

जामिया मिल्लिया इस्लामिया

(संसदीय अधिनियमानुसार केन्द्रीय विश्वविद्यालय)

मौलाना मोहम्मद अली जौहर मार्ग, नई दिल्ली-110025

संकाय अध्यक्ष विद्यार्थी कल्याण कार्यालय

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JAMIA MILLIA ISLAMIA

Accredited by NAAC in 'A++' Grade

(A Central University by Act of Parliament)

Maulana Mohammad Ali Jauhar Marg, New Delhi-110025

Office of the Dean Students' Welfare

E-mail : dsw@jmi.ac.in

Website : http://www.jmi.ac.in



September 03, 2025

### Greeting from Jamia Millia Islamia

Congratulations to the students of Faculty of Dentistry, JMI, for securing the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> ranks in the End Semester Examination of Academic Session 2023-24 (List attached).

The rank holders are advised to submit the copy of the following documents to the Scholarship Section of Dean, Students' Welfare Office latest by **03.10.2025** so that the payment of Merit/Central Scholarship may be made to you in time.

1. Photocopy of Student Identity Card of JMI
2. Photocopy of 1<sup>st</sup> page of Bank Passbook showing Account No. and IFSC code (Bank Account should be in your name)
3. Unique ID/Vendor ID is required for 1<sup>st</sup> and 2<sup>nd</sup> position holders to be created by the concerned department
4. Unique ID/Vendor ID is not required for 3<sup>rd</sup> and 4<sup>th</sup> position holders
5. Photocopy of Aadhar (in your name)
6. Final Year students are advised to refer Jamia Ordinance -31(Academic) Para 3.1 & 3.2 available at Jamia Website.

Treat it as most urgent.

(Prof. Neelofer Afzal)  
Dean Students' Welfare

Enclosure(s): List of students who secured 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> positions.

Copy to: 1) The Dean, Faculty of Dentistry, JMI.



**OFFICE OF THE CONTROLLER OF EXAMINATION  
JAMIA MILLIA ISLAMIA NEW DELHI-25**  
**LIST OF POSITION HOLDERS ANNUAL EXAMINATION-2023-24**  
**FACULTY OF DENTISTRY**  
**(for Scholarship)**

<b>BACHELOR OF DENTISTRY (BDS) PART-I</b>					
<b>RNO</b>	<b>NAME</b>	<b>ERNO</b>	<b>GTOT</b>	<b>RESULT</b>	<b>POSITION</b>
23BDS015	HARMANDEEP KAUR	23-82539	486	PASSED	I
23BDS040	KISA ZEHRA	23-82573	471	PASSED	II
23BDS001	AADIL SUHAIL	23-82525	458	PASSED	III
23BDS023	MD ARIF HUSSAIN	23-82547	457	PASSED	IV
<b>BACHELOR OF DENTISTRY (BDS) PART-II</b>					
<b>RNO</b>	<b>NAME</b>	<b>ERNO</b>	<b>GTOT</b>	<b>RESULT</b>	<b>POSITION</b>
22BDS032	PRASHANT SHANDILYA	22-082691	612	PASSED	I
22BDS038	SUBIA KHATOON	22-082697	605	PASSED	II
22BDS012	DEEBA KHAN	22-082671	603	PASSED	III
22BDS043	ZAIRA HUSSAIN	22-082702	600	PASSED	IV
<b>BACHELOR OF DENTISTRY (BDS) PART-III</b>					
<b>RNO</b>	<b>NAME</b>	<b>ERNO</b>	<b>GTOT</b>	<b>RESULT</b>	<b>POSITION</b>
21BDS011	FONA RAO	21-10446	465	PASSED	I
21BDS038	SHAGAF AFREEN	21-10473	426	PASSED	II
21BDS028	POOJA YADAV	21-10463	419	PASSED	III
21BDS013	ILTESHAM BANO	21-10448	415	PASSED	IV
21BDS043	TABINDA HAQUE	21-10478	415	PASSED	IV
<b>BACHELOR OF DENTISTRY (BDS) PART-IV</b>					
<b>RNO</b>	<b>NAME</b>	<b>ERNO</b>	<b>GTOT</b>	<b>RESULT</b>	<b>POSITION</b>
20BDS012	DEEPALI	20-08013	2719	FIRST DIVISION WITH DISTINCTION	I
20BDS033	SARA FATIMA	20-08010	2673	FIRST DIVISION	II
20BDS026	RANEEM UK	20-07998	2581	FIRST DIVISION	III
20BDS003	ADITI SHARMA	20-08000	2543	FIRST DIVISION	IV

**Dealing Asstt.**

**Section Officer (Exams)**



**Asstt. Controller of Examinations**

**OFFICE OF THE DEAN STUDENT'S WELFARE**  
**JAMIA MILLIA ISLAMIA NEW DELHI-110025**

**Student's Details for Merit / Central Scholarship**  
**For the Year 2023-24**

Particulars	Details
Name of the Students	
Students ID ( Current Year)	
Aadhar No.	
Mobile No. (Aadhar linked)	
Gender (Male / Female)	
Name of Faculty/Department/Centre	
Name of Course and Sem./ Year 2023-24	
Position ( 1 <sup>st</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> , & 4 <sup>th</sup> )	
Present Course/ Semester 2024-25	
<b>Bank Details</b>	
Name of Bank	
Account No.	
IFSC Code	
<b><u>Vender ID</u></b> ( Required only 1 <sup>st</sup> & 2 <sup>nd</sup> Position Holder)  To be generated by the Office of the Concerned Faculty/ Department / Center	

Enclosed: 1. Photocopy of the Current Year Students ID  
2. Photocopy of the Bank Details (Student's Passbook)  
3. Photocopy of the Aadhar

**(Signature of the Student)**

Only for 1<sup>st</sup> position and 2<sup>nd</sup> position holders

**REQUISITION FORM FOR VENDOR REGISTRATION IN PFMS**

VENDOR NAME: \_\_\_\_\_

PERSONAL

COMMERCIAL

DATE OF BIRTH: \_\_\_\_\_

FATHER/HUSBAND NAME: \_\_\_\_\_

MOBILE NUMBER: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL ID: \_\_\_\_\_

ADDRES: \_\_\_\_\_

PIN CODE: \_\_\_\_\_

AADHAR NUMBER: \_\_\_\_\_

PAN CARD NUMBER: \_\_\_\_\_

GSTIN NUMBER: \_\_\_\_\_X\_\_\_\_\_

BANK NAME: \_\_\_\_\_

BANK BRANCH: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

IFSC CODE: \_\_\_\_\_

(Signature of Vendor)

**FOR OFFICE USE**

VENDOR UNIQUE ID: \_\_\_\_\_