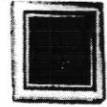


Sr. No. Prof. 2K22 1061669

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT.-2023



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SUSANG PATEL

Roll No. : 9934083

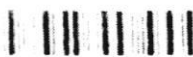
Parent's Name : SUBHASH PATEL / SANGITA PATEL

Enrol No. : M 1003794

Institution's Name : I.D.S.F., KANPURAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL			G.TOT	
			70	20	10	TOT	CLI	INTASS		TOT
CONSERVATIVE DENTISTRY & ENDODONTICS	012		26	16	08	50	17	06	53	103
GRAND TOTAL		200	100			103				PASS

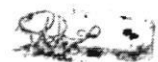
In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09/01/24

Date :

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1. FULL SIGNATURE <u>AVADHESH KUMAR</u>	2. FULL SIGNATURE <u>AVADHESH KUMAR</u>
FULL NAME	FULL NAME



Controller of Examination
C.C.S. University Meerut

Principal of Dental Studies & Technologies

Principal

Prof 2K22 1061665

Sr. No. Prof. 2K22 1061660



CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT.-2023

Class/Course : B.D.S. IVth Prof.

Candidate's Name : IMAN SHAWKAT

Roll No. : 189889027

Parent's Name : SHAWKAT JAN ASHI / HADEERA

Enrol No. : M 1001400

Institution's Name : I.D.S.T. - KAPRAHAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	PT	CLI	INTASS		
			70	20	10	100	90	10		100
PROSTHODONTICS	011		34	11	06	57	70	08	78	135
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		30	10	08	56	47	07	54	110
GRAND TOTAL						245				PASS

04/10/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 09/01/24

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1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

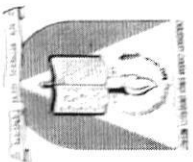
Institute of Dental Studies & Technologies

[Signature]
Principal

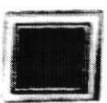
Sr. No. Prof. 2K22 1061668

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION



Class/Course : B.B.S. 10th SEM.



Candidate's Name : HIRSHI SAHAWANI

Roll No. : 990409

Parent's Name : ASADU SARDAR / P.T. SARAF

Enrol No. : M 10015740

Institution's Name : T.D.S.I., KANPURBAH, CHHATTISGARH

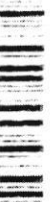
SUBJECT	THEORY	PRACTICAL			
		TH. DEPT. THEORY	PT. (I) THEORY	PT. (I) PRACTICAL	PT. (II) PRACTICAL
CODE NO.	20	20	100	100	200
MAX. MARKS	20	100	20	100	200
PER. MARKS	59	59	66	66	100

GRAND TOTAL: 20+100+20+100+200 = 591

MAX. MARKS	TH. MARKS	MARKS OBTAINED	PERCENT
200	100	93	

FAILED IN 01/

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 09/01/24

CHECKED BY :
FULL SIGNATURE: WARDHESH KUMAR
FULL NAME: WARDHESH KUMAR

Controller of Examination
C.C.S. University Meerut

Director of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061679

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

001-2023



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SHIVANKI PANJAB

Roll No. : 9708075

Parent's Name : DEVENDAR PANJAB / SEEMA PANJAB

Enrol No. : M 1701478

Institution's Name : I.D.S.P., KARRABAD, BHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100	20	10	100	
PROSTHODONTICS	011		10	13	08	*33	70	08	93	*116
CONSERVATIVE DENTISTRY & ENDODONTICS	012		23	17	08	*48	53	02	61	*109
PERIODONTICS	013		24	17	08	53	50	08	58	109
ORAL SURGERY & ANAESTHESIA	014		19	18	08	*45	56	08	64	*109
PERIODONTICS	015		28	17	08	53	49	07	56	109
ORTHODONTICS	016		32	17	08	57	62	07	69	126
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		23	17	08	*48	45	06	51	*99
PUBLIC HEALTH DENTISTRY	018		19	18	09	*46	48	08	56	*102
GRAND TOTAL			1500		800		879		FAILED	

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



00001708

Date :

CHECKED BY:	
1. FULL SIGNATURE <i>[Signature]</i> FULL NAME: AVADHESH KUMAR	2. FULL SIGNATURE <i>[Signature]</i> FULL NAME: HARISH KUMAR



Controller of Examination
C.C.S. University Meerut

Head of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1061666

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

01.12.2023

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SOMAY KUMAR

Roll No. : 129909067

Parent's Name : RAVINDER KUMAR & SONI KUMAR

Enrol No. : M 12991520

Institution's Name : I.D.S.T., KAURABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	70	10	100	200
		MIN MARKS				50			50	100
ORTHODONTICS	016		45	18	07	75	80	08	88	163
		MAX. MARKS				MARKS OBTAINED			RESULT	
GRAND TOTAL		200				163			PASS	

[Handwritten Signature]
25/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09701724

Date :

CHECKED BY:	
1. <u>AVADHESH KUMAR</u> FULL SIGNATURE FULL NAME	2. <u>[Signature]</u> FULL SIGNATURE FULL NAME

[Handwritten Signature]
Controller of Examination
C.C.S. University Meerut

Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061667

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT. 2023



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : VINITA

Roll No. : 139909075

Parent's Name : RAM LAKHAN / B.K. JISH

Enrol No. : M 1301570

Institution's Name : I.D.S.T. KADWARA, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CL.I	INTASS		TOT
		MIN MARKS	70	20	10	100	70	10	100	200
PROSTHODONTICS	011		30	17	09	55	70	09	79	134
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		38	17	08	63	49	07	56	119
GRAND TOTAL						253				PASS

Dr. Vishal Kulkarni

Dr. Gopal

Reviewed on 13/07/2024.

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 09/01/24

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE <i>[Signature]</i>
FULL NAME	FULL NAME



Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1061665

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

01/09/2024

Class/Course : B.D.S. - 19th Year

Candidate's Name : SAVIYA

Roll No. : 107929019

Parent's Name : JAINAMOHAN KUMAR / ANJANA KUMARI

Enrol No. : M 1001665

Institution's Name : I.D.S.T. KANWAR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL			G.TOT	
			70	20	10	100	20	10		100
ORIGENETICS	011		47	10	09	69	20	08	86	155
ORAL MEDICINE, DIAGNOSTIC & RADIOLOGY	011		38	10	06	64	40	02	54	110

	MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT
GRAND TOTAL	400	200	273	PASS

Saviya
4/09/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 07/09/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal



Sr. No. Prof. 2K22 1068525

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SAURABH SINGH

Roll No. : 189989057

Parent's Name : JAGRAT SINGH / SANTOSH KUMARI

Enrol No. : M 1801511

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
		MIN MARKS				50			50	100
PROSTHODONTICS	011		31	13	07	51	52	07	59	110

	MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT
GRAND TOTAL	200	100	110	PASS

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 12/04/24

CHECKED BY :	
1. FULL SIGNATURE	2. FULL SIGNATURE
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1068523

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT. - 2023

33

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SAURABH SINGH

Roll No. : 189929057

Parent's Name : JAGRAT SINGH / SANTOSH KUMARI

Enrol No. : M 1801511

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		21	15	08	44	75	08	83	127
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		29	17	08	54	53	08	61	115
PERIODONTICS	013		28	19	09	56	55	09	64	120
ORAL SURGERY & ANEA- STHESIA	014		27	17	08	52	57	08	65	117
PERIODONTICS	015		37	17	08	62	52	08	60	122
ORTHODONTICS	016		38	18	09	65	68	08	76	141
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		31	18	07	56	45	08	53	109
PUBLIC HEALTH DENTISTRY	018		22	19	09	50	57	07	64	114

	MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT
GRAND TOTAL	1600	800	945	

FAILED IN 011

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 12/04/24

CHECKED BY :	
1. FULL SIGNATURE	2. FULL SIGNATURE
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061663

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT. 2024

Class/Course : B.D.S. - 10th Prof.

Candidate's Name : SAKSHI SHARMA

Roll No. : 1192919054

Parent's Name : NARESH SHARMA / SONIA SHARMA

Enrol No. : M 1101506

Institution's Name : I.D.S.T. - KAPRAHAD - GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	ENTASH	TOT	CLI	ENTASH	TOT	G. TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		28	15	08	51	70	08	78	129
CONSERVATIVE DENTISTRY & ENDODONTICS	012		31	17	08	56	52	08	60	116
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		40	19	07	64	44	07	53	119
GRAND TOTAL		600				364				PASS

Sakshi Sharma
21/11/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09/01/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut



Sr. No. Prof. 2K22 1061662

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

DEC-2023



Class/Course : B.D.S. - 10th Prof.

Candidate's Name : RITIK SHARMA

Roll No. : 189989051

Parent's Name : MUKESH CHAND / SAROJ DEVI

Enrol No. : M 1804505

Institution's Name : T.D.S.V. - KACROBAD, CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS RTH MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		28	18	09	55	70	09	79	132
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		29	17	08	54	48	08	54	108
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL		400	200			240			PASS	

Ritik Sharma -> 29/6/24 -> Received

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



02/01/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Department of Dental Studies & Technologies

Principal

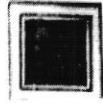


Sr. No. Prof. 2K22 1061677

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

01.11.2023



Class/Course : B.D.S. - 1st Year

Candidate's Name : SHAHNOVAZ AHMAD

Roll No. : 9995077

Parent's Name : ABDUL MALIQUE / DJIUNAFI BEGUM

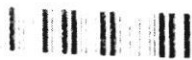
Enrol No. : M 11818756

Institution's Name : T.D.S.T. - KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS.	TOT	CLI	INTASS.	TOT	G.TOT
		MIN MARKS	70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		19	15	08	*42	75	08	83	*123
CONSERVATIVE DENTISTRY & ENDODONTICS	012		27	16	08	51	47	06	53	104
PEDIODONTICS	013		25	18	08	51	55	08	63	114
ORAL SURGERY & ANAESTHESIA	014		28	18	08	54	57	08	65	119
ORTHODONTICS	015		30	17	08	55	72	07	79	134
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		18	17	08	*43	47	05	52	*95
PUBLIC HEALTH DENTISTRY	018		32	19	09	60	48	08	56	116
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1400	700		307		FAILED			

011
017
13-03-24
Received

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09/01/24

Date :

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE <i>[Signature]</i> FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

Sr. No. Prof. 2K22 1061671

Class/Course : B.D.S. - Ist Yr Prof.

Candidate's Name : ALTAJ HUSSAIN KHAN

Roll No. : 9724007

Parent's Name : RAHUL AMIT KHAN / NOMOHARA KHATUN

Enrol No. : M 12818791

Institution's Name : T.D.S.T., BARRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	MIN MARKS	THEORY			PRACTICAL			G.TOT	
				TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
ORAL MEDICINE, DIAGNOSIS & PATHOLOGY	017	100	50	70	20	10	100	70	10	100	200
				13	10	07	30	46	06	52	96

MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT
200	100	96	FAILED IN 017

Accepted
13/3/24
Received

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.

Date : 02/03/24

CHECKED BY:

1. FULL SIGNATURE AVADHESH KUMAR
FULL NAME

2. FULL SIGNATURE HANU KUMAR
FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal



Sr. No. Prof. 2K22 1061661

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT-2023



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MIKHIL AMAND

Roll No. : 189989036

Parent's Name : RAM BABU PRASAD TIWARI / BABITA DEVI

Enrol No. : M 1801492

Institution's Name : I.D.S.Y., KADKARAB, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	50	10	100	200
PROSTHODONTICS	011		15	13	09	*37	80	02	88	*125
CONSERVATIVE DENTISTRY & ENDODONTICS	012		23	16	08	*47	48	07	55	*102
PEDODONTICS	013		20	17	09	*48	55	09	64	*112
ORAL SURGERY & ANAESTHESIA	014		22	18	08	*48	53	08	61	*109
PERIODONTICS	015		21	17	09	*47	51	08	59	*106
OROPATHICS	016		24	17	01	*49	65	06	71	*120
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		20	18	08	54	48	07	55	109
PUBLIC HEALTH DENTISTRY	018		20	18	09	*47	48	08	56	*103
GRAND TOTAL			1600		800	886	FAILED			

Mikhil Amand.
24/06/24.

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09/01/24

Date :

CHECKED BY :	
1. <u>ANAND KUMAR</u>	2. <u>[Signature]</u>
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1061659

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

OCT. 2023



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : AYUSH KATARIA

Roll No. : 189989014

Parent's Name : SANJAY KATARIA / RABITA KATARIA

Enrol No. : M 1001474

Institution's Name : I.D.S.T. - NARRAID, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS BY MARKS	THEORY			PRACTICAL				
			TH. ORAL INTASS			TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	300
CONSERVATIVE DENTISTRY & ENDOPONTICS	011		91	17	08	49	53	08	61	110
ORTHODONTICS	014		34	17	08	59	80	08	88	147
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	012		40	19	07	57	48	08	56	113
GRAND TOTAL						370			PASS	

*Received original
Signature
11-2-24*

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date: 02/01/24

CHECKED BY:	
1. _____ FULL SIGNATURE HARSHESH KUMAR	2. _____ FULL SIGNATURE HARSHESH KUMAR
_____	_____
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1061658

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

0011-2007

Class/Course : B.D.S.- Ist Prof.

Candidate's Name : ANMOL SAGAR

Roll No. : 189989009

Parent's Name : AVINASH CHANDRA SAGAR / JAGESHWARI SAGAR

Enrol No. : M 1301406

Institution's Name : I.D.S.T., KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	50	10	100	200
PROSTHODONTICS	011		34	18	09	61	75	09	84	145
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		41	17	09	68	49	07	56	124
GRAND TOTAL		400				269				PASS

Received original
Anmol Sagar
June
18 ~~July~~ 24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



09/01/24

Date :

CHECKED BY :	
1. FULL SIGNATURE AVADITESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

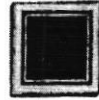


Sr. No. Prof. 2K22 1066908

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : ABHISHEK SHARMA

Roll No. : 199901002

Parent's Name : RAJ KUMAR SHARMA / CHANDRA KANTA SHARMA

Enrol No. : M 1901223

Institution's Name : I.D.S.U., KANURABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		45	16	08	69	30	09	77	146
CONSERVATIVE DENTISTRY & ENDODONTICS	012		44	18	09	71	30	08	78	149
PEDODONTICS	013		43	18	06	67	34	06	60	127
ORAL SURGERY & ANAESTHESIA	014		41	15	07	63	32	09	78	141
PERIODONTICS	015		36	16	08	60	36	07	63	123
ORTHODONTICS	016		36	17	07	60	31	10	71	153
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		34	19	09	62	32	08	67	129
PUBLIC HEALTH DENTISTRY	018		40	19	09	68	33	08	71	139
GRAND TOTAL			1600	500		1107			PASS	

Abhishek
15/10/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. _____ FULL SIGNATURE	2. _____ FULL SIGNATURE
AVADHESH KUMAR FULL NAME	HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1066917

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : DYUTI GAYEN

Roll No. : 199901015

Parent's Name : SANJOY KUMAR GAYEN / PARUL GAYEN

Enrol No. : M 1901479

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH 70	ORAL 20	INTASS 10	TOT 100 50	CLI 20	INTASS 10	TOT 100 50	G.TOT 200 100
PROSTHODONTICS	011		40	15	08	63	59	08	67	130
CONSERVATIVE DENTISTRY & ENDODONTICS	012		42	17	07	66	61	06	67	133
PERIODONTICS	013		39	16	05	60	50	05	55	115
ORAL SURGERY & ANAESTHESIA	014		41	14	08	63	57	07	64	127
PERIODONTICS	015		40	15	08	63	49	07	56	119
ORTHODONTICS	016		46	15	07	68	74	09	83	151
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		30	18	09	57	53	07	60	117
PUBLIC HEALTH DENTISTRY	018		37	18	07	62	52	07	59	121
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1013		PASS			

Receipt - Original

*Dyuti Gayen
19/6/24*

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date: 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>AYADHESH KUMAR</i> FULL NAME	2. FULL SIGNATURE <i>HARISH KUMAR</i> FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

[Signature]
Principal

Principal



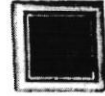
Sr. No. Prof. 2K22 1066918

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.



Candidate's Name : GARIMA JOSHI

Roll No. : 199991016

Parent's Name : RAJENDER PRASAD JOSHI / GIRJA JOSHI

Enrol No. : M 1901233

Institution's Name : I.D.S.I., KANURABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		41	15	08	64	60	08	68	132
CONSERVATIVE DENTISTRY & ENDODONTICS	012		45	17	07	69	60	07	67	136
PEDODONTICS	013		40	14	05	59	47	05	52	111
ORAL SURGERY & ANEA- STHESIA	014		37	13	07	57	53	07	60	117
PERIODONTICS	015		43	15	08	66	51	06	57	123
ORTHODONTICS	016		43	16	08	67	75	09	84	151
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		21	17	09	*47	48	07	55	*102
PUBLIC HEALTH DENTISTRY	018		46	17	07	70	55	06	61	131

	MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT
GRAND TOTAL	1600	800	1003	PASS
				G-3

Received original.
Garima Joshi
(19-6-24)

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1.	2.
FULL SIGNATURE	FULL SIGNATURE
AVADHESH KUMAR	HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

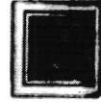


Sr. No. Prof. 2K22 1066919

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : GORIKA AGGARWAL

Roll No. : 199901018

Parent's Name : TARUN KUMAR AGGARWAL / POOJA AGGARWAL

Enrol No. : M 1901235

Institution's Name : I.D.S.T. - KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL				
			70	20	10	TOT	CLI	INTASS	TOT	G.TOT
						100	90	10	100	200
		MIN MARKS	50	50	50	100	100	100		
PROSTHODONTICS	011		33	15	08	56	63	07	70	126
CONSERVATIVE DENTISTRY & ENDODONTICS	012		43	16	06	69	60	08	68	137
PEDODONTICS	013		38	16	07	61	59	07	66	127
ORAL SURGERY & ANAESTHESIA	014		45	14	07	66	56	07	63	129
PERIODONTICS	015		43	17	08	68	55	07	67	130
ORTHODONTICS	016		37	10	10	65	71	08	79	144
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		34	17	08	59	46	06	52	111
PUBLIC HEALTH DENTISTRY	018		52	17	08	77	57	08	65	142
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED		RESULT		
GRAND TOTAL		1600	800			1046		PASS		

Handwritten signature and date: 21/8/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE A. ADRESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

Handwritten signature
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Handwritten signature

Principal

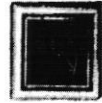


Sr. No. Prof. 2K22 1066921

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : IRFAN SUBHAN KHOJA

Roll No. : 199981021

Parent's Name : MOHAMMAD SUBHAN KHOJA / HAJRA BEGUM

Enrol No. : M 1901238

Institution's Name : I.D.S.T.- KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		41	17	08	66	60	08	68	134
CONSERVATIVE DENTISTRY & ENDODONTICS	012		45	19	08	72	72	08	80	152
PEDODONTICS	013		43	14	08	65	63	08	71	136
ORAL SURGERY & ANEA- STHESIA	014		42	16	07	65	63	08	71	136
PERIODONTICS	015		36	17	08	61	52	07	59	120
ORTHODONTICS	016		39	16	08	63	72	09	81	144
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		43	18	09	70	54	07	61	131
PUBLIC HEALTH DENTISTRY	018		40	18	09	67	58	08	66	133
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	1086	PASS				

Irfan
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>Avadresh Kumar</i> FULL NAME AVADRESH KUMAR	2. FULL SIGNATURE <i>Harish Kumar</i> FULL NAME HARISH KUMAR

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal

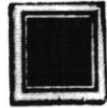


Sr. No. Prof. 2K22 1066920

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : HUDAIB NOOR-UD-DIN

Roll No. : 199991020

Parent's Name : NOOR UD DIN MIR / HAFIZA BANO

Enrol No. : M 1901237

Institution's Name : I.D.S.T. - KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	20	10	100	200
PROSTHODONTICS	011		41	17	08	66	62	08	70	136
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		40	17	07	64	66	06	72	136
PERIODONTICS	013		38	14	06	58	55	06	61	119
ORAL SURGERY & ANEA- STHESIA	014		41	16	07	64	60	07	67	131
PERIODONTICS	015		39	19	08	66	62	07	69	135
ORTHODONTICS	016		32	16	08	56	77	09	86	142
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		45	19	09	73	54	07	61	134
PUBLIC HEALTH DENTISTRY	018		49	18	09	76	58	08	66	142
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1075		PASS			

*Received original
Nabeela Nabeela
19/06/24*

*Batch-2019-
2023*

19622531626

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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C.C.S. University Meerut

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Sr. No. Prof. 2K22 1066922

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : ISHANI SHARMA

Roll No. : 199981022

Parent's Name : GOPAL DASS / NISHA SHARMA

Enrol No. : M 1901239

Institution's Name : I.D.S.T. - KADKABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	90	10	100 50	200 100
PROSTHODONTICS	011		44	18	09	71	62	08	70	141
CONSERVATIVE DENTISTRY & ENDODONTICS	012		47	19	10	76	71	09	80	156
PEDODONTICS	013		47	14	09	70	68	09	77	147
ORAL SURGERY & ANEA- STHESIA	014		45	14	08	67	66	08	74	141
PERIODONTICS	015		38	19	09	66	68	08	76	142
ORTHODONTICS	016		52	18	10	80	78	10	88	168
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		32	19	09	60	62	09	71	131
PUBLIC HEALTH DENTISTRY	018		48	19	09	76	61	09	70	146
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1172		PASS			

Ishani Sharma
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date: 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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Institute of Dental Studies & Technologies

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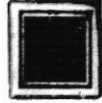


Sr. No. Prof. 2K22 1066923

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : KAKKASHAN NASEEM

Roll No. : 199981023

Parent's Name : MOHD NASEEM KHAN / SHARNAM BEGAM

Enrol No. : M 1901240

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		43	15	08	66	60	08	68	134
CONSERVATIVE DENTISTRY & ENDODONTICS	012		43	18	08	69	66	08	74	143
PERIODONTICS	013		38	14	08	60	66	08	74	134
ORAL SURGERY & ANEA- STHESIA	014		42	13	07	62	60	08	68	130
PERIODONTICS	015		34	15	08	57	52	07	59	116
ORTHODONTICS	016		41	18	10	69	76	09	85	154
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		35	18	09	62	53	08	61	123
PUBLIC HEALTH DENTISTRY	018		38	18	08	64	52	08	60	124
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1058		PASS			

*Kakkashan
Naseem
15/6/24*

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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Sr. No. Prof. 2K22 1066924

CH. CHARAN SINGH UNIVERSITY, MEERUT
STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : KM ITIKA

Roll No. : 199981024

Parent's Name : YOGENDRA KUMAR / SHASHI

Enrol No. : M 1901241

Institution's Name : I.D.S.T. KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		40	15	08	63	55	08	63	126
CONSERVATIVE DENTISTRY & ENDODONTICS	012		39	17	07	63	61	07	68	131
PEDODONTICS	013		41	14	07	62	60	07	67	129
ORAL SURGERY & ANEA- STHESIA	014		41	14	07	62	65	07	72	134
PERIODONTICS	015		36	16	08	60	45	06	51	111
ORTHODONTICS	016		45	16	08	69	70	09	79	148
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		53	17	09	79	50	08	58	137
PUBLIC HEALTH DENTISTRY	018		43	17	07	67	50	06	56	123
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	1039	PASS				

Itika
20/9/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY :	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

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Sr. No. Prof. 2K22 1066925

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : KRITIKA KAMBOJ

Roll No. : 199991025

Parent's Name : LAL CHAND / SURINDER KAMBOJ

Enrol No. : M 1991242

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	90	10	100 50	200 100
PROSTHODONTICS	011		36	15	08	59	57	08	65	124
CONSERVATIVE DENTISTRY & ENDODONTICS	012		47	18	08	73	69	08	77	150
PEDODONTICS	013		45	14	08	67	63	08	71	138
ORAL SURGERY & ANEA- STHESIA	014		46	14	07	67	61	07	68	135
PERIODONTICS	015		36	18	08	62	58	07	65	127
ORTHODONTICS	016		49	17	08	74	66	07	73	147
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		40	19	09	68	51	08	59	127
PUBLIC HEALTH DENTISTRY	018		49	19	09	77	60	08	68	145
MAX. MARKS			MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL 1600			800			1093			PASS	

Kritika
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE <i>Avadhesh Kumar</i> FULL NAME	2. FULL SIGNATURE <i>Harish Kumar</i> FULL NAME

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Sr. No. Prof. 2K22 1066926

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : KUMARI ANKITA

Roll No. : 199981024

Parent's Name : MANOJ KUMAR SINGH / UMA SINGH

Enrol No. : M 1901480

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL					
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT	
			70	20	10	100	90	10	100	200	
PROSTHODONTICS	011		38	15	08	61	55	08	63	124	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		43	13	08	69	63	08	71	140	
PEDODONTICS	013		43	14	08	65	65	08	73	138	
ORAL SURGERY & ANEA- STHESIA	014		41	15	07	63	64	07	71	134	
PERIODONTICS	015		35	16	08	59	51	07	58	117	
ORTHODONTICS	016		45	14	07	66	75	10	85	151	
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		46	13	09	73	43	07	55	128	
PUBLIC HEALTH DENTISTRY	018		47	13	07	72	55	08	63	135	
MAX. MARKS			MIN. MARKS			MARKS OBTAINED			RESULT		
GRAND TOTAL			1600			800			1067		PASS

Kumari Ankita
15/6/24.

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE <i>AYADHESH KUMAR</i>	2. FULL SIGNATURE <i>HARISH KUMAR</i>
FULL NAME	FULL NAME

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Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066909

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. -2024



Class/Course : B.D.S. - 10th Prof.

Candidate's Name : ADITI SINGH

Roll No. : 199901003

Parent's Name : MAHESH KUMAR SINGH / SUJATA KUMARI

Enrol No. : M 1901224

Institution's Name : J.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	20	10		100
PROSTHODONTICS	011		34	14	08	56	60	08	68	124
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		42	17	08	67	67	07	74	141
PERIODONTICS	013		44	17	06	67	55	06	61	128
ORAL SURGERY & ANEA- STHESIA	014		35	14	07	56	68	07	75	131
PERIODONTICS	015		30	16	07	53	51	07	58	111
ORTHODONTICS	016		39	13	07	59	65	07	72	131
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		24	18	08	50	50	07	57	107
PUBLIC HEALTH DENTISTRY	018		46	17	08	71	50	08	58	129
GRAND TOTAL		1500	MIN. MARKS			MARKS OBTAINED			RESULT	
			800			1002			PASS	

Aditi Singh
15/06/2024

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE MAHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

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C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Principal



Sr. No. Prof. 2K22 1066927

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : LAXMI BISWAS

Roll No. : 199981027

Parent's Name : MIHIR KUMAR BISWAS / KALYANI BISWAS

Enrol No. : M 1901243

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		41	15	08	64	56	08	64	128
CONSERVATIVE DENTISTRY & ENDDONTICS	012		42	18	09	69	72	08	80	149
PEDDONTICS	013		41	14	08	63	63	08	71	134
ORAL SURGERY & ANEA- STHESIA	014		36	15	06	57	55	07	62	119
PERIODONTICS	015		38	16	07	61	53	07	60	121
ORTHODONTICS	016		30	18	10	58	71	09	80	138
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		47	18	09	74	49	08	57	131
PUBLIC HEALTH DENTISTRY	018		37	17	08	62	58	07	65	127
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1047		PASS			

Laxmi
15/6/24.

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

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C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066928

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : M. HEMANTH

Roll No. : 199981028

Parent's Name : M MURUGAN / M JEYASURA

Enrol No. : M 1901244

Institution's Name : I.D.S.T., KADRABAD- CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		45	16	08	69	59	08	67	136
CONSERVATIVE DENTISTRY & ENDODONTICS	012		50	18	09	77	70	08	78	155
PEDODONTICS	013		50	14	08	72	64	08	72	144
ORAL SURGERY & ANEA- STHESIA	014		38	15	08	61	63	09	72	133
PERIODONTICS	015		39	18	09	66	65	08	73	139
ORTHODONTICS	016		33	17	09	59	75	08	83	142
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		46	19	09	74	54	08	62	136
PUBLIC HEALTH DENTISTRY	018		53	18	08	79	58	08	66	145
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1130		PASS			

M. Hemant
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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C.C.S. University Meerut

Department of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066929

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MANISHA SAINI

Roll No. : 199981029

Parent's Name : KAMAL KISHORE / RUKMANI DEVI

Enrol No. : M 1901245

Institution's Name : T.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT 200 100	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	90	10		100
PROSTHODONTICS	011		51	16	08	75	59	08	67	142
CONSERVATIVE DENTISTRY & ENDO DONTICS	012		47	17	07	71	63	07	70	141
PEDODONTICS	013		49	14	08	71	64	08	72	143
ORAL SURGERY & ANEA- STHESIA	014		47	14	08	69	67	08	75	144
PERIODONTICS	015		42	14	08	64	51	06	57	121
ORTHODONTICS	016		52	17	09	78	74	09	83	161
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		38	18	09	65	47	08	55	120
PUBLIC HEALTH DENTISTRY	018		51	17	08	76	60	08	68	144
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL		1600	800			1116			PASS	

Manisha
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal

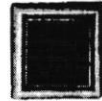


Sr. No. Prof. 2K22 1066930

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MEHR UL HARAM

Roll No. : 199981031

Parent's Name : MEHRAJUD DIN WAZA / MUNTAZIR MEHRAJ

Enrol No. : M 1901247

Institution's Name : I.D.S.T.- KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
PROSTHODONTICS	011		41	15	08	64	61	08	69	133
CONSERVATIVE DENTISTRY & ENDODONTICS	012		44	18	08	70	68	08	76	146
PEDODONTICS	013		45	19	09	73	70	09	79	152
ORAL SURGERY & ANEA- STHESIA	014		43	17	08	68	65	09	74	142
PERIODONTICS	015		41	17	09	67	64	07	71	138
ORTHODONTICS	016		38	17	07	62	72	09	81	143
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		44	18	09	71	52	08	60	131
PUBLIC HEALTH DENTISTRY	018		49	17	08	76	57	08	65	141
GRAND TOTAL		1600	800			1126			PASS	

Mehruul hasm
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>AVADHESH KUMAR</i>	2. FULL SIGNATURE <i>HARISH KUMAR</i>
FULL NAME AVADHESH KUMAR	FULL NAME HARISH KUMAR

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal

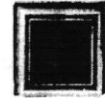


Sr. No. Prof. 2K22 1066931

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MOHAMMAD MOHAZIB RESHI

Roll No. : 199901032

Parent's Name : GHULAM MOHAMMAD RESHI / DILSHADA BANO

Enrol No. : M 1901248

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	90	10		100
PROSTHODONTICS	011		31	15	08	54	60	08	68	122
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		44	18	08	70	63	08	71	141
FEDODONTICS	013		41	14	07	62	61	07	68	130
ORAL SURGERY & ANEA- STHESIA	014		40	12	08	60	62	07	69	129
PERIODONTICS	015		33	15	08	56	49	06	55	111
ORTHODONTICS	016		27	17	09	53	60	09	77	130
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		30	18	09	57	51	08	59	116
PUBLIC HEALTH DENTISTRY	018		39	17	08	64	55	07	62	126
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1005		PASS			

Mohazib
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

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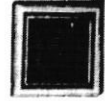


Sr. No. Prof. 2K22 1066932

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MOHIT KUMAR

Roll No. : 199981034

Parent's Name : MOHAN KUMAR / SUMITA KUMARI

Enrol No. : M 1901250

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT 200 100			
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT		
			70	20	10	100	90	10	100	50	50	100
PROSTHODONTICS	011		26	15	08	*49	60	08	68	*117		
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		39	17	07	63	65	07	72	135		
PEDODONTICS	013		35	14	07	56	62	07	69	125		
ORAL SURGERY & ANEA- STHESIA	014		36	14	07	57	58	07	65	122		
PERIODONTICS	015		26	15	07	*48	50	07	57	*105		
ORTHODONTICS	016		18	17	09	*44	74	08	82	*126		
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		32	17	09	58	49	08	57	115		
PUBLIC HEALTH DENTISTRY	018		41	18	08	67	56	07	63	130		
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED			RESULT				
GRAND TOTAL		1600	800		975			FAILED				
								011 015 016				

Mohit Kumar
24/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE	2. FULL SIGNATURE
<i>Avadhesh Kumar</i>	<i>Harish Kumar</i>
FULL NAME	FULL NAME

Harish Kumar
Controller of Examination
C.C.S. University Meerut

Harish Kumar
Principal



Sr. No. Prof. 2K22 1066910

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : AKANSHA SINGH

Roll No. : 179921006

Parent's Name : DHARMENDER SINGH / SANGEETA SINGH

Enrol No. : M 1901226

Institution's Name : I.D.S.F., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT 200 100
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100 50	90	10	100 50	
PROSTHODONTICS	011		36	14	08	58	60	08	68	126
CONSERVATIVE DENTISTRY & ENDODONTICS	012		39	16	08	63	63	07	70	133
PEDODONTICS	013		43	17	05	65	50	05	55	120
ORAL SURGERY & ANEA- STHESIA	014		36	15	07	58	63	07	70	128
PERIODONTICS	015		35	14	08	57	50	06	56	113
ORTHODONTICS	016		44	18	10	72	69	08	77	149
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		42	18	09	69	48	08	56	125
PUBLIC HEALTH DENTISTRY	018		44	18	07	69	52	07	59	128
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED		RESULT		
GRAND TOTAL		1600	800			1022		PASS		

Akansha
Date - 7/10/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. _____ FULL SIGNATURE	2. _____ FULL SIGNATURE
AVADHESH KUMAR FULL NAME	HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Principal



Sr. No. Prof. 2K22 1066911

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. - 2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : ALISHA SINGH

Roll No. : 199991007

Parent's Name : ASHOK KUMAR SINGH / MAMTA SINGH

Enrol No. : M 1901227

Institution's Name : I.D.S.T., KADROBAD, CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL					
			TH	ORAL	INT	ASS	TOT	CLI	INT	ASS	TOT	G.TOT
			70	20	10		100	70	10		100	200
PROSTHODONTICS	011		36	14	08		58	60	08		68	126
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		36	17	08		61	63	07		70	131
PEDODONTICS	013		38	17	09		64	70	09		79	143
ORAL SURGERY & ANEA- STHESIA	014		33	13	07		53	63	07		70	123
PERIODONTICS	015		35	15	08		58	51	06		57	115
ORTHODONTICS	016		41	17	09		67	63	07		70	137
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		34	18	09		61	51	07		58	119
PUBLIC HEALTH DENTISTRY	018		32	19	08		59	52	08		60	119
			MAX. MARKS		MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL			1600		800		1013		PASS			

Alisha
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

Date :

CHECKED BY :	
1. FULL SIGNATURE <i>Ayadresh Kumar</i> FULL NAME	2. FULL SIGNATURE <i>Harish Kumar</i> FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Principal



Sr. No. Prof. 2K22 1066912

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : ANAND RAJAN

Roll No. : 199901008

Parent's Name : RAJACHANDRAN M / SOBHA RAJAN

Enrol No. : M 1901298

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT 200 100
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100	90	10	100	
PROSTHODONTICS	011		36	14	07	57	58	07	65	122
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		34	17	07	58	64	06	70	128
PEDODONTICS	013		38	14	07	59	58	07	65	124
ORAL SURGERY & ANEA- STHESIA	014		36	15	08	57	62	07	69	126
PERIODONTICS	015		32	15	08	55	51	08	57	112
ORTHODONTICS	016		43	12	07	62	66	08	74	136
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		39	17	08	64	46	06	52	116
PUBLIC HEALTH DENTISTRY	018		40	18	07	65	50	07	57	122
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED			RESULT		
GRAND TOTAL		1600	300		986			PASS		

Signature
16/11/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. <i>[Signature]</i> FULL SIGNATURE	2. <i>[Signature]</i> FULL SIGNATURE
AVADHESH KUMAR FULL NAME	HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Principal

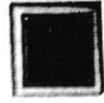


Br. No. Prof. 2K22 1066913

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB 2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : APRAJITA KUMARI

Roll No. : 199701010

Parent's Name : JITENDRA KUMAR GUPTA / AMITA DEVI

Enrol No. : M 1901230

Institution's Name : I.D.S.T., KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	MIN MARKS	THEORY			PRACTICAL			G.TOT	
				TH	ORAL	INTASS	TOT	CL	INTASS		TOT
				70	20	10	100	70	10		100
PROSTHODONTICS	011			42	17	09	68	49	09	78	146
CONSERVATIVE DENTISTRY & ENDOODONTICS	012			48	17	09	76	73	07	80	154
PEDODONTICS	013			47	14	09	70	67	09	76	146
ORAL SURGERY & ANEA- STHESIA	014			49	13	08	70	70	09	79	149
PERIODONTICS	015			48	19	09	76	73	09	82	158
ORTHODONTICS	016			48	17	09	74	75	09	84	158
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017			42	18	09	69	53	07	60	129
PUBLIC HEALTH DENTISTRY	018			40	18	08	66	62	09	71	137
GRAND TOTAL		1600	800				1179				PASS

Aprajita Kumari
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE <i>AVADHESH KUMAR</i>	2. FULL SIGNATURE <i>HARISH KUMAR</i>
FULL NAME AVADHESH KUMAR	FULL NAME HARISH KUMAR

[Signature]
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C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Principal

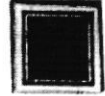


Sr. No. Prof. 2K22 1066914

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. -2024



Class/Course : B.B.S. IVth Prof.

Candidate's Name : ARUNIMA SADDTRA

Roll No. : 199901011

Parent's Name : RAJ SADDTRA / ANUPAMA DUBEY

Enrol No. : M 1901231

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT 200 100
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100	90	10	100	
PROSTHODONTICS	011		44	17	08	69	52	08	66	135
CONSERVATIVE DENTISTRY & ENDODONTICS	012		51	17	08	76	65	07	72	148
PEDODONTICS	013		46	14	06	66	54	06	60	126
ORAL SURGERY & ANAESTHESIA	014		45	15	09	69	66	08	74	143
PERIODONTICS	015		43	16	08	67	58	07	65	132
ORTHODONTICS	016		51	16	08	75	76	09	85	160
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		46	19	09	74	52	08	60	134
PUBLIC HEALTH DENTISTRY	018		50	19	08	77	60	09	69	146
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED			RESULT		
GRAND TOTAL		1600	800		1124			PASS		

Arunima Sadotra
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE <i>Avadhesh Kumar</i>	2. FULL SIGNATURE <i>Harish Kumar</i>
FULL NAME AVADHESH KUMAR	FULL NAME HARISH KUMAR

Harish Kumar
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Principal



Sr. No. Prof. 2K22 1066915

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : BASIMA GAUJAR

Roll No. : 199901010

Parent's Name : GAUJAR SULTAN / ZARIFA BEGUM

Enrol No. : M 1901232

Institution's Name : I.D.S.F., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT 200 100
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100	90	10	100	
PROSTHODONTICS	011		44	17	08	69	55	08	63	132
CONSERVATIVE DENTISTRY & ENDODONTICS	012		50	18	07	75	65	07	72	147
PEDODONTICS	013		45	14	05	64	51	05	56	120
ORAL SURGERY & ANEA- STHESIA	014		46	15	08	69	69	09	78	147
PERIODONTICS	015		39	16	08	63	56	07	63	126
ORTHODONTICS	016		48	17	09	74	63	08	71	145
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		48	17	09	74	52	07	59	133
PUBLIC HEALTH DENTISTRY	018		39	18	07	64	50	06	56	120
GRAND TOTAL		1600	800			1070			PASS	

Basima
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

Principal

Principal

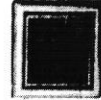


Sr. No. Prof. 2K22 1066916

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : D.D.S.- IVth Prof.

Candidate's Name : DEEKSHA MALIK

Roll No. : 199901013

Parent's Name : PAVAN KUMAR MALIK / REKHA MALIK

Enrol No. : M 1901500

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL					
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT	
			70	20	10	100	20	10	100	200	
PROSTHODONTICS	011		29	14	07	50	53	07	60	110	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		39	17	07	63	62	07	69	132	
PERIODONTICS	013		33	14	06	53	56	06	62	115	
ORAL SURGERY & ANAESTHESIA	014		26	15	09	50	65	08	73	123	
PERIODONTICS	015		40	16	08	64	50	07	57	121	
ORTHODONTICS	016		39	16	07	62	81	07	88	150	
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		37	17	08	62	46	06	52	114	
PUBLIC HEALTH DENTISTRY	018		42	17	07	66	50	06	56	122	
			MAX. MARKS			MIN. MARKS			MARKS OBTAINED		RESULT
GRAND TOTAL			1600			800			987		PASS

Deeksha Malik
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE <i>AVADHESH KUMAR</i>	2. FULL SIGNATURE <i>HARISH KUMAR</i>
FULL NAME AVADHESH KUMAR	FULL NAME HARISH KUMAR

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]



Sr. No. Prof. 2K22 1066957

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : RIYA VASUDEVA

Roll No. : 199901065

Parent's Name : YOGESH VASUDEVA / REETA VASUDEVA

Enrol No. : M 1901216

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		50	14	07	71	52	08	60	131
CONSERVATIVE DENTISTRY & ENDODONTICS	012		44	17	07	68	60	06	66	134
PERIODONTICS	013		47	12	06	65	53	06	59	124
ORAL SURGERY & ANEAESTHESIA	014		48	17	07	72	51	08	59	131
PERIODONTICS	015		39	16	08	63	54	07	61	124
ORTHODONTICS	016		41	18	10	69	78	08	86	156
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		48	17	09	74	51	08	59	133
PUBLIC HEALTH DENTISTRY	018		55	17	07	79	54	06	60	139
GRAND TOTAL		1600	300			1071			PASS	

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1066966

CH. CHARAN SINGH UNIVERSITY, MEERUT
STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : R.D.S.- IVth Prof.

Candidate's Name : SHIWANGI GUPTA

Roll No. : 199921075

Parent's Name : DEEPENDER PRABHAKAR GUPTA / REENA GUPTA

Enrol No. : M 1901285

Institution's Name : I.D.S.T., KADRABAD, CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		38	17	08	63	60	08	68	131
CONSERVATIVE DENTISTRY & ENDODONTICS	012		45	18	06	71	66	08	74	145
PEDODONTICS	013		35	14	09	58	69	09	78	136
ORAL SURGERY & ANEA- STHESIA	014		46	13	08	67	69	07	76	143
PERIODONTICS	015		34	16	07	57	50	07	65	122
ORTHODONTICS	016		41	18	10	69	66	09	75	144
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		49	18	09	76	50	08	58	130
PUBLIC HEALTH DENTISTRY	018		44	19	08	71	64	08	72	143
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1094		PASS			


Shiwangi Gupta
20/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME


 Controller of Examination
 C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

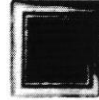


Sr. No. Prof. 2K22 1066967

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SHREYA

Roll No. : 197901075

Parent's Name : RAVI RANJAN / SUSHMITA

Enrol No. : M 1901286

Institution's Name : I.D.S.T., KANPURABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		31	16	08	55	62	08	70	125
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		40	18	08	66	66	08	74	140
PERIODONTICS	013		42	14	08	64	65	08	73	137
ORAL SURGERY & ANEA- STHESIA	014		42	13	07	62	63	07	70	132
PERIODONTICS	015		35	14	08	57	51	06	57	114
ORTHODONTICS	016		42	15	07	64	67	08	75	139
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		33	19	09	61	51	07	58	119
PUBLIC HEALTH DENTISTRY	018		43	18	08	69	58	08	66	135
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL			1600		800	1041		PASS		

Shreya
20/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal

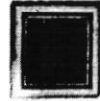


Sr. No. Prof. 2K22 1066968

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SHUBHAM KUMAR

Roll No. : 192981077

Parent's Name : DIPAK KUMAR / BILBUL DEVI

Enrol No. : M 1901207

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	MIN MARKS	THEORY			PRACTICAL				
				TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
				70	20	10	100	90	10	100	200
PROSTHODONTICS	011			42	15	08	65	60	07	67	132
CONSERVATIVE DENTISTRY & ENDODONTICS	012			36	17	07	60	62	07	69	129
PEDODONTICS	013			52	14	05	71	50	05	55	126
ORAL SURGERY & ANEA- STHESIA	014			39	17	06	62	53	07	60	122
PERIODONTICS	015			32	14	08	54	52	06	58	112
ORTHODONTICS	016			46	15	07	68	61	07	68	136
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017			33	17	09	59	52	08	60	119
PUBLIC HEALTH DENTISTRY	018			41	16	07	64	48	05	53	117
GRAND TOTAL		1600	800				993	PASS			

Shubham
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>Avadhesh Kumar</i> AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE <i>Harish Kumar</i> HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Adar

Principal

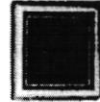


Sr. No. Prof. 2K22 1066969

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SNEHANJALI DUTTA

Roll No. : 199901080

Parent's Name : HIRAK RATAN DATTA / BANDANA DUTTA

Enrol No. : M 1901290

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		45	15	08	68	61	08	69	137
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		46	17	07	70	62	07	69	137
PEDODONTICS	013		55	14	06	75	54	06	60	135
ORAL SURGERY & ANEA- STHESIA	014		43	14	07	64	56	08	64	128
PERIODONTICS	015		39	15	07	61	51	06	57	118
ORTHODONTICS	016		51	15	07	73	71	08	79	152
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		44	18	09	71	52	09	61	132
PUBLIC HEALTH DENTISTRY	018		45	16	08	69	50	07	57	126
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	300		1067		PASS			

Snehanjali
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1066970

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB-2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SRAJITA SINGH

Roll No. : 199901081

Parent's Name : JITENDRA SINGH / SARITA SINGH

Enrol No. : M 1901291

Institution's Name : I.D.S.T., KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		43	15	08	66	62	08	70	136
CONSERVATIVE DENTISTRY & ENDODONTICS	012		46	17	09	71	63	07	70	141
PERIODONTICS	013		47	14	05	66	51	05	56	122
ORAL SURGERY & ANAESTHESIA	014		48	14	07	69	57	08	65	134
PERIODONTICS	015		42	15	08	65	56	07	63	128
ORTHODONTICS	016		45	16	08	69	64	07	71	140
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		48	17	09	74	51	09	60	134
PUBLIC HEALTH DENTISTRY	018		43	16	07	66	54	07	61	127
			MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT		
GRAND TOTAL			1600	800		1062		PASS		

Rathour
18/01/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1.	2.
FULL SIGNATURE	FULL SIGNATURE
AVADHESH KUMAR	HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

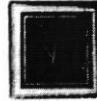


Sr. No. Prof. 2K22 1066971

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SRISTI TRIPATHI

Roll No. : 199981082

Parent's Name : SANJAY KUMAR TRIPATHI / SEEMA TRIPATHI

Enrol No. : M 1901292

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	90	10		100
PROSTHODONTICS	011		44	15	08	67	60	08	68	135
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		45	17	07	69	62	07	69	138
PERIODONTICS	013		46	14	05	65	47	05	52	117
ORAL SURGERY & ANEA- STHESIA	014		38	13	08	59	69	07	76	135
PERIODONTICS	015		38	14	08	60	50	06	56	116
ORTHODONTICS	016		44	18	10	72	66	08	74	146
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		44	17	09	70	51	07	58	128
PUBLIC HEALTH DENTISTRY	018		47	16	07	70	55	07	62	132
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1047		PASS			

Sristi Tripathi
23/7/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE <i>Avadhesh Kumar</i> AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE <i>Harish Kumar</i> HARISH KUMAR FULL NAME

Harish Kumar
Controller of Examination
C.C.S. University Meerut
Institute of Dental Studies & Technologies

Harish Kumar
Printed

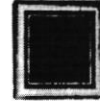


Sr. No. Prof. 2K22 1066972

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SUHAIL AHMAD KHAN

Roll No. : 192921083

Parent's Name : ABDUL KHALIQ KHAN / FARVEENA BEIGUM

Enrol No. : M 1901293

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH ORAL INTASS			TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		46	15	08	69	62	08	70	139
CONSERVATIVE DENTISTRY & ENDODONTICS	012		48	18	09	75	67	08	75	150
PEDODONTICS	013		43	12	05	60	52	05	57	117
ORAL SURGERY & ANEA- STHESIA	014		39	13	07	59	61	08	69	128
PERIODONTICS	015		32	15	08	55	54	07	61	116
ORTHODONTICS	016		37	14	08	59	69	08	77	136
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		39	19	09	67	55	09	64	131
PUBLIC HEALTH DENTISTRY	018		35	17	08	60	55	08	63	123
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL		1600	800			1040			PASS	

[Handwritten Signature]
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. <i>[Signature]</i> FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. <i>[Signature]</i> FULL SIGNATURE HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal



Sr. No. Prof. 2K22 1066973

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FER.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : TANNU

Roll No. : 199981087

Parent's Name : SATISH KUMAR / SUMITA DEVI

Enrol No. : M 1901297

Institution's Name : I.D.S.T., KADRABAD, CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		41	15	08	64	60	08	68	132
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		50	18	08	76	64	08	72	148
PEDODONTICS	013		52	14	06	72	54	06	60	132
ORAL SURGERY & ANEA- STHESIA	014		43	16	07	66	63	08	71	137
PERIODONTICS	015		48	17	09	74	60	07	67	141
ORTHOODONTICS	016		41	18	10	69	82	10	92	161
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		40	18	09	67	51	08	59	126
PUBLIC HEALTH DENTISTRY	018		42	17	08	67	62	08	70	137
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1114		PASS			

Tannu
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

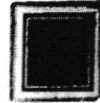


Sr. No. Prof. 2K22 1066974

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

PER.-2024



Class/Course : B.D.S.- 10th Prof.

Candidate's Name : TASNEEM NAEEM AHMED

Roll No. : 192901080

Parent's Name : NAEEM AHMAD / FIRDOS NASEERUDDIN BARUDDIN

Enrol No. : M 1901483

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH ORAL INTASS			TOT	ELI INTASS		TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		40	15	08	63	60	08	68	131
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		41	18	08	67	64	07	73	140
PEDODONTICS	013		37	18	08	63	67	08	75	138
ORAL SURGERY & ANEA- STHESIA	014		30	12	08	50	51	07	58	108
PERIODONTICS	015		38	17	08	63	59	07	66	129
ORTHODONTICS	016		43	14	07	64	67	08	75	139
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		20	17	09	*46	51	07	58	*104
PUBLIC HEALTH DENTISTRY	018		32	17	08	57	54	07	61	118
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	1007	PASS				

G-4

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date :

01/04/24

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

...nta... & Technologies

Principal

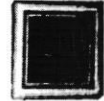


Sr. No. Prof. 2K22 1066975

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : UDESH KUMAR

Roll No. : 199981091

Parent's Name : K R RANJAN / BABITA DEVI

Enrol No. : M 1901300

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		37	16	08	61	64	08	72	133
CONSERVATIVE DENTISTRY & ENDODONTICS	012		36	18	07	61	63	07	70	131
PEDODONTICS	013		38	14	07	59	50	07	57	116
ORAL SURGERY & ANEA- STHESIA	014		36	12	08	56	57	08	65	121
PERIODONTICS	015		41	16	08	65	54	06	60	125
ORTHODONTICS	016		47	15	07	69	70	07	77	146
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		28	18	07	55	51	08	59	114
PUBLIC HEALTH DENTISTRY	018		32	17	08	57	58	07	65	122
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1008		PASS			

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE UDESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1066958

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : ROHIT KUMAR

Roll No. : 199901066

Parent's Name : RAJENDRA PRASAD / RAJO DEVI

Enrol No. : M 1901277

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL					
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT	
			70	20	10	100	70	10	100	200	
PROSTHODONTICS	011		27	14	08	*49	61	08	69	*118	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		34	18	07	59	62	07	69	128	
PERIODONTICS	013		36	14	07	57	59	07	66	123	
ORAL SURGERY & ANAESTHESIA	014		25	14	07	*46	53	08	61	*107	
PERIODONTICS	015		33	15	08	56	51	07	58	114	
ORTHODONTICS	016		39	12	07	58	57	08	65	123	
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		40	17	09	66	51	08	59	125	
PUBLIC HEALTH DENTISTRY	018		38	17	08	63	51	07	58	121	
			MAX. MARKS			MIN. MARKS			MARKS OBTAINED		RESULT
GRAND TOTAL			1600			800			959		FAILED
									011		
									014		

Bobit Kaur
28/9/2024

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY :	
1.	2.
FULL SIGNATURE	FULL SIGNATURE
AVADHESH KUMAR	HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1066976

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : UTKARSH CHECHI

Roll No. : 199981092

Parent's Name : PAWAN KUMAR / USHA

Enrol No. : M 1901501

Institution's Name : I.D.S.I., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	90	10	100 50	200 100
PROSTHODONTICS	011		29	15	08	52	60	08	68	120
CONSERVATIVE DENTISTRY & ENDODONTICS	012		37	18	08	63	66	07	73	136
PEDODONTICS	013		40	18	07	65	62	07	69	134
ORAL SURGERY & ANEAESTHESIA	014		45	14	07	66	67	08	75	141
PERIODONTICS	015		34	16	08	58	56	07	63	121
ORTHODONTICS	016		52	15	07	74	70	09	79	153
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		27	17	09	53	50	08	58	111
PUBLIC HEALTH DENTISTRY	018		50	18	08	76	56	08	64	140
GRAND TOTAL		1600				800			1956	PASS

Utmarsh
20/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>Avadesh Kumar</i> FULL NAME AVADHESH KUMAR	2. FULL SIGNATURE <i>Harish Kumar</i> FULL NAME HARISH KUMAR

[Signature]
Controller of Examination
C.C.S. University Meerut

Study & Technologies

[Signature]
Principal



Sr. No. Prof. 2K22 1066977

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024

Class/Course : B.D.S. - Ith Prof.

Candidate's Name : VANSHIKA SHARMA

Roll No. : 199981093

Parent's Name : SATISH SHARMA / SUNITA SHARMA

Enrol No. : M 1901301

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL					
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT	
			70	20	10	100	70	10	100	200	
PROSTHODONTICS	011		36	16	09	61	67	08	75	134	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		40	10	08	66	66	07	73	139	
PEDODONTICS	013		45	14	09	68	60	09	77	145	
ORAL SURGERY & ANEA- STHESIA	014		47	14	07	68	61	07	66	136	
PERIODONTICS	015		47	17	08	72	57	07	64	136	
ORTHODONTICS	016		55	17	06	80	82	10	92	172	
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		38	18	09	65	50	08	58	123	
PUBLIC HEALTH DENTISTRY	018		41	18	08	67	55	08	63	130	
		MAX. MARKS				MIN. MARKS			MARKS OBTAINED		RESULT
GRAND TOTAL		1600	800			1117			PASS		

Ravneet Kaur
 7889852649
 Batch - 2019-2023
Ravneet Kaur
 15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>AVADHESH KUMAR</i> FULL NAME	2. FULL SIGNATURE <i>HARISH KUMAR</i> FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal



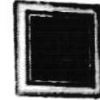
Sr. No. Prof. 2K22 1066978

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024

Class/Course : B.D.S. - IVth Prof.



Candidate's Name : VINIT KOUR

Roll No. : 199991094

Parent's Name : UPKAR SINGH / SEEHA

Enrol No. : M 1901302

Institution's Name : I.D.S.T. - NADRABAD - GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		39	15	08	62	61	08	69	131
CONSERVATIVE DENTISTRY & ENDODONTICS	012		43	10	07	68	65	07	72	140
PERIODONTICS	013		44	14	05	63	50	05	55	118
ORAL SURGERY & ANEAESTHESIA	014		45	15	07	67	59	08	67	134
PERIODONTICS	015		45	15	07	67	52	07	59	126
ORTHODONTICS	016		60	15	07	82	66	09	75	157
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		43	19	09	71	52	08	60	131
PUBLIC HEALTH DENTISTRY	018		35	17	08	60	56	08	64	124
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1061		PASS			

Handwritten signature
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Signature
Controller of Examination
C.C.S. University Meerut

Department of Dental Studies & Technologies

Principal

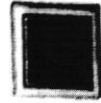


Sr. No. Prof. 2K22 1066979

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : VRANDA SHARMA

Roll No. : 199981095

Parent's Name : VINOD SHARMA / ANJU

Enrol No. : M 1701303

Institution's Name : I.D.S.T. - KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	20	10	100	200
						50			50	100
PROSTHODONTICS	011		36	16	08	60	65	08	73	133
CONSERVATIVE DENTISTRY & ENDODONTICS	012		43	18	08	69	64	07	71	140
PEDODONTICS	013		41	14	05	60	40	05	53	113
ORAL SURGERY & ANEAESTHESIA	014		39	13	08	60	55	07	62	122
PERIODONTICS	015		39	15	08	62	51	06	57	119
ORTHODONTICS	016		50	15	08	73	68	07	75	148
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		39	17	08	64	50	07	57	121
PUBLIC HEALTH DENTISTRY	018		47	17	08	72	52	06	58	130
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL			1600		800	1026		PASS		

Vranda
7/10/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>AVANISH KUMAR</i>	2. FULL SIGNATURE <i>HARISH KUMAR</i>
FULL NAME AVANISH KUMAR	FULL NAME HARISH KUMAR

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1066980

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

Class/Course : B.D.B. 1stth Prof.

Candidate's Name : YASH MEHTA

Roll No. : 1979-1092

Parent's Name : RAKESH KUMAR / SHARATI BALA MEHTA

Enrol No. / M : 190164

Institution's Name : I.D.S.T., KATRABAD, HAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOTAL	
			TH	ORAL	INTASS	TOT	ORAL	INTASS		TOT
			70	20	10	100	50	10		100
PROSTHODONTICS	011		46	16	08	70	60	06	66	136
CONSERVATIVE DENTISTRY & ENDODONTICS	012		49	19	09	70	72	06	80	150
PEDODONTICS	013		41	18	08	67	67	08	75	142
ORAL SURGERY & ANAESTHESIA	014		36	13	07	56	50	07	57	113
PERIODONTICS	015		36	16	08	60	54	07	61	121
ORTHODONTICS	016		47	16	06	71	75	08	83	154
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		43	17	08	68	50	07	57	125
PUBLIC HEALTH DENTISTRY	018		40	18	08	66	53	08	61	127
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED			RESULT		
GRAND TOTAL		1600	800		1070			PASS		

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date: 01/04/24

CHECKED BY:	
1.	2.
FULL SIGNATURE	FULL SIGNATURE
AYADHESH KUMAR	HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal

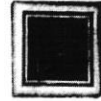


Sr. No. Prof. 2K22 1066959

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : RUCHIKA

Roll No. : 199261067

Parent's Name : NARESH / ANITA

Enrol No. : M 1901278

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL					
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT	
			70	20	10	100	70	10	100	200	
PROSTHODONTICS	011		38	14	07	59	53	08	61	120	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		39	17	07	63	60	07	67	130	
PEDODONTICS	013		43	14	07	64	59	07	66	130	
ORAL SURGERY & ANEA- STHESIA	014		37	13	06	56	51	08	59	115	
PERIODONTICS	015		42	14	08	64	53	06	59	123	
ORTHODONTICS	016		43	12	07	62	52	07	59	121	
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		39	17	09	64	51	07	58	122	
PUBLIC HEALTH DENTISTRY	018		40	17	07	64	52	06	58	122	
GRAND TOTAL		1600				300			983	PASS	

Ruchika
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>Avadhesh Kumar</i> AVADHESH KUMAR	2. FULL SIGNATURE <i>Harish Kumar</i> HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

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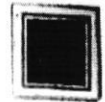


Sr. No. Prof. 2K22 1066906

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

Class/Course : B.D.S. (P.H.D. GRAD.)



Candidate's Name : NIKHIL ANAND

Roll No. : 10000000000000000000

Parent's Name : SOM BANI CHANDR LALWANI - NARITA DEVI

Enrol No. : M 10000000000000000000

Institution's Name : D.D. COLLEGE, RAIPUR, CHHATTISGARH

SUBJECT	CODE NO.	MAX MARKS THEORY MARKS	THEORY			PRACTICAL				
			70	20	10	100	100	100	100	100
PROFESORION ACTS	011		27	13	07	47	53	57	40	40
CONSERVATIVE DENTISTRY & ENDODONTICS	012		31	17	05	54	43	56	53	47
PEDIODONTICS	013		24	16	05	45	50	51	55	40
ORAL SURGERY & ANEA-ESTHETICS	014		22	08	08	22	24	28	24	20
ORAL DENTISTRY	015		15	11	07	43	48	47	44	40
ORAL PATHOLOGY	016		05	11	05	15	15	15	10	10
PUBLIC HEALTH DENTISTRY	017		08	08	08	10	10	10	10	10

	MAX. MARKS	THEO. MARKS	MARKS OBTAINED	RESULT
GRAND TOTAL	2400	700	540	PAILED

Nikhil Anand.
24/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date :

CHECKED BY:	
1. FULL SIGNATURE <i>AYADHESH...</i>	2. FULL SIGNATURE <i>HARISH KUNAR</i>
FULL NAME	FULL NAME

HARISH KUNAR
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1066960

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SAFIYA

Roll No. : 199201063

Parent's Name : MOHAMMAD LATIF QATA / ZAINAB

Enrol No. : M 1901279

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL					
			TH	ORAL	INT	ASS	TOT	CLI	INT	ASS	TOT	G.TOT
			70	20	10		100	90	10	100	200	
PROSTHODONTICS	011		41	16	08		65	60	08	68	133	
CONSERVATIVE DENTISTRY & ENDODONTICS	012		41	18	08		67	64	08	72	139	
PEDODONTICS	013		40	14	08		62	64	08	72	134	
ORAL SURGERY & ANAESTHESIA	014		45	15	08		68	64	08	72	140	
PERIODONTICS	015		46	18	08		72	58	07	65	137	
ORTHODONTICS	016		48	17	09		74	74	07	83	157	
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		49	18	09		76	52	08	60	136	
PUBLIC HEALTH DENTISTRY	018		47	18	08		73	50	07	57	130	
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED				RESULT			
GRAND TOTAL		1600	800		1106				PASS			

Safiya
7/10/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1066961

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB - 2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SAKET KUMAR

Roll No. : 199901070

Parent's Name : AJAY KUMAR SINGH / ANITA DEVI

Enrol No. : M 1901281

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		31	16	00	55	61	08	69	124
CONSERVATIVE DENTISTRY & ENDODONTICS	012		38	17	08	63	62	07	69	132
PEDODONTICS	013		34	14	07	55	62	07	69	124
ORAL SURGERY & ANEAESTHESIA	014		32	15	08	55	53	07	60	115
PERIODONTICS	015		20	15	08	*43	53	06	59	*102
ORTHODONTICS	016		46	16	07	69	50	08	66	135
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		37	17	09	63	51	07	58	121
PUBLIC HEALTH DENTISTRY	018		39	18	08	65	52	08	60	125
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		978		FAILED IN 015			

Received
Saket Kumar.
30/09/24.

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1066962

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : SANJANA SUMAN

Roll No. : 19771971

Parent's Name : SHAILENDRA KUMAR DUBEY / SAROJ DUBEY

Enrol No. : M 1901492

Institution's Name : I.D.S.T., KADROBAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL						
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT		
			70	20	10	100	90	10	100	200		
PROSTHODONTICS	011		32	16	08	56	57	08	65	121		
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		37	18	08	63	67	08	75	138		
PEDODONTICS	013		42	14	08	64	66	08	74	138		
ORAL SURGERY & ANEA- STHESIA	014		32	14	07	53	64	07	71	124		
PERIODONTICS	015		41	15	08	64	52	06	58	122		
ORTHODONTICS	016		52	16	07	75	71	07	78	153		
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		38	17	09	64	51	08	59	123		
PUBLIC HEALTH DENTISTRY	018		35	18	08	61	57	08	65	126		
			MAX. MARKS			MIN. MARKS			MARKS OBTAINED			RESULT
GRAND TOTAL			1600			800			1045			PASS

Sanjana Suman
18/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>AVADHESH KUMAR</i> FULL NAME	2. FULL SIGNATURE <i>HARISH KUMAR</i> FULL NAME

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Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Handwritten signature

Principal

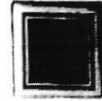


Sr. No. Prof. 2K22 1066963

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SATYAM SHARMA

Roll No. : 199991077

Parent's Name : SANJAY SHARMA / SARIKA SHARMA

Enrol No. : M 1901282

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CL.I	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		39	17	09	65	71	09	80	145
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		39	19	09	67	68	09	77	144
PEDODONTICS	013		40	14	08	62	64	08	72	134
ORAL SURGERY & ANEA- STHESIA	014		37	16	08	61	50	07	57	118
PERIODONTICS	015		38	17	08	63	55	07	62	125
ORTHODONTICS	016		50	18	10	78	74	09	83	161
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		29	19	09	57	54	09	63	120
PUBLIC HEALTH DENTISTRY	018		55	19	09	83	62	09	71	154
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL		1600	800		1101		PASS			

Satyam
15/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AWADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

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C.C.S. University Meerut

Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066964

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. -2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SHAFIA AUNJUM

Roll No. : 199931073

Parent's Name : MOHAMMAD RAFIQ MITR / SAKEENA

Enrol No. : M 1901283

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		40	17	08	65	68	09	77	142
CONSERVATIVE DENTISTRY & ENDODONTICS	012		44	19	09	72	65	08	73	146
PEDODONTICS	013		43	14	08	65	66	08	74	139
ORAL SURGERY & ANEA- STHESIA	014		36	15	09	60	52	08	60	120
PERIODONTICS	015		48	16	08	72	52	07	59	131
ORTHODONTICS	016		44	18	10	72	71	07	78	150
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		31	19	09	59	55	09	64	123
PUBLIC HEALTH DENTISTRY	018		48	17	08	73	54	08	62	135
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL			1600		300	1085		PASS		

Shafia
30/09/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE	2. FULL SIGNATURE
AYADHESH KUMAR	HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal

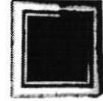


Sr. No. Prof. 2K22 1066965

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : SHAGUN CHAUHAN

Roll No. : 199901074

Parent's Name : SANJAY CHAUHAN / SNEH CHAUHAN

Enrol No. : M 1901284

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		41	16	08	65	50	08	66	131
CONSERVATIVE DENTISTRY & ENDODONTICS	012		44	18	08	70	67	08	75	145
PEDODONTICS	013		42	14	09	65	69	09	78	143
ORAL SURGERY & ANEA- STHESIA	014		39	14	07	60	62	08	70	130
PERIODONTICS	015		40	19	08	67	64	09	73	140
ORTHODONTICS	016		48	18	10	76	68	09	77	153
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		38	18	09	65	51	09	60	125
PUBLIC HEALTH DENTISTRY	018		40	18	08	66	64	08	72	138
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1105		PASS			

18-6-24
Shagun

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal

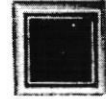


Sr. No. Prof. 2K22 1066932

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MOHIT KUMAR

Roll No. : 199991034

Parent's Name : MOHAN KUMAR / SUMITA KUMARI

Enrol No. : M 1901250

Institution's Name : I.D.S.T., KANPUR, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		26	15	08	*49	60	08	68	*117
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		39	17	07	63	60	07	72	135
PERIODONTICS	013		35	14	07	56	62	07	69	125
ORAL SURGERY & ANEA- STHESIA	014		36	14	07	57	58	07	65	122
PERIODONTICS	015		26	15	07	*48	50	07	57	*105
ORTHODONTICS	016		18	17	09	*44	74	08	82	*126
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		32	17	09	58	49	08	57	115
PUBLIC HEALTH DENTISTRY	018		41	18	08	67	56	07	63	130
			MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT		
GRAND TOTAL			1600	800		975		FAILED		
								011		
								015		
								016		

Mohit Kumar
24/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE <i>Ayad Hesh Kumar</i> AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE <i>Harish Kumar</i> HARISH KUMAR FULL NAME

Harish Kumar
Controller of Examination
C.C.S. University Meerut
Institute of Dental Studies & Technologies

[Signature]

Principal

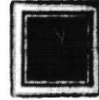


Sr. No. Prof. 2K22 1066941

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. -2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : POOJA JOSHI

Roll No. : 199921046

Parent's Name : NAVEEN CHANDRA JOSHI / BHAWANA JOSHI

Enrol No. : M 1901260

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	20	10	100 50	200 100
PROSTHODONTICS	011		37	15	08	60	58	08	66	126
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		34	17	07	58	63	07	70	128
PEDODONTICS	013		24	14	05	*43	52	05	57	*100
ORAL SURGERY & ANEA- STHESIA	014		32	14	07	53	62	06	68	121
PERIODONTICS	015		44	15	08	67	52	07	59	126
ORTHODONTICS	016		32	13	07	52	63	07	70	122
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		16	18	08	*42	47	08	55	*97
PUBLIC HEALTH DENTISTRY	018		40	18	08	66	50	06	56	122
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	942	FAILED				
						013 017				

Received Pooja Joshi
 (Aparajita Kumari)
 Batch - 2019-2023 Date - 22/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal



Sr. No. Prof. 2K22 1066942

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : POOJA TYAGI

Roll No. : 199901047

Parent's Name : MANOJ TYAGI / SUSHMA TYAGI

Enrol No. : M 1901261

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		34	15	08	57	58	08	66	123
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		39	17	08	64	66	07	73	137
PEDODONTICS	013		33	15	07	55	61	07	68	123
ORAL SURGERY & ANEA- STHESIA	014		34	14	07	55	62	07	69	124
PERIODONTICS	015		35	15	08	58	53	07	60	118
ORTHODONTICS	016		46	15	07	68	68	08	76	144
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		22	18	09	*49	47	08	55	*104
PUBLIC HEALTH DENTISTRY	018		42	18	08	68	52	07	59	127
MAX. MARKS			MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL			1600			800			1000	
									PASS	
									G-1	

Pooja Tyagi
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. _____ FULL SIGNATURE	2. _____ FULL SIGNATURE
AVADHESH KUMAR FULL NAME	HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

Principal

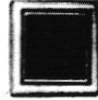


Sr. No. Prof. 2K22 1066943

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : POORVI N. SWAROOF

Roll No. : 199981042

Parent's Name : NAGRAJA M S / PREMALATHA NAGRAJA

Enrol No. : M 1901262

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100	90	10		100
PROSTHODONTICS	011		41	17	08	66	61	09	70	136
CONSERVATIVE DENTISTRY & ENDDONTICS	012		40	18	07	65	71	07	78	143
PEDODONTICS	013		43	15	08	66	66	08	74	140
ORAL SURGERY & ANEA- STHESIA	014		44	16	08	68	65	08	73	141
PERIODONTICS	015		34	16	08	58	54	07	61	119
ORTHODONTICS	016		47	15	07	69	75	10	85	154
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		39	18	09	66	51	09	60	126
PUBLIC HEALTH DENTISTRY	018		43	18	08	69	55	08	63	132
GRAND TOTAL		1600	800			1091			PASS	

[Handwritten Signature]
25/06/2024

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>[Signature]</i> AVADHESH KUMAR	2. FULL SIGNATURE <i>[Signature]</i> HARISH KUMAR
FULL NAME	FULL NAME

[Handwritten Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Handwritten Signature]

Principal



Sr. No. Prof. 2K22 1066944

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : PRACHI SHARMA

Roll No. : 199981049

Parent's Name : PRADEEP KUMAR SHARMA / DIMPLE RANI

Enrol No. : M 1901263

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100 50	90	10	100 50	
PROSTHODONTICS	011		38	16	08	62	60	08	68	130
CONSERVATIVE DENTISTRY & ENDODONTICS	012		40	17	08	65	61	08	69	134
PEDODONTICS	013		37	16	08	61	66	08	74	136
ORAL SURGERY & ANEAESTHESIA	014		44	16	08	68	58	08	66	134
PERIODONTICS	015		36	16	08	60	53	07	60	120
ORTHODONTICS	016		37	18	10	65	76	08	84	149
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		45	19	09	73	52	08	60	133
PUBLIC HEALTH DENTISTRY	018		42	19	09	70	65	09	74	144
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1079		PASS			

Prachi
18/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY :	
1.	2.
FULL SIGNATURE AYADHRESH KUMAR	FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

Principal



Sr. No. Prof. 2K22 1066945

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : PRACHI SIDDHU

Roll No. : 199981050

Parent's Name : SATYAVEER SINGH SIDDHU / MANJU SIDDHU

Enrol No. : M 12409288

Institution's Name : I.D.S.F.- KADROBAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
		MIN MARKS	70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		40	16	08	64	60	08	68	132
CONSERVATIVE DENTISTRY & ENDO DONTICS	012		43	18	08	69	63	07	70	139
PEDODONTICS	013		37	14	08	59	67	08	75	134
ORAL SURGERY & ANEA- STHESIA	014		42	14	08	64	61	08	69	133
PERIODONTICS	015		38	17	08	63	54	07	61	124
ORTHODONTICS	016		42	18	10	70	75	09	84	154
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		44	19	09	72	48	09	57	129
PUBLIC HEALTH DENTISTRY	018		37	18	08	63	58	08	66	129
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED		RESULT		
GRAND TOTAL		1600	800			1074		PASS		

Prachi Siddhu
7/11/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE <i>AVADHESH KUMAR</i>	2. FULL SIGNATURE <i>HARISH KUMAR</i>
FULL NAME AVADHESH KUMAR	FULL NAME HARISH KUMAR

[Signature]
Controller of Examination
C.C.S. University Meerut

Principal
[Signature]
Department of Dental Studies & Technologies

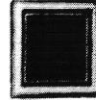


Sr. No. Prof. 2K22 1066946

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : PRADUMAN KUMAR

Roll No. : 199981051

Parent's Name : BIDYANAND SINGH / MUNNI DEVI

Enrol No. : M 1901264

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		43	16	08	67	61	08	69	136
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		41	18	09	68	71	08	79	147
PEDODONTICS	013		34	14	08	58	63	08	71	129
ORAL SURGERY & ANEA- STHESIA	014		33	15	08	56	54	08	62	118
PERIODONTICS	015		30	15	08	53	50	06	56	109
ORTHODONTICS	016		43	15	07	65	74	09	83	148
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		36	17	09	62	51	08	59	121
PUBLIC HEALTH DENTISTRY	018		36	18	08	62	58	08	66	128
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED		RESULT		
GRAND TOTAL		1600	800			1036		PASS		

*Revised answer
Praduman Kumar
19/06/24*

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal



Sr. No. Prof. 2K22 1066947

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB. 2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : PRAGYA MAHOUR

Roll No. : 199981000

Parent's Name : JAGDISH PRASAD / RAJ KUMARI

Enrol No. : M 1901265

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CL	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		37	16	06	61	62	08	70	131
CONSERVATIVE DENTISTRY & ENDODONTICS	012		43	18	07	68	53	07	70	138
PERIODONTICS	013		42	18	08	68	63	08	71	139
ORAL SURGERY & ANAESTHESIA	014		45	14	09	68	63	08	71	139
PERIODONTICS	015		43	14	08	65	52	07	59	124
ORTHODONTICS	016		48	16	07	71	78	09	87	158
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		40	17	09	66	51	08	59	125
PUBLIC HEALTH DENTISTRY	018		37	17	07	61	52	06	58	119
GRAND TOTAL		1500	800			1073			PASS	

Pragya Mahour
22/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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C.C.S, University Meerut

Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066948

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

17.07.2024



Class/Course : B.B.S. - IVth Prof.

Candidate's Name : PRAGYA SUMAN

Roll No. : 199981053

Parent's Name : SANJAY KUMAR / CHANDANI KUMARI

Enrol No. : M 1901266

Institution's Name : I.D.S.T. - KADRAHAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
		MIN MARKS	70	20	10	100	90	10	100	200
						50			50	100
PROSTHODONTICS	011		39	16	08	63	63	08	71	134
CONSERVATIVE DENTISTRY & ENDODONTICS	012		44	17	07	68	63	07	70	138
PEDODONTICS	013		44	14	08	66	66	08	74	140
ORAL SURGERY & ANEA- STHESIA	014		41	14	09	64	50	07	57	121
PERIODONTICS	015		35	14	08	57	51	06	57	114
ORTHODONTICS	016		38	16	08	62	66	08	74	136
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		50	17	09	76	51	09	60	136
PUBLIC HEALTH DENTISTRY	018		39	17	09	67	67	08	75	142
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL		1600	800			1061			PASS	

*Received Original
Pragya Suman
19/07/24.*

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

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1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal



Sr. No. Prof. 2K22 1066949

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

EEF 2024



Class/Course : B.D.S. - Ist Year

Candidate's Name : PRAGTI MAHADEVA

Roll No. : 192881054

Parent's Name : SUBHENDU MAHADEVA / RANJEETA MAHADEVA

Enrol No. : M 1901267

Institution's Name : I.D.S.T. - KANPUR - GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			IN	ORAL	THEORY	TOT	ORAL	PRACTICAL		TOT
			70	20	10	100	50	10		100
PROSTHODONTICS	011		41	15	86	64	56	68	64	192
COMPARATIVE DENTISTRY & ENDODONTICS	012		41	12	87	65	60	67	69	134
PEDODONTICS	013		43	11	87	61	51	67	58	122
ORAL SURGERY & ANAESTHESIA	014		43	17	85	66	71	67	60	146
PERIODONTICS	015		40	17	87	67	54	67	61	124
TELE DENTISTRY	016		41	16	87	64	60	66	76	144
ORAL MEDICINE - DIAGNOSIS & RADIOLOGY	017		37	17	86	63	52	65	61	124
ADJUTANT HEALTH DENTISTRY	018		36	17	88	61	55	67	62	127
GRAND TOTAL		1500			800			1044	PASS	

Received
21/06/24
Pragti

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/06/24

Date :

CHECKED BY:	
1. FULL SIGNATURE <i>AYUSH KUMAR</i> FULL NAME	2. FULL SIGNATURE <i>HARISH KUMAR</i> FULL NAME

Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066950

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : PRAVEEN KUMAR

Roll No. : 199981055

Parent's Name : JITENDAR PRASAD GUPTA / ANITA DEVI

Enrol No. : M 1901268

Institution's Name : I.D.S.F., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		33	15	08	56	60	08	68	124
CONSERVATIVE DENTISTRY & ENDODONTICS	012		41	17	07	65	61	07	68	133
PEDODONTICS	013		41	12	08	61	64	08	72	133
ORAL SURGERY & ANEA- STHESIA	014		37	15	07	59	51	08	59	118
PERIODONTICS	015		34	14	08	56	55	06	61	117
ORTHODONTICS	016		44	14	07	65	73	08	81	146
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		36	18	09	63	51	09	60	123
PUBLIC HEALTH DENTISTRY	018		35	17	08	60	50	07	57	117
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL			1600		800	1011		PASS		

Praveen
20/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]
Principal

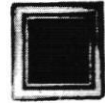


Sr. No. Prof. 2K22 1066933

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MOHIT SHARMA

Roll No. : 199981035

Parent's Name : VIJAY RAM / LEEFLA DEVI

Enrol No. : M 1901251

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL			G.TOT	
			TH	ORAL	INTASS	TOT	CLI	INTASS		TOT
			70	20	10	100 50	90	10		100 50
PROSTHODONTICS	011		39	16	08	63	62	08	70	133
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		39	19	09	67	71	09	80	147
PEDODONTICS	013		40	20	07	67	61	07	68	135
ORAL SURGERY & ANEA- STHESIA	014		45	12	08	65	62	09	77	142
PERIODONTICS	015		34	17	08	59	59	07	66	125
ORTHODONTICS	016		36	18	08	62	62	09	91	153
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		31	19	09	59	59	08	67	126
PUBLIC HEALTH DENTISTRY	018		46	18	08	72	58	08	66	138
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	1099	PASS				

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

[Signature]
Controller of Examination
C.C.S. University Meerut

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Sr. No. Prof. 2K22 1066951

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : PRITI KUMARI

Roll No. : 1999-1056

Parent's Name : KRITYA NAND MANDAL / POONAM DEVI

Enrol No. : M 1901269

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	90	10	100 50	200 100
PROSTHODONTICS	011		23	15	06	*46	58	08	66	*112
CONSERVATIVE DENTISTRY & ENDODONTICS	012		37	18	08	63	65	08	73	136
PEDODONTICS	013		35	14	07	56	61	07	68	124
ORAL SURGERY & ANEA- STHESIA	014		30	14	07	51	53	07	60	111
PERIODONTICS	015		26	14	08	*48	53	06	59	*107
ORTHODONTICS	016		39	16	07	62	72	08	80	142
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		32	18	09	59	51	08	59	118
PUBLIC HEALTH DENTISTRY	018		40	17	08	65	50	07	57	122
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		972		FAILED			
							011 015			

Priti Kumari
30/9/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

CHECKED BY :	
1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Pr...
Controller of Examination
C.C.S. University Meerut

Institute of Dental Studies & Technologies

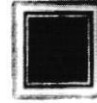
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Sr. No. Prof. 2K22 1066952

CH. CHARAN SINGH UNIVERSITY, MEERUT
STATEMENT OF MARKS - EXAMINATION

FEB 2024



Class/Course : B.B.S. 1st YR. SEM. I

Candidate's Name : RACHNA SHARMA

Roll No. : 1009-1009

Parent's Name : SUSHEEL KUMAR & DEEYANNA DEVI

Enrol No. : M 106.271

Institution's Name : T.D.S.T. - KALKARABADI, CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS NUM MARKS	THEORY			PRACTICAL			C. TOT	
			TH	ORA	IMP/SSC	PT	CL	IN/SSC		
PROSTHODONTICS	011		45	15	08	66	56	00	66	132
CONSERVATIVE DENTISTRY & ENDODONTICS	012		46	17	00	65	65	00	74	139
PERIAPICAL	013		37	10	07	54	40	07	67	125
ORAL SURGERY & ANAESTHESIA	014		34	14	07	55	50	07	62	117
ORTHODONTICS	015		31	14	00	53	52	06	58	111
OROPHARYNGOLOGY	016		38	10	07	60	51	00	64	104
ORAL MEDICINE & RADIOLOGY	017		31	14	09	58	51	09	69	117
PERIAPICAL DENTISTRY	018		41	17	08	66	50	07	69	125
GRAND TOTAL		1600				990				PASS

Rachna
20/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date :

01/04/24

CHECKED BY:	
1. FULL SIGNATURE AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

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C.C.S. University Meerut

Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066953

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : RAINA AFRI

Roll No. : 199991059

Parent's Name : TAHIR HUSSAIN / NAGMA PARWEEN

Enrol No. : M 1901481

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		26	16	07	*49	52	07	59	*108
CONSERVATIVE DENTISTRY & ENDODONTICS	012		34	17	07	58	62	07	69	127
PEDODONTICS	013		40	12	05	57	50	05	55	112
ORAL SURGERY & ANEA- STHESIA	014		37	14	08	59	65	08	73	132
PERIODONTICS	015		32	15	08	55	40	06	54	109
ORTHODONTICS	016		39	14	07	60	59	08	67	127
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		22	19	09	50	56	08	64	114
PUBLIC HEALTH DENTISTRY	018		37	17	08	62	56	08	64	126
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		955		PASS			

6-1

Raina Afri
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date: 01/04/24

CHECKED BY:	
1. FULL SIGNATURE AVADHESH KUMAR FULL NAME	2. FULL SIGNATURE HARISH KUMAR FULL NAME

Controller of Examination
C.C.S. University Meerut

Department of Dental Studies & Technologies

Principal

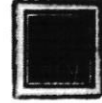


Sr. No. Prof. 2K22 1066954

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : RAMIT MISHRA

Roll No. : 199981060

Parent's Name : SANTOSH KUMAR MISHRA / KUMKUM MISHRA

Enrol No. : M 1901272

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	70	10	100	200
PROSTHODONTICS	011		39	16	07	62	58	08	66	128
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		37	17	08	62	62	07	69	131
PEDODONTICS	013		33	14	06	53	56	06	62	115
ORAL SURGERY & ANEA- STHESIA	014		37	13	08	58	60	08	68	126
PERIODONTICS	015		36	16	08	60	54	07	61	121
ORTHODONTICS	016		42	15	07	64	66	08	74	138
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		34	17	09	60	51	08	59	119
PUBLIC HEALTH DENTISTRY	018		40	18	08	66	52	07	59	125
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1003		PASS			

Received Original
20/06/24

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Date : 01/04/24

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Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066955

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEA-2024

Class/Course : B.D.S. - IVth Prof.

Candidate's Name : RASHI YADAV

Roll No. : 179901061

Parent's Name : KISHAN YADAV / RAJMI

Enrol No. : M 1901273

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		47	16	08	71	62	08	70	141
CONSERVATIVE DENTISTRY & ENDO DONTICS	012		36	18	07	61	63	07	70	131
PEDODONTICS	013		44	14	08	66	64	08	72	138
ORAL SURGERY & ANEA- STHESIA	014		37	12	07	56	50	08	58	114
PERIODONTICS	015		36	16	08	60	55	07	62	122
ORTHODONTICS	016		38	11	09	60	60	08	68	130
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		42	17	09	68	51	07	58	126
PUBLIC HEALTH DENTISTRY	018		46	18	08	72	54	07	61	133
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL			1600		800	1035		PASS		

Received original
Rashi Yadav
20/04/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

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FULL NAME	FULL NAME

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C.C.S. University Meerut

Institute of Dental Studies & Technologies

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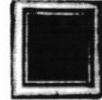


Sr. No. Prof. 2K22 1066956

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FFK-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : RAVNEET KOUR

Roll No. : 192201062

Parent's Name : RACHHPAL SINGH / SUKHVINDER KOUR

Enrol No. : M 1901274

Institution's Name : T.D.S.T., KADRABAD, CHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				G.TOT
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	
			70	20	10	100 50	70	10	100 50	
PROSTHODONTICS	011		43	16	09	68	65	08	73	141
CONSERVATIVE DENTISTRY & ENDOODNTICS	012		35	17	07	59	61	07	68	127
PEDODONTICS	013		41	14	08	63	63	08	71	134
ORAL SURGERY & ANEA- STHESIA	014		40	15	07	62	54	07	61	123
PERIODONTICS	015		40	14	08	62	52	07	59	121
ORTHODONTICS	016		35	15	07	57	62	08	70	127
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		41	17	09	67	51	08	59	126
PUBLIC HEALTH DENTISTRY	018		39	18	08	65	60	07	67	132
		MAX. MARKS	MIN. MARKS			MARKS OBTAINED			RESULT	
GRAND TOTAL		1600	800			1031			PASS	

Ravneet Kour
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date :

01/04/24

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1.	2.
FULL SIGNATURE	FULL SIGNATURE
AVADHESH KUMAR	HARISH KUMAR
FULL NAME	FULL NAME

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Sr. No. Prof. 2K22 1066934

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : MONIKA DEVI

Roll No. : 199901036

Parent's Name : MANOHAR LAL / SUDESH RANI

Enrol No. : M 1901252

Institution's Name : I.D.S.T. - KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		33	16	08	57	81	08	69	126
CONSERVATIVE DENTISTRY & ENDOODONTICS	012		38	18	09	65	83	09	72	137
PEDODONTICS	013		36	16	07	59	81	07	68	127
ORAL SURGERY & ANEA- STHESIA	014		41	18	09	68	89	08	77	145
PERIODONTICS	015		37	17	08	62	87	07	64	126
ORTHODONTICS	016		26	17	08	51	76	09	85	136
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		27	19	09	55	80	08	68	123
PUBLIC HEALTH DENTISTRY	018		46	17	08	71	82	08	60	131
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1051		PASS			

Monika Devi
15/04/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

CHECKED BY :	
1. FULL SIGNATURE AYADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

Controller of Examination
C.C.S. University Meerut

Department of Dental Studies & Technologies

Principal

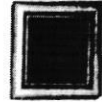


Sr. No. Prof. 2K22 1066935

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : MUSKAN PACHAURI

Roll No. : 199901037

Parent's Name : K K PACHAURI / RENU PACHAURI

Enrol No. : M 1901253

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		39	15	08	62	59	08	67	129
CONSERVATIVE DENTISTRY & ENDODONTICS	012		45	17	08	70	65	08	73	143
PEDODONTICS	013		40	16	07	63	59	07	66	129
ORAL SURGERY & ANEA- STHESIA	014		44	15	07	66	69	08	77	143
PERIODONTICS	015		40	14	08	62	52	07	59	121
ORTHODONTICS	016		50	14	07	71	71	09	80	151
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		25	18	09	52	48	07	55	107
PUBLIC HEALTH DENTISTRY	018		53	18	08	79	51	07	58	137
			MAX. MARKS		MIN. MARKS	MARKS OBTAINED		RESULT		
GRAND TOTAL			1600		800	1060		PASS		

15/6/24 Muskan

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01/04/24

Date :

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C.C.S. University Meerut

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Sr. No. Prof. 2K22 1066936

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : NABEELA NABI

Roll No. : 199991038

Parent's Name : GHULAM NABI SOFI / GULSHAN ARA

Enrol No. : M 1901254

Institution's Name : I.D.S.F., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	90	10	100 50	200 100
PROSTHODONTICS	011		36	17	09	62	60	08	68	130
CONSERVATIVE DENTISTRY & ENDODONTICS	012		40	17	07	64	63	07	70	134
PEDODONTICS	013		47	14	05	66	53	05	58	124
ORAL SURGERY & ANEA- STHESIA	014		45	16	08	69	70	08	78	147
PERIODONTICS	015		39	14	08	61	50	07	57	118
ORTHODONTICS	016		45	16	08	69	73	10	83	152
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		40	18	09	67	50	08	58	125
PUBLIC HEALTH DENTISTRY	018		42	18	08	68	51	07	58	126
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	1056	PASS				

Nabeela
15/06/2024

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Date :

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1. FULL SIGNATURE <i>[Signature]</i> AYADHESH KUMAR FULL NAME	2. FULL SIGNATURE <i>[Signature]</i> HARISH KUMAR FULL NAME

[Signature]
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Institute of Dental Studies & Technologies

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Sr. No. Prof. 2K22 1066937

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024

Class/Course : B.D.S.- IVth Prof.

Candidate's Name : NAVYA TYAGI

Roll No. : 199991039

Parent's Name : SANDEEP TYAGI / ANITA TYAGI

Enrol No. : M 1901255

Institution's Name : I.D.S.C., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY				PRACTICAL			
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
FROSTHODONTICS	011		34	15	08	57	59	08	67	124
CONSERVATIVE DENTISTRY & ENDDONTICS	012		39	18	08	65	62	08	70	135
PEDODONTICS	013		35	14	07	56	60	07	67	123
ORAL SURGERY & ANEA- STHESIA	014		34	13	08	55	63	07	70	125
PERIODONTICS	015		32	16	07	55	51	07	58	113
ORTHODONTICS	016		40	16	08	64	67	08	75	139
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		27	17	09	53	48	08	56	109
PUBLIC HEALTH DENTISTRY	018		46	17	08	71	50	08	58	129
			MAX. MARKS	MIN. MARKS	MARKS OBTAINED	RESULT				
GRAND TOTAL			1600	800	997	PASS				

Navya
01/04/24

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Date :

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FULL NAME	FULL NAME

Harish
Controller of Examination
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Studies & Technologies

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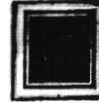


Sr. No. Prof. 2K22 1066938

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : NEELAKASH CHINGAKHAM

Roll No. : 199981040

Parent's Name : CH MANGISING / CH D KSH MACHATOMBI DEVI

Enrol No. : M 1901256

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		34	16	08	58	60	08	68	126
CONSERVATIVE DENTISTRY & ENDODONTICS	012		47	17	07	71	68	08	76	147
PEODONTICS	013		44	18	08	70	66	08	74	144
ORAL SURGERY & ANEA- STHESIA	014		37	13	08	58	68	07	75	133
PERIODONTICS	015		31	16	08	55	55	07	62	117
ORTHODONTICS	016		31	18	10	59	80	10	90	149
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		35	17	09	61	49	08	57	118
PUBLIC HEALTH DENTISTRY	018		38	18	08	64	51	08	59	123
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		1057		PASS			

Neelakash.
15/6/24.

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01/04/24

Date :

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1. FULL SIGNATURE AVADHESH KUMAR	2. FULL SIGNATURE HARISH KUMAR
FULL NAME	FULL NAME

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C.C.S. University Meerut

Institute of Dental Studies & Technologies

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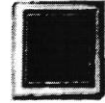


Sr. No. Prof. 2K22 1066939

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S.- IVth Prof.

Candidate's Name : PARMJEET

Roll No. : 199981044

Parent's Name : RAJESH KUMAR / SUMITA DEVI

Enrol No. : M 1901258

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	DRAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100	90	10	100	200
PROSTHODONTICS	011		40	18	09	67	71	09	80	147
CONSERVATIVE DENTISTRY & ENDO DONTICS	012		43	18	09	70	69	09	78	148
PEDODONTICS	013		41	14	08	63	67	08	75	138
ORAL SURGERY & ANEA- STHESIA	014		45	14	07	66	66	08	74	140
PERIODONTICS	015		43	18	08	69	55	07	62	131
ORTHODONTICS	016		41	18	10	69	77	10	87	156
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		45	19	09	73	51	09	60	133
PUBLIC HEALTH DENTISTRY	018		51	18	09	78	58	09	67	145
			MAX. MARKS	MIN. MARKS		MARKS OBTAINED	RESULT			
GRAND TOTAL			1600	800		1138	PASS			

Parmjeet
21/06/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



01/04/24

Date :

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1. FULL SIGNATURE <i>[Signature]</i>	2. FULL SIGNATURE <i>[Signature]</i>
FULL NAME AYASH KUMAR	FULL NAME HARISH KUMAR

[Signature]
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C.C.S. University Meerut

Institute of Dental Studies & Technologies

[Signature]

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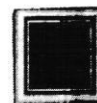


Sr. No. Prof. 2K22 1066940

CH. CHARAN SINGH UNIVERSITY, MEERUT

STATEMENT OF MARKS - EXAMINATION

FEB.-2024



Class/Course : B.D.S. - IVth Prof.

Candidate's Name : PIYUSH KUMAR RANJAN

Roll No. : 199981045

Parent's Name : SHASHI BHUSHAN TIWARY / ARTI DEVI

Enrol No. : M 1901259

Institution's Name : I.D.S.T., KADRABAD, GHAZIABAD

SUBJECT	CODE NO.	MAX MARKS MIN MARKS	THEORY			PRACTICAL				
			TH	ORAL	INTASS	TOT	CLI	INTASS	TOT	G.TOT
			70	20	10	100 50	90	10	100 50	200 100
PROSTHODONTICS	011		32	16	08	56	62	08	70	126
CONSERVATIVE DENTISTRY & ENDO DONTICS	012		33	18	08	59	63	08	71	130
PEDODONTICS	013		41	14	05	60	51	05	56	116
ORAL SURGERY & ANEA- STHESIA	014		33	14	07	54	64	07	71	125
PERIODONTICS	015		30	15	08	53	53	07	60	113
ORTHODONTICS	016		35	16	08	59	67	08	75	134
ORAL MEDICINE, DIAGNOSIS & RADIOLOGY	017		23	17	08	*48	50	08	58	*106
PUBLIC HEALTH DENTISTRY	018		43	17	08	68	50	08	58	126
		MAX. MARKS	MIN. MARKS		MARKS OBTAINED		RESULT			
GRAND TOTAL		1600	800		976		PASS G-2			

Piyush
15/6/24

In case of any discrepancy between the entries in the marksheet issued & in the University record, the University record shall be final.



Date : 01/04/24

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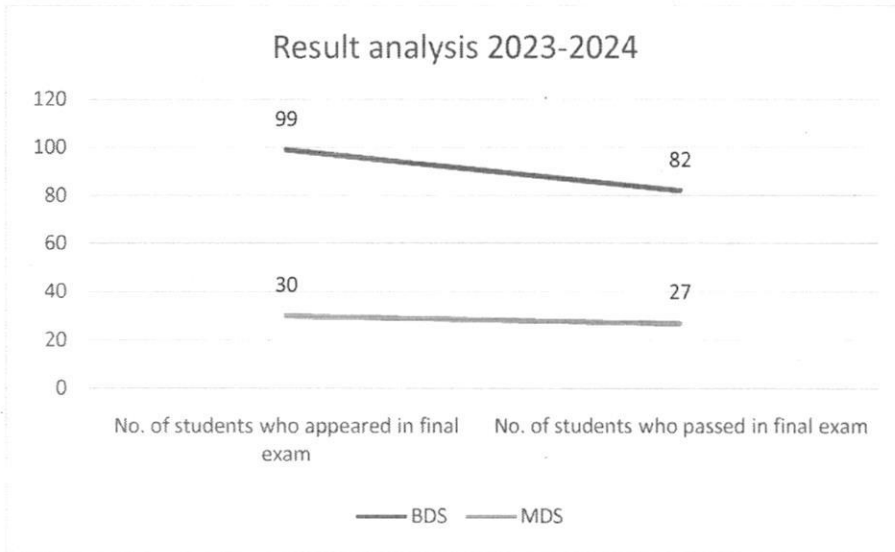
Controller of Examination
C.C.S. University Meerut


Department of Dental Studies & Technologies


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Office of the Principal




Dr. Nishi Agarwal
Principal

Institute of Dental Studies & Technologies

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