

AFFIDAVIT
(On Non-Judicial Stamp Paper)



1. I, Dr. S.Sindhuja Devi, MDS
D/o. Mr.T.Sandrasekhar James

2. Date of Birth (DD/MM/YYYY):

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3. Residential Address of Faculty:
(a) Present 0/A1, Lakshmi Bhavanam, Ammankovil Street, Edaiyanvilai,
 Vetturimadam PO, Nagercoil -629003
(b) Permanent 0/A1, Lakshmi Bhavanam, Ammankovil Street, Edaiyanvilai,
 Vetturimadam PO, Nagercoil -629003

4. Contact Details: Mobile No. 9524170007 Resi. Tel. No. with STD Code _____
Email sindhuomfs@gmail.com

*5. Any one documents from 5a and 5b is mandatory:-

5a.	Proof of Photo ID	Document No.	5b.	Proof of Residence	Document No.
1.	Passport		1.	Passport	
2.	Voter ID Card	RRJ1010198	2.	Aadhaar Card	4177 9133 9257
3.	Driving License		3.	Voter ID Card	
4.	Aadhaar Card		4.	Bill – Electricity / Landline Phone	
			5.	Regd.Rent Agreement	

Note: - Original Documents are mandatory for verification. All Documents/Certified Translations, must be in English.

- *6. Pan Card No. ASKPD5268K Certified copy to be enclosed.
- *7. Aadhaar Card No. 417791339257 Certified copy to be enclosed.
- *8. Qualifications:

Degree	Name of the Institution	University	Year & Month of Passing	Speciality	Name of the State Dental Council	*Registration No. of UG & PG with date of Renewal
B.D.S.	Ragas dental college and hospital	Tamilnadu Dr MGR University	August 2006	-	Tamilnadu	10650 31.12.2025
M.D.S.	Rajas dental college and hospital	Tamilnadu Dr MGR University	June 2016	Oral & maxillofacial Surgery	Tamilnadu	10650 31.12.2025
Any Other						

***Enclosed certified copy of the State Council Registration renewed till date.**

9. Present Designation: Reader
10. Name and Postal Address of College/Institution: Rajas Dental College and Hospital, Kavalkinaru Junction, Tirunelveli District.
- *11. Present Institute Appointment Order No. RDCH/PRL/APO/D-4013/2023 Date 01.11.2023

(Signature of Faculty) (Signature of Dean /Principal)

*12. Before joining present institution I was working at Sree Mookambika Institute of Dental Sciences

as Senior Lecturer and relieved on 27.10.2023 after Resigning/Retiring.

(i) Appointment Order No. D-61/142/18 & Date 06.06.2018 of the previous appointment:

(ii) Relieving Order No. D-61/172/23 & Date 27.10.2023

13. TEACHING EXPERIENCE

Position	Name of Institution	From	To	Total Experience
Lecturer/Asst. Professor	Sree Mookambika Institute of Dental Sciences	06.06.2018	27.10.2023	5 Years 4 months 21 Days
Lecturer/Asst. Professor	Rajas Dental College and Hospital	01.11.2023	09.06.2024	7 Months 8 days
Reader/Associate Professor	Rajas Dental College and Hospital	10.06.2024	Till date	10 Months 21 days

* Less than one year teaching experience will not be considered. * Use separate box for each Institution.

*14. TOTAL SALARY DRAWN FROM THE COLLEGE IN THE LAST SIX (6) MONTHS

S.No.	Month	Amount Received	Tax Deducted
1.	April 2025	Rs./-	
2.	March 2025	Rs.60,980/-	NIL
3.	February 2025	Rs.61,220/-	NIL
4.	January 2025	Rs.58,665/-	NIL
5.	December 2024	Rs.36,500/-	NIL
6.	November 2024	Rs.35,500/-	NIL

(Last Six (6) months – Certified Copy of Bank Statement/Pass Book by the bank must be attached)

*15. TDS FOR THE LAST THREE FINANCIAL YEARS:

S.No.	Financial Year	TDS Paid
1.	2024-2025	
2.	2023-2024	
3.	2022-2023	

(Copy of Form 16 generated from TRACES for last three financial years to be attached)

*16. DETAILS OF PUBLICATIONS:

S.No.	Title of the Articles	Journal Details	Points
1.	A comparative study of diode laser and co2 laser in the treatment of gingival hyperpigmentation original research	Global Journal of Dental Specialty, 2021;1(1):4-10	15
2.	An Assessment Of The Accuracy Of Analytical Model Planning In Orthognathic Surgery Original research	Journal of research and advancement in dentistry	15
3.	Compound and Complex Odontomes: Case Series with Surgical Management and Brief Review of Literature	Journal of Pharmacy and Bioallied Sciences	7.5
4.	Bone grafts in endodontics	Journal of critical review	5
5.	Techniques and graft materials used in maxillary sinus lift procedure for dental implant placement-a review	International journal of research in pharmaceutical sciences	5
6.	Recent Advances in Implant Biomaterials-A Review	International journal of research in pharmaceutical sciences	5
7.	Prevalence of TMJ disorders in patients undergoing third molar extraction	Journal of critical review	2.5
8.	Retromolar foramen and its clinical significance in dry human Manbibles	European journal of molecular and clinical medicine	2.5
9.	Odontogenic maxillary sinusitis	European journal of molecular and clinical medicine	2.5

Note: Submit certified clear Photocopies of all the documents mentioned in Serial No. 5, 6, 7, 8, 11, 12, 14 & 15 alongwith the Affidavit, Serial No. 13 & 16 to be submitted separately. All copies must be signed by the faculty member and counter signed by the Principal/Dean with date.

(Signature of Faculty)

(Signature of Dean /Principal)

Contd/...3

DECLARATION

1. I, Dr. Sindhuja Devi S do hereby give an undertaking that I am working as a full time salaried employee (**as per UGC Norms**) designated as Reader in the Department of Oral & Maxillofacial Surgery at Rajas Dental College and Hospital (name of the college) on all working days, working Hours from 08:30 AM to 04:00 PM
2. I am working as a Full Time faculty.
(*As per Rule 16 of DCI, Master of Dental Surgery Course Regulations, 2017)
3. I have not presented myself to any other Institution as a faculty in the current academic year for the purpose of DCI Inspection.
4. I am not having private practice anywhere
5. I, hereby, declare that the above information and documents provided by me are absolutely true, correct and authentic to the best of my knowledge. In the event of any statement made in this declaration is found to be incorrect or false I fully understand that I am liable for any necessary disciplinary/legal action.

Date:

(Signature of the Deponent)

This is to certify that the information given by the above deponent is correct and nothing has been concealed and deponent is working in the Department of Oral & Maxillofacial Surgery (department) as Reader (designation) as a full-time teacher in our college and is not engaged in full-time private practice anywhere.

**Signature of Principal of the College
with seal and date**

**Signature of the Chairman of the Trust
with seal and date**

Attestation by Notary Public/Oath Commissioner

CERTIFIED THAT THE DEPONENT

Dr.Sindhuja Devi S
D/o Mr.T.Sandrasekhar James
Identified by Shri
has solemnly affirmed before me at
on at Sl. No.
that the contents of the affidavit which
have been read and explained to him/her
are true and correct to his/her knowledge.

Signature Notary Public/Oath Commissioner

Counter Signature of the Deponent
(On the day of Inspection)

We have verified all the relevant documents and confirmed that information given are true to our knowledge and the above staff member was present during the inspection.

(Signature of Inspector – 1)

(Signature of Inspector – 2)

Dr. _____

Dr. _____

Date _____

Date _____

[N.B. Please note that making false statement in the affidavit will attract the relevant provisions of the Indian Penal Code etc.]