

# Revised Externship Schedule

Last date for submission of Application Form  
*Friday, 29<sup>th</sup> November 2024 upto 4:00 P.M.*

Date of Verification of documents  
*Thursday, 05<sup>h</sup> December 2024 upto 4:00 P.M.*

Date & Time of Interview  
*Thursday, 12<sup>th</sup> December, 2024 at 11:00 A.M.*

Venue  
*Conference Room, Faculty of Dentistry, JMI*

Display of list of selected candidates on Jamia website  
& Notice Board of Faculty of Dentistry  
*Tuesday, 17<sup>th</sup> December, 2024*

Starting date of Internship  
*Wednesday, 1<sup>st</sup> January, 2025*



FACULTY OF DENTISTRY  
JAMIA MILLIA ISLAMIA  
NEW DELHI-110025

Self  
attested  
Photo

Application for Externship BDS Program (2024-25)

1. Name of the Student: .....
2. Father's Name: .....
3. Date of Birth: .....
4. Nationality: .....
5. Religion: .....
6. Marital Status: .....
7. Belonging to OBC/SC/ST: .....
8. Address for Correspondence: .....
- .....
9. Email Id: ..... 10. Mobile No: .....
11. Name of the Institution with full Address where from he/she is pursuing the BDS Program:  
.....  
.....
12. Name and address of Affiliated University: .....
- .....
13. Date of Joining of the BDS Programme: .....
14. Date of passing of Final Examination BDS: .....
15. Reason for seeking internship at Jamia: .....
16. List of documents/Certificates attached: .....
- (Additional sheets may be use, if required) ,  
.....

.....  
(Signature of applicant Full)

**CHEK LIST OF DOCUMENTS FOR EXTERNSHIP**

S. No.	DOCUMENTS	Mark √ or X
01.	Application by the candidate giving reasons to do Internship at Faculty of Dentistry, JMI	
02.	No objection certificate from his/her parent institution clearly stating that the Institution is duly recognized by the Dental Council of India and during the period of his study i.e. from admission to his/her passing out was not derecognized by Dental Council of India.	
03.	Permission of the University to which his/her parent institution if affiliated to do Internship at Faculty of Dentistry, JMI subject to selection.	
04.	Character and conduct certificate of the student from the parent College/Institution.	
05.	Self attested photocopy of mark sheets of all the BDS examination (each part/year) passed.	
06.	Certificate of number of attempts & percentage of marks obtained in each part/year.	
07.	Documentary evidence, if distinction/medal, if any was awarded for any subject in University Examination.	
08.	An undertaking that the student is prepared to do internship at the rate of prescribed Internship stipend of Rs. 3,000/- per month and will deposit Rs. 1,75,000/- as Training Fees/Charges if selected for Internship.	
09.	Undertaking that he/she will follow all applicable rules and regulations of JMI while pursuing the internship program at Faculty of Dentistry, JMI	
10.	Undertaking that he/she would maintain good conduct, discipline and decorum of the Institution and the authorities of Faculty of Dentistry, JMI have the right to discontinue his/her internship at any time for his/her misconduct, indiscipline and unsatisfactory work without any liability on the university.	
11.	Two photographs, one self attested to be affixed on the application form and other without attestation.	

**10. Detail of BDS Examination Passed**

% OF MARKS	Paper No. I			Paper No. II			Paper No. III			Paper No. IV			Paper No. V			Paper No. VI			Paper No. VII			Paper No. VIII			Total %	
	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject	Name of Subject			
1 <sup>ST</sup> YEAR	2 <sup>ND</sup> YEAR	3 <sup>RD</sup> YEAR	FINAL YEAR	No. of extra attempt	% of marks in the subject	Distinction of medal in subject	No. of extra attempt	% of marks in the subject	Distinction of medal in subject	No. of extra attempt	% of marks in the subject	Distinction of medal in subject	No. of extra attempt	% of marks in the subject	Distinction of medal in subject	No. of extra attempt	% of marks in the subject	Distinction of medal in subject	No. of extra attempt	% of marks in the subject	Distinction of medal in subject	No. of extra attempt	% of marks in the subject	Distinction of medal in subject		
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( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	
( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	( )	
I Year	Overall Percentage																									
II Year																										
III Year																										
Final Year																										

**UNDERTAKING**

I, solemnly declare that the statements made above by me in this form are true and correct to the best of my knowledge and belief. If at any stage, it is found that facts have been concealed or misrepresented by me, my candidature for internship may be treated as cancelled. Without any liability on Jamia Millia Islamia.

Signature of the Candidate: \_\_\_\_\_

Name in block letter. : \_\_\_\_\_