

THE OXFORD DENTAL COLLEGE

(Recognized by the Govt. of Karnataka, Affiliated to Rajiv Gandhi University of Health Sciences, Karnataka & Dental Council of India, New Delhi)

Bommanahalli, Hosur Road, Bangalore – 560 068.

Ph: 080-61754680 Fax: 080 – 61754693E-mail:deandirectortodc@gmail.com

Website: www.theoxford.edu

This is to certify that the document contains 233 pages of following documents

Performance Appraisal System for Teaching and Non-Teaching Staff

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	Blank Performance Appraisal format for Teaching Staff Blank Performance Appraisal format for Non-Teaching Staff Filled Performance Appraisal format for Teaching Staff

Dean and Director

The Oxford Dental College, Bommnaha

Hosur Road Bengaluru - 560 068



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Blank Performance Appraisal format for Teaching Staff

	THE OXFORD DENTAL COLLEGE
	10" MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE
	SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF
1.	GENERALINFORMATION
Name:	
Address	M
Phone r	sember:
Designa	tion:
Departr	nent:
Specials	gation:
Date of	joining the institution:
Nature	of employment: Permanent/ Temporary/ Deputation/ Part Time
Total ye	ars/ months of service in the institution:
Date of	birth:
Email id	



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Bommanahalli, Hosur Road, Bangalore – 560 068.

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Exams passed BIGH SCHOOL	university	Sulyitte		
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BACHELOR'S DEGREE				
MASTER'S DEGREE				
PHD				
FELLOWSHIPS				
DIPLOMA / CERTIFICATION COURSES				
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- Teaching methods;
- 4. Insovations in teaching:
- 5. Design of curriculum
- 6. Laboratory experimenes
- 7. Evaluation Methods:
- Preparation of resource material:
 Including books, reading materials, Laboratory manuals etc.
- 9. Mentoring activity:
- 10. Awards/ Achievements:

IX. EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- Community work: (Such as values of national Integration, Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought relief, small family norms etc.)
- 2. National Literacy Mission
- Positions held/ leadership role played in organizations linked with extension work or any other similar activity:
- X. PARTICIPATION IN CORPORATE:

Please give a short account of your contribution to:



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College/ university/ institution
Co-curricular activities.
Enrichment of the campus life(hostel/sports/cultural activities):
Students Welfare and discipline:
Membership/participation in bodies/committees on education and national development:
Professional organization of teachers:
Any other:
MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities:
 Membership in professional body/society/associations (participation in the organizing teams)
3. Editorial board/ Reviewer:
4. Any other:



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This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.	
(Signature of the Teacher)	



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Blank Performance Appraisal format for Non-Teaching Staff



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SELF-PERFORMANCE APPRAISAL FOIR NON-TEACHING STAFF

GENERALINFORMATION
Name:
Address
Phone number:
Designation:
Department:
Specialization:
Date of joining the institution:
Nature of employment: Permanent/ Temporary/ Deputation/ Part Tim
Total years/ months of service in the institution:
Date of birth:
Email id:



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TENSK	ON WORK/ COMMUNITY SERVICE
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1.	Community work:
2.	Enrichment of the campus life(hostel/sports/outtural activities):
3.	Membership in committees
4.	Participation in corporate:
5.	Co-curricular activities:
6.	Membership in committees in the college:
	Score =(out of 5)
	CERTIFICATE
my	is to certify that all the details and information submitted is true and correct to the best of knowledge. I understand that I am liable for penalization including criminal action for iding wrong/misguiding information as doesned fit by the University.
	(Signature)



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Filled Performance Appraisal format for Teaching Staff

2016 - 2017

THE OXFORD DENTAL COLLEGE 10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

I. GENERAL INFORMATION

DR. Bharati. S.B.

189, Jeevana, 35th Main, 7th Cr, BTMarks tage Bangalore 68

Phone number: 9886399310

Designation: Professor

Department: Oral medicine and Radiology

specialization: Oral medicine and Radial

Date of joining the institution: June 0006

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time Permanent

Total years/ months of service in the institution: 10 yrs.

Date of birth: @ 3 1977.

Email id: bharatiapatil @ yahoo.com.



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> 2020-2021 Dr. Jewod saleem

THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

Name: SYED JAVAD SAVEM

Address 165/J 8 CROSS KODZCHEKKANAHOLLE MAIN RODO BILETOHALLE BONGOLORE - 76.

Phone number: 9886535622

Designation: READER

Department: of PROSTHODONTICS

Specialization: PROSTHODONTICS.

Date of joining the institution: 12 Sep 2020.

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 0.3 18/1963

Email id: Javad Bakem 90@ gmail Com.



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Research Stage	Title Of Work/Thesis	University Where The Work Was Carried Out
VI.Phil/ Equivalent		
h.D		
Post Doctoral		
tesearch Guidance(give names of students guided uccessfully)		
raining(please specify)		

V. RESEARCH PUBLICATION, BOOKS AUTHORED AND MAGAZINES IN THE ACADEMIC YEAR. (Enclose Copy)

SL.NO	NAME OF THE PUBLICATION/ BOOKS AUTHORED/MAGAZINES	CATEGORY	POINTS
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EGNARIES

- 3. Teaching methods: Clinical Non drical
- 4. Innovations in teaching: Research
- 5. Design of curriculum
- 6. Laboratory experiments
- 7. Evaluation Methods: [>p+7.5
- Preparation of resource material: Including books, reading materials, Laboratory manuals etc
- 9. Mentoring activity:
- 10. Awards/ Achievements:

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College/ university/ institution The total light and the state of the stat
Securicular activities
Enrichment of the campus life(hostel/sports/cultural activities):
4. Students Welfare and discipline:
 Membership/participation in bodies/committees on education and national development:
6. Professional organization of teachers:
7. Any other:
MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities:
Membership in professional body/society/associations (participation in the
organizing teams)
3. Editorial board/ Reviewer:
4. Any other:
Score: (out of 5)





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CERTIFICATE

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(Signature of the Teacher)

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Br. Jagaresta

THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

JASNEET K. DHALIWAL Name:

KLASSIK COMPORT APARTMENTS, HER LAYDUT, 580102.

Address

8978000730 Phone number:

SENIOR LECTURER Designation:

PROSTHODONIES Department:

PROSTHODONTICS Specialization:

27-01-2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time Part Time Part Time Part Time Total years/ months of service in the institution: 14r Smorths in the institution

Date of birth:

implantsmiles & gmail com Email id:



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	CATIONS		Year	Grade / Mesn
II. ACADEMIC	QUALIFICATIONS	Subjects		(solves
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HIGH SCHOOL	PARMIA .		2006	1st class
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Research Stage	Title Of Work/Thesis	University Where The Work Was Carried Out
VI.Phil/ Equivalent		Trans contract Cont
h.D		
Post Doctoral		
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RESEARCH PUBLICATION, BOOKS AUTHORED AND MAGAZINES IN THE ACADEMIC YEAR. (Enclose Copy)

NAME OF THE PUBLICATION/ BOOKS AUTHORED/MAGAZINES	CATEGORY	POINTS
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3. Teaching methods: Photos point Resident
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4. Innovations in teaching: vikeos, photor side proteching. 5. Design of curriculum
5. Laboratory experiments ~
7. Evaluation Methods: 700.
3. Preparation of resource material: NO(E ₃
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Mentoring activity:
10. Awards/ Achievements: —
EXTENSION WORK/ COMMUNITY SERVICE
e a short account of your contribution to:
ommunity work:
Such as values of national Integration,
ecularism, democracy, socialism, humanism, peace, scientific temper, flood or drought
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PARTICIPATION IN CORPORATE:
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	website: www.tneoxford.eau
1.	College/ university/ institution
2.	Co-curricular activities Liengets/cultural activities):
	Co-curricular activities Enrichment of the campus life(hostel/sports/cultural activities):
4.	Students Welfare and discipline:
5.	Membership/participation in bodies/committees on education and national development:
6.	Professional organization of teachers:
7.	Any other:
хи	MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities:
	2. Membership in professional body/society/associations (participation in the
	organizing teams)
	3. Editorial board/ Reviewer:
	4. Any other:
Senre	(out of 5)
Score.	100001



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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for information as deemed fit by the University.

(Signature of the Teacher)

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THE OXFORD DENTAL COLLEGE 10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

Name: Dr SGEMA.M.

Address - No-189, 10th A cross, &p Myr Blore -78

Phone number: 9759529236

Designation: SCHIOR LECTURER

Department: ORAL PATHOLOGY

Specialization: MD 5

Date of joining the institution: 12-112-2018

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 24EARS GNOWHS

Date of birth: 27 3 1 98 B

Email id: Scenamadbhani @ gmail. Com.



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Bommanahalli, Hosur Road, Bangalore – 560 068.

Research Stage	Title Of Work/Thesis	University Where T	he Wark
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Post Doctoral	-		
Research Guidance(give names of students guided successfully)			
Training(please specify)			
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Title of	VI. RESEARCH PROJECTS IN THE PROJECT MANUELY MANUELY	THE FUNDING	DUBATION	REMARKS
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3.	Teaching methods:	150-		
	Teaching methods:	LECTIONES,	PPTS,	DITUESION,
		C		

4. Innovations in teaching: MODEL MAKING, CHART

Design of curriculum

MALMYG.

- 6. Laboratory experiments
- 7. Evaluation Methods: VIVA VOCE, INTERNACE, PRACTICAL
- Preparation of sesource material: Including books, reading materials, Laboratory manuals etc
- 9. Mentoring activity:
- 10. Awards/ Achievements:

EXTENSION WORK/ COMMUNITY SERVICE DX.

Please give a short account of your contribution to:

- Community work: (Such as values of national Integration, Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought relief, small family norms etc.)
- National Literacy Mission
- Positions held/ leadership role played in organizations linked with extension work or any other similar activity:

PARTICIPATION IN CORPORATE:

Please give a short account of your contribution to:



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11	College/ university/ institution
2	Co-curricular activities Enrichment of the campus life[hostel/sports/cultural activities]:
6.5	of the campus life[hostel/sports/cultura
4	Students Welfare and discipline:
500	Membership/participation in bodies/committees on education and national development:
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**	Professional organization of teachers:
6.	Professional Argument
7.	Any other:
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9332	MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES
ХІІ	Membership in committees in the college/universities:
27	
	Membership in professional body/society/associations (participation in the
	organizing teams)
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202	4. Any other:
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Score: _	45 (out of 5)
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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

(Signature of the Teacher)

The Oxford Dental College, Bomnu.

Hosuf Road Bengaluru - 560 068



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Dr. Madhusudar

THE OXFORD DENTAL COLLEGE 10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

Name: Dr. Madhu Sudhan, K.S.

Address: #123, \$6. De. K. Siddaiah, 1st floor, 4th cross. 3thuin, M. E. I. layout, Hernsghatta Ronds Bangalore - 560073. Phone number: 9886035137

Designation: READER

Department: Pediafaic & Prenentine Dentity

Specialization: Pedrahue Dentut

Date of joining the institution: 30/09/2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 03/10/1983.

Email id: Sudhann Ks@gmail. com, drmadhupedodonfist@gmail. com



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II. AC	ADEMI	CQUALIFICATION		Year	Grade / Merit
Exams pa		University	Subjects Nicollis Secont School	1998-99	I clan
HIGHE	Y/PRE-	pre.	Physics Lighternahes Chamber Richard	1117-2001	I dan Idan
BACHELO DEGREI	DR'S	ROUHS BOS		2001-2006	65%
MASTER DEGREE		RGUHT MDS	pedodonker	2012-2015	58%
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COURSES (UG/PG)			IIVERSITY/COLLE	GE	DURATION
COURSES (UG/PG)	N/	AME OF THE UN	TUTION	-	DURATION -2016 to 16-09-2020
COURSES	N/	AME OF THE UN	TUTION Adevasaya Col	lege 17-03.	
COURSES (UG/PG)	N/	INSTITUTES - Karahara	TUTION Adevasaya Col	lege 17-03.	-2016 to 16-09-2020



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IV. RESEARCH EXPERIENCE AND TRAINING

Research Stage	Title Of Work/Thesis	University Where The Work
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M.Phil/ Equivalent Ph.D		
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Post Doctoral		
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Training(please specify)		

V. RESEARCH PUBLICATION, ROOKS AUTHORED AND MAGAZINES IN THE ACADEMIC YEAR. (Enclose Copy)

SL.NO	NAME OF THE PUBLICATION/ BOOKS AUTHORED/MAGAZINES	CATEGORY	POINTS
t.	Osthodonfre Bracket as intermentally fronton. A cone support. I fed Oral Wealth Pet 2017; 1/1) 16-17	丏	5
02.	Unfung the torque the: A case seport. I ST International Medicans & Dentuty with: 4(2):7275	THE	5
3.	Acsociation of nutritional Status ledented Mouth amonts-by old children of a south motion population. Sandi I contsei	T	10
	02019; 6:31-6		1
4.	Modnutriton - A seek for oral health. International Towned of Seventific Revent	巫	5
	Q219; 8(4): 74-77		
5	Nutritional Status & H Relationship with Out- Causes among 3-64 old Arguments Children Lat I chart probab Bart 2020;	I	В
	136):6-10		
•	The visitable notice of Salva for front in Prophy Leeke Bromnates, A Gruf Evision but I. Drug Res. Orabel Sca. 2020 (2)12529	TIL	2.5
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PROJECTS CARRIED OUT	DURATION	REMARKS
AGENCY	A 2+108	
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VII. CONFERENCE, WORKSHOPS, CDE, GUEST LECTURES, RESOURCE PERSON PAPER/POSTER PRESENTATIONS (TV/Radio Talks)

SL NO	NAME	ATTENDED	CONDUCTED	DETAILS
1.	International Person	_		14to 27 Sept-200
2.	Cornerstone of Scyriffice	-		7th october 2000
3.	Base course heducations			asta4" Sept son
4.	KIDS-WESCON 2020	/		28th-38 Oct 2020
5.	3th ISPPD Conformer	-		13 1-16 h Sept 2017
6.	CON-DENT 2020			25 27 h Sipt 200
				-17

VIII. TEACHER PROFILE AND QUALITY

1. Classes handled: UG: 10

PG: 100

2. Remedial classes/ counseling classes taken:



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3. Teaching methods: Color hotel	
4. Innovations in teaching: Demanhation	4 SS crowns, Brushey
4. Innovations in teaching: Demanted on, methods, SDF apple. 5. Design of curriculum Yes in P6. Co	Dahan.
6. Laboratory experiments	
7. Evaluation Methods:	
8. Preparation of resource material:	
Including books, reading materials, Laboratory ma	nuals etc
Mentoring activity:	
10. Awards/ Achievements:	
IX. EXTENSION WORK/ COMMUNITY SERVICE	
Please give a short account of your contribution to:	
 Community work: (Such as values of national Integration, Secularism, democracy, socialism, humanism, peace, scientification, relief, small family norms etc.) 	ific temper,flood or drought
2. National Literacy Mission	
 Positions held/ leadership role played in organizations lin any other similar activity: 	nked with extension work or

PARTICIPATION IN CORPORATE:

Please give a short account of your contribution to:



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College/ university/ institution	This is
Co-curricular activities	4
3. Enrichment of the campus life(hostel/sports/cultural activities):	
4. Students Welfare and discipline:	1
Membership/participation in bodies/committees on education and national development:	-
6. Professional organization of teachers:	1
7. Any other:	
XII. MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities: 2. Membership in professional body/society/associations (participation in the organizing teams)! ISPD LIFE Members; IDA LIFE Members; 3. Editorial board/ Reviewer: - Intunahmal Journal of Phalma & Bos Scaunes; - Intunahmal Journal of Phalma & Bos Scaunes; - International Journal of Phalma & Bound & Scaunes; - International Journal of Student's Ruceau - International Journal of Student's Ruceau - Enviro Quifal Journal of Student's Ruceau - Open Access Macadonian Journal of Medical Scalences; Score: 4.5. (out of 5)	ierand ierand ch



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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Dr. Madhe Sudhen. K.S

(Signature of the Teacher)

Dean and Director
The Oxford Dental College, Bommnaha
Hosur Road Bengaluru - 560 068



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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

I. GENERAL INFORMATION
Name: De. Kelky MoRanly Address 033, Trinly Meadons Phone number: 9845067066 Designation: Prof Mod, Wept of Oren fathology
Address 033, Thinly Meadon
Phone number: 9845067066
Designation: Prof (MDD), Wept of De healings
Department: olept of Ocal rundo
Phone number: 9845067066 Designation: Prof. Pathology Department: Slept of Oral Pathology Specialization: MDS, Olal Pathology Date of inining the institution:
Date of Johnson, the many
Nature of employment: Permanent/ Temporary/ Deputation/ Part Time
Total years/ months of service in the institution:
Date of birth: 23 Oct 1976
Date of birth: 23 Oct 1976 yahoo. com Email id: leekynwhany@yahoo.com



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th. ACA	ADENTIC	QUALIFICATION	45	W-05	Grade / Men
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Resear	rch Stage	Title Of Work/Thesis	University Who	
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7. Any con-				
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XII. MEMBERSHIPS OF PRO 1. Membership in commit	ttees in the college/univ	61314	- in the	
1. Memor	ional hody/society/ass	ociations (participatio	m in the	
Membership in commit Membership in profes	Jes			
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LI Pavill	wer: 400			
3. Editorial board/ Revie				
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Score:(out of 5)		(8)		



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CERTIFICATE

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(Signature of the Teacher)

Dean and Director

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SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION I.

Address # 481, 18th CROSS, 8th Maria MARMON NARAR 300 BLOCK, DKC POST, Benjamin

Phone number: 973196369

Designation: Refuser Department: Defe of Pedodo-Iros

Specialization: MDS

Date of joining the institution: $o\mathcal{C}(o\mathcal{C})$ 2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time Curranet

Total years/ months of service in the institution: ついとりかん

Date of birth: ৩% | ০৭- । ৭ে ১৫

Email id: drkkeean@gnail. con



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Exams po		University	Subjects	Year	Terre
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BACHELO DEGREI	R'5	BDS	Daniel Subjects	2000	Pass
MASTER DEGREE		MDS	Partistry	2002	PACC.
PHD					
FELLOWSHI	PS				
DIPLOMA , CERTIFICATIO COURSES	2000				
COURSES	N/	AME OF THE UNI	VERSITY/COLLE	GE	DURATION
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3. Teaching methods: Dionette Lecronso, PowerPara Presentations, TABLE SIDE DIRECTORY, DEMOSTRATIONS
4. Innovations in teaching: LIVE MODELS, AUDIO VIDES PRESUMMONS.
5. Design of curriculum VES
6. Laboratory experiments DEMOSETANDED OF CLICA CAL PROCEDURES
ON SITULATED HODELS
7. Evaluation Methods: facilities form, Assassments
8. Preparation of resource material: 14.0
Including books, reading materials, Laboratory manuals etc
9. Mentoring activity: 2
10. Awards/ Achievements: -
IX. EXTENSION WORK/ COMMUNITY SERVICE
Please give a short account of your contribution to:
1. Community work: Dutal Carrier of School Children , (Such as values of national Integration, Oak Lulte eduction, Special child Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought eduction relief, small family norms etc.)
National Literacy Mission
 Positions held/ leadership role played in organizations linked with extension work or any other similar activity:
X. PARTICIPATION IN CORPORATE:
Please give a short account of your contribution to:



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L.	College/ university/ institution
	Co-curricular activities
3.	Enrichment of the campus life(hostel/sports/cultural activities):
4.	Students Welfare and discipline:
5. (Membership/participation in bodies/committees on education and national development:
6. #	Professional organization of teachers:
7. A	ny other:
	MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities: Membership in professional body/society/associations (participation in the organizing teams) TSPPD (Tropian Society of Perpolantics organizing teams)
3.	Editorial board/Reviewer: 151 1000
4.	Any other:
Score:	4 (out of 5)



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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

(Signature of the Teacher)

Dean and Director The Oxford Dental College, Bommnahalli Hosur Road Bengaluru - 560 068



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SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

Name: Dr. Afrhan Saman W

Address # 81, 15t Nam, 1st Com , Ventralarriamaffa layout.

Phone number: -1204576936

Designation: Series dechuis

Department: Otho ofonkie

MOS. Specialization:

Date of joining the institution: 27/01/2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/months of service in the institution: 01 year 05 number

Date of birth: 3/07/1991 Email id: afchan.wol@gnaif.com



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3. Teaching methods: Penen feat poundations Demondentions Viva - Voes
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5. Design of curriculum
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8. Preparation of resource material: -ACI -
Including books, reading materials, Laboratory manuals etc
9. Mentoring activity: 2 - 3 ·
10. Awards/ Achievements:
IX. EXTENSION WORK/ COMMUNITY SERVICE
Please give a short account of your contribution to:
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2. National Literacy Mission
 Positions held/ leadership role played in organizations linked with extension work or
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X. PARTICIPATION IN CORPORATE:
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3. Enrichment of the campus life(hostel/sports/cultural activities): lullinal	(DAUN'S (18)
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6. Professional organization of teachers:	
7. Any other:	
I. McHaelanipin edition	Commiltee
 Membership in professional body/society/associations (participation in the organizing teams) 	NG.
3. Editorial board/ Reviewer:	
4. Any other:	
Score:(out of 5)	





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(Signature of the Teacher)



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SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

1. GENERAL INFORMATION

Name:

Address

DV. LAXMIKANTH-SM. 158, 12 cruss, 20 mnsm, IP MASAR II PHAJE BANSALURE 78

Phone number:

- 9844093038

Designation:

Department:

ORTHO PONTES 9 port baid orte rest.

Specialization:

OPTHODONIECT.

Date of joining the institution: 3/2/2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

164 5 money

Date of birth:

8/FEB/1972

Email id:

las mikantesma @ gmail.com.



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Research Stage		arch Stage Title Of Work/Thesis		University Where The Work Was Carried Out		
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	VI. RE	ESEARCH PROJE	CTS CARIT	NG DU	RATION	1
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> Chalk & Talk -) Discussions -> Tower point presentation -> Doumestrations Innovations in teaching (). Viva voce . Edwalianal mileos Design of curriculum UG, FG

6. Laboratory experiments Basic mine Benking, Typhodonts,
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These scanners

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Including books, reading materials, Laboratory manuals etc

9. Mentoring activity: 465

10. Awards/ Achievements: Ребытся римон

EXTENSION WORK/ COMMUNITY SERVICE IX.

Please give a short account of your contribution to:

1. Community work: (Such as values of national Integration, Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought relief,small family norms etc.)

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warcon	musion - Internal examiner
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XII. MEMBERSHIPS OF 1. Membership in com	PROFESSIONAL BODIES AND SOCIETIES mmittees in the college/universities;
Membership in pro organizing teams)	ifessional body/society/associations (participation in the Indian Orthoboulic Society Indian Doutal Association
3. Editorial board/ Rev	
4. Any other:	
e: 45 (out of 5)	





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SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

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Name:

SUPRIYA BHANDAGE

C-901, BREN EDGEWATERS APARTMENT KASAVANAHALLI BALLALORE COURT LAYOUT NEST KASAVANAHALLI BALLALORE

Address

I.

9164103195

Phone number:

Designation:

ORAL AND MAXILLOFACIAL SURGERY Specialization: MDS ORAL AND MAXILLOFACIAL SURGERY

01-01-2018

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time Total years/ months of service in the institution: 3YEARS 6 MONTHS

Date of birth:

29-07-1984

Email id:

supriyagbil@gmaxt.com



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	TIONS		year		Grade / N	100
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Resear	ch Stage	Title Of Work/Thesis	University Who Was Carried O	
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	ESEARCH PROJECTS CARRIED OU	DURATION	REMARKS
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VII. CONFERENCE, WORKSHOPS, CDE, GUEST LECTURES, RESOURCE PERSON PAPER/POSTER PRESENTATIONS (TV/Radio Talks)

SL NO	NAME	ATTENDED	CONDUCTED	DETAILS
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2.	International destal Confer	ene L		VIRTUM-
3.	monapolary week by			VIRTURL
4.	stome Bronet hubble -			VIETONE

VIII. TEACHER PROFILE AND QUALITY

1. Classes handled: UG: YES III 6DS IV BDS

PG: YES IMOS II MOS III MOS

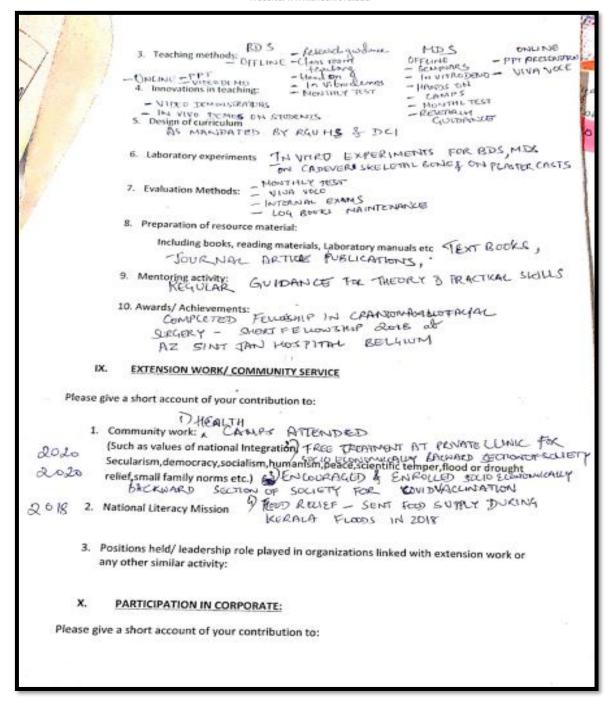
2. Remedial classes/ counseling classes taken: YES



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Instruction - Tratternal Examiner
1. College/university/institution - Traffer NAL EXAMINER - Paper evaluation 2. Co-corricular activities COLEGE DAY
I Enrichment of the campus life(hostel/sports/cultural activities): (NCOVERSED STUDIENT INVOLUEMENT IN CULTURAL (NCOVERSED STUDIENT INVOLUEMENT)
4. Students Welfare and discipline:
Membership/participation in bodies/committees on education and national development: AOMSI MEMBER, JAOMS MEMBER
6. Professional organization of teachers: NAAC Consider member
7. Any other:
XII. MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities:
Must organizing teams) - fact of take force for thospital & Victoria Banuarior
2. Membership in professional body/society/associations (participation in the organizing teams) - Flack of Truck force for treating Victoria Hospital Wicrorycosts cases at someting thospital & Victoria Hospital Bankaror Bankaror AMSI - LIFE MEMBERS Alvanes on Hedrial Beviewer: Reviewer for Javend of Revealth Hedrine & Medical Reviewer, Assan Jovend Schene (2000) an Hedrial & Program (2000) pharmounted Schene (2000)
4. Any other:
Score: 4.5 (out of 5)





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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

(Signature of the Teacher)

The Oxford Dental College, Bornmania Hosur Road Bengaluru - 560 068



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2020-2021

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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

Dn. DIVYA. N.L.

Address \$ 208, 2 CROSS, IT MAIN, KSRTC LAYOUT, JP NAGAR

Phone number: 9080350947

Designation: SEMIR LECTURER

Department: URAL MEDICALE 9 RADIOLOGY

Specialization: ORAL MEDICINE & RADIOLOGY

Date of joining the institution: 27-01-2020

Nature of employment: Permanent/Temporary/ Deputation/ Part Time PERMANENT

Total years/ months of service in the institution: I you 5 months

Date of birth: 24-01-1985

Email id: nldivya 1985@gmail.com



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Bommanahalli, Hosur Road, Bangalore – 560 068.

Exams passed	University	Subjects	Year	Grade / Merit
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HIGHER SECONDARY/PRE DEGREE	Chini Heliga Hatasealatheir Hagher Country Charles hay Hatasealahin Hagher Survey		2002	N ⁺
BACHELOR'S DEGREE	Ox Hor Hedral		2010	Distantin
MASTER'S DEGREE	The Family Notes On HAR Alabias University	Radiology	2018	Datination.
PHD	Vivising			1
FELLOWSHIPS				
DIPLOMA / CERTIFICATION COURSES				
COURSES (UG/PG)		rution		DURATION
VG + PG	The Oxford &	Dental College		1 year 5 months.
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VI.	RESEARCH I	PROJECTS CARRIED OU NAME OF THE FUNDING AGENCY	DURATIO	N	REMARKS
VII. S	ONFEREN	CE, WORKSHOPS, CL	DE, GUEST LE	ECTURES, RES	OURCE ilks)
P	PERSON PA	NCE, WORKSHOPS, CE APER/POSTER PRES		ECTURES, RES S(TV/Radio Ta CONDUCTED	DETAILS
VII. G	NAME Scksta	ATTE			

VIII. TEACHER PROFILE AND QUALITY

1. Classes handled: UG: 12 per year.

PG: yes

2. Remedial classes/ counseling classes taken:



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3. Teaching methods: 1974. Lectures, Demonstrations, Tutorial,
Chainside discussions.
4. Innovations in teaching: Heards - On, Flip Charle, Project work.

5. Design of curriculum

Laboratory experiments

7. Evaluation Methods: Theory, Bustical (clinical) examination, Internal Assessment

8. Preparation of resource material:

Including books, reading materials, Laboratory manuals etc

Test books

9. Mentoring activity: Yus

10. Awards/ Achievements:

EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: (Such as values of national Integration, Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought relief, small family norms etc.)
- 2. National Literacy Mission
- Positions held/leadership role played in organizations linked with extension work or any other similar activity:

PARTICIPATION IN CORPORATE:

Please give a short account of your contribution to:



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Website: www.theoxford.edu

1	College/university/institution Trials to Service College
2.	Co-curricular activities Participation
3.	Co-curricular activities Enrichment of the campus life(hostel/sports/cultural activities): Participation Cultural activities, pontr Students Welfare and discipline:
5,	Membership/participation in bodies/committees on education and national development: TADMR
6.	Professional organization of teachers:
7.	Any other:
хи.	MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities: Spork committee Fiedback committee
2.	Membership in professional body/society/associations (participation in the organizing teams)
	Organizing veeting
3.	Editorial board/ Reviewer:
4.	Any other:
Score:	(out of 5)
	#1





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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

(Signature of the Teacher)

PROFESSOR & HEAD
PROFESSOR & HEAD
PROFESSOR & Radiology
Dept of Oral Medicine & Radiology
The Oxford Dental College
The Oxford Dental College
Bangalore-68

Dean and Director
Dean and Director
Dean and Director
The Oxford Dental College, Bommnanalli
Hosur Road Bengaluru - 560 968
Hosur Road Bengaluru

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GENERAL INFORMATION

Name: DR. RAGHUNAND SINDHE-J Address NA 17/1, I CROSS, RRMR EXTENSION, KIH. ROAD CROSS, BANGALORE-SGOOZF

Phone number: 9886155151

SENIOR LECTURER Designation:

ORAL MEDICINE AND RADINGEY Department:

M. D. S - ORAL MEDICINE AND PRADIOLOGY Specialization:

Date of joining the institution: 22-10-2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time-

Total years/ months of service in the institution: 8 ~~~

11-07-1984 Date of birth:

raghujs 11 c gnail. Cm Email id:



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II. ACADEMI	IC QUALIFICATIONS		Wast	Grade / Merit
	University	Subjects	Year	
Exams passed HIGH SCHOOL	TCSE Bishor Curton	Best Care	2000	I CLASS
HIGHER SECONDARY/PRE- DEGREE		PU CHEERE	2002	Iccor
BACHELOR'S DEGREE	RGUHS THE WHORD	BDS	2007	Icens
MASTER'S DEGREE	RGUHS Emysteric Serstitute of DE-TAL RIGH		2019	2 demic - RGUHS
PHD	SAVEETHA	MEDICINE MEDICINE RADIOCOGY	CPURSUIT	~a)
FELLOWSHIPS				
DIPLOMA / CERTIFICATION	DEN 174 S DEN 174 ILLEM		2013	-
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COURSES	EXPERIENCE NAME OF THE UN INSTIT	IIVERSITY/COLL TUTION		15
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RESEARCH EXPERIENCE AND TRAINING Research Stage Title Of Work/Thesis University Where The Work Was Carried Out M.Phil/ Equivalent Ph.D Comparison for the SAVEGERA UNIVERSITY Post Doctoral EMECTINEMEN OF PROJECT MOUTHWANT AND OFFICES IN THE MANAGEMENT OF ORDER MUCOSITIS Research Guidance(give names of students guided successfully) Training(please specify)

RESEARCH PUBLICATION, BOOKS AUTHORED AND MAGAZINES IN THE ACADEMIC YEAR (Enclose Copy)

SL.NO	NAME OF THE PUBLICATION/ BOOKS AUTHORED/MAGAZINES	CATEGORY	POINTS
1.	Come Beam Incuma - And Intertive Hem In Insertionning	T	15
2.	Junity pend Towned 2020, oct; 6(3):49-52	エ	15
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2.	Teledentistry - A Diagnostic	I	15
	and Radiology	-	
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TITLE OF THE PROJECT	NAME OF THE FUNDING AGENCY	DURATION	
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VII. CONFERENCE, WORKSHOPS, CDE, GUEST LECTURES, RESOURCE PERSON PAPER/POSTER PRESENTATIONS(TV/Radio Talks)

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1.	Classes handled: UG:	3 dyear	& Anal	Year	Theny	Discussión
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2. Remedial classes/ counseling classes taken:

VIII. TEACHER PROFILE AND QUALITY



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11	
M	3. Teaching methods: Online Classes, Physical Classes
	4. Innovations in teaching: Bolden based learning.
1	5. Design of curriculum
	6. Laboratory experiments
	7. Evaluation Methods:
	8. Preparation of resource material:
	Including books, reading materials, Laboratory manuals etc
	9. Mentoring activity:
	10. Awards/ Achievements: 3-d Rmie MD5 - RGUHS
rx.	EXTENSION WORK/ COMMUNITY SERVICE
Please gi	ve a short account of your contribution to:
	Community work: Running a Pural Chris at Maralmad Community work: Running a Pural Chris of Maralmad Coluke. Such as values of national Integration, Ramanagan Batrist for Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought elief, small family norms etc.)
2. N	lational Literacy Mission
	ositions held/leadership role played in organizations linked with extension work or my other similar activity: Commonly Cancer moreness in association with Lions Club
x.	PARTICIPATION IN CORPORATE:
Please giv	e a short account of your contribution to:



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1. Coffege/ university/ institution 2. Co-curricular activities 3. Enrichment of the campus life hostel/sports/cultural activities : 4. Students Welfare and discipline: 5. Membership/participation in bodies/committees on education and national development: 6. Professional organization of teachers: 7. Any other: Instact Fellowskip in Pental Pendship HCA Cancer Hoppital Bourgean at HCA Cancer HCA CAN	1310. 1374	Website: www.theoxford.edu
2. Co-curricular activities 3. Enrichment of the campus life[hostel/sports/cultural activities]: 4. Students Welfare and discipline: 5. Membership/participation in bodies/committees on education and national development: 6. Professional organization of teachers: 7. Any other: Instanted - Fellowskip in Pendal program of Pelasional Pel		college/university/institution HCG- Health are
5. Membership/participation in bodies/committees on education and national development: 6. Professional organization of teachers: 7. Any other: Instructed - Fellowskip in Program of Perfect Cancer Hoppital Bougalore HCG Cancer Hoppital Bougalore XII. MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities: 2. Membership in professional body/society/associations (participation in the organizing teams) Membership in Professional Society/Associations (participation in the OTDA OTSOI 3. Editorial board/ Reviewer: 3. Laaco Jaaco Jaaco Jaaco		Co-curricular activities
5. Membership/participation in bodies/committees on education and national development: 6. Professional organization of teachers: 7. Any other: Instated Fellowskip in Program of Pelas Warker Oxically Roughland Reviewer: 8. HCG General Hoppish Roughland Reviewer: 9. Membership in committees in the college/universities: 1. Membership in professional body/society/associations (participation in the organizing teams) 1. Membership in professional body/society/associations (participation in the organizing teams) 1. Editorial board/Reviewer: 1. Membership in Professional body/society/associations (participation in the organizing teams) 1. Editorial board/Reviewer: 1. Membership in Professional body/society/associations (participation in the organizing teams) 1. Editorial board/Reviewer: 1. Editorial board/Reviewer: 1. Membership in Professional body/society/associations (participation in the organizing teams) 1. Editorial board/Reviewer: 1. Editorial board/Reviewer: 1. Editorial board/Reviewer: 1. Editorial board/Reviewer: 2. Editorial board/Reviewer: 3. Editorial board/Reviewer:	3.	Enrichment of the campus life(hostel/sports/cultural activities):
6. Professional organization of teachers: 7. Any other: Instated Felhankip in Program of Pehalmakine On Colony Bangulare. HCG Caneur Hoppital Bangulare. XII. MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities: 2. Membership in professional body/society/associations (participation in the organizing teams) Mental OIDA OISOI 3. Editorial board/ Reviewer: 3. JAACD		
6. Professional organization of teachers: 7. Any other: Instated Felhankip in program of Personal Personal Program of Personal Personal Program of Personal Program of Personal Program of Personal Program of Professional Hoppital Program of Professional Bodies and Societies 1. Membership in committees in the college/universities: 2. Membership in professional body/society/associations (participation in the organizing teams) Menson OIDA OISOI 3. Editorial board/Reviewer: A SASONI 3. Editorial board/Reviewer: A SASONI		on education and national
7. Any other: Instrated Felharkip in program at Rehabilitative On Calogy Bangalore. HCG Canear Hogystell Bangalore. XII. MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities: 2. Membership in professional body/society/associations (participation in the organizing teams) Member OIDA OISOI 3. Editorial board/Reviewer: A SASOMI SIAACD	5.	Membership/participation in bodies/committees on education development:
 MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities: Membership in professional body/society/associations (participation in the organizing teams) Member OIDA ISOI IAOMR Editorial board/ Reviewer: JASOMI JAACD 	6.	Professional organization of teachers:
 MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities: Membership in professional body/society/associations (participation in the organizing teams) Member OIDA ISOI IAOMR Editorial board/ Reviewer: JASOMI JAACD 	7. /	HCG anew Hogethal Bangalore.
2. Membership in professional body/society/associations (participation in the organizing teams) Member OIDA OISOI 3. Editorial board/ Reviewer: 4. SA50 NI SIACO IAACO		MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES
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3) I AOMA 3. Editorial board/Reviewer: (3) I AOMA (3) I AOMA (4) SA50MI (5) I AACD	2.	Membership in professional body/society/associations (participation in the
		organizing teams) Menter OIDA
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9 (out of 5)		G (out of 5)
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(Signature of the Teacher)

Oepi or Oral Medicine & Radiology
The Oxford Demail College
The Oxford Bangalore-68

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The Oxford Devial Corege, Bomminan.
Hasur Road, Bengaluru - 560 068



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SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF

GENERAL INFORMATION

Name:

ASH WINI A

Address

Phone number: 9986452948

Designation: Lectures

Department: Concreative & Endodonties

Specialization:

Date of joining the institution: Aug 01 200

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 23/05/1982

Email id: askshiny 23@gmail.com



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Exams par HIGH SCH	seed	University Sadarsha	Subjects	15 1 9 9 1	Grade/14
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THE OF	VI. RESERVE	NAME OF THE FUNDING AGENCY		
VII. G	CONFERENCE, PERSON PAPE	WORKSHOPS,CDE,GUE R/POSTER PRESENTATI	ONS(TV/Radio T	alks)
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3. Teaching methods: Poper point presentation, Table vide discussion, chair side descrees on, 4 innovations inteaching
Table side discussion, Chair ded act hation
4 Innovations in teaching:
- live models whowed, & videos
5. Design of curriculum
405.
6. Laboratory experiments P. L. Clinicals Demonths ton of
6. Laboratory experiments for clinicals Demonskation of of cavity preparation, Hueride application, pend of rubration. 7. Evaluation Methods:
7. Evaluation Methods: 1 vivo Wash
7. Evaluation Methods: - Led back form wid vivo, black - Led back form wid vivo, black Cardi, kirk.
8. Preparation of resource material: NO
Including books, reading materials, Laboratory manuals etc
9. Mentoring activity: Yes : CUG etudenh)
10, Awards/ Achievements:
**The S2
A LANCE AND A SECOND OF THE PARTY OF THE PAR
EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

Community work: Have affect camp for 3 to 4 years
(Such as values of national Integration,
Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought relief, small family norms etc.)

- 2. National Literacy Mission
- Positions held/ leadership role played in organizations linked with extension work or any other similar activity:

X. PARTICIPATION IN CORPORATE:

Please give a short account of your contribution to:



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Website: www.theoxford.edu

	time too ket
1.	Continuent of the campus life[hostel/sports/cultural activities): (RGOKS exam)
2	Co-conticular activities to al medicine Exam co-ordinal ported as 1000 HS examp
	1
4. 5	students Welfare and discipline: _ Students mento ring
5. N	dembership/participation in bodies/committees on education and national
6. P	rofessional organization of teachers: Aftended Mebuhar
7. A	Touton worked & Biomedical work
anagen	ent BNH & worked
V _{XII} .	MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES TO HELD Membership in committees in the college/universities:
2.	Membership in professional body/society/associations (participation in the
	organizing teams) KSDC
. 3.	Editorial board/ Reviewer:
4.	Any other:
Score:	4 (out of 5)



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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

(Signature of the Teacher)

Dean and Director The Oxford Dental College, Bommnahad

Hasus Road Bengaluru - 560 068



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THE OXFORD DENTAL COLLEGE

SELF-PERFORMANCE APPRAISAL OF TEACHING STAFF - 20 - 21

1. GENERAL INFORMATION

Name: DR. AARTI GUPTA

Address HLFE , B-204, HULINAVU - 560076.

Phone number: 9089580226

Designation: SENIOR LECTURER

Department: CONSERVATIVE & ENDODONTICS

Specialization: MDS (CONSERVATIVE DENTISTRY)

Date of joining the institution: 27 01 20

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 1 YEAR S MONTHS .

Date of birth: 8 | 11 88

Email id: DRAARTI GUPTAD8 @ GNAIL LOM



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	QUALIFICATIONS	Subjects	Year	Grade / Merit
Exams passed HIGH SCHOOL	NAPPENDENA LUCKAL HIGH SCHOOL		2005	Ind CLASS
HIGHER SECONDARY/PRE- DEGREE	O POLA CAMEN	PCMB	2007	Ich CEASS:
BACHELOR'S DEGREE	TMDC	DENTAL SUBJECTS	2007	Ind ceass
MASTER'S DEGREE	IDS, BARHUY (MIP R UNIVERSITY)	CONSCRUMING DENTISTRY	2044	Dianol cross
PHD				
FELLOWSHIPS				
DIPLOMA / CERTIFICATION COURSES				
COURSES	EXPERIENCE NAME OF THE UNITED INSTITUTE INSTITUTE	IIVERSITY/COLL		DURATION
(UG/PG)				
	THE OXFORD	DENTAL 6	une 2	year S Months.



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3.	Teaching methods:	PPT	TOBLE	Sine	Det	Den	Lines

4. Innovations in teaching: Live Moletus USED EHOWED VIDEOS.

Design of curriculum ∀∈ S .

6. Laboratory experiments Demostration of country ppm, cement missing. Filling as restronation of ppm, cement 7. Evaluation Methods: Feedback from world.

8. Preparation of resource material: No Including books, reading materials, Laboratory manuals etc

Mentoring activity: 2

10. Awards/ Achievements: ---

EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: Affended dental comps. (Such as values of national Integration, Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought relief, small family norms etc.)
- 2. National Literacy Mission
- Positions held/ leadership role played in organizations linked with extension work or any other similar activity:

PARTICIPATION IN CORPORATE: X.

Please give a short account of your contribution to:



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1. College/ university/ institution	
2. co-curricular activities college day / swit	
 Enrichment of the campus life(hostel/sports/cultural activities): 	
4. Students Welfare and discipline:	
 Membership/participation in bodies/committees on education and national development: 	
Professional organization of teachers:	
7. Any other:	
 XII. MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES 1. Membership in committees in the college/universities: NAAC 2. Membership in professional body/society/associations (participation in the organizing teams) IACD € 3. Editorial board/ Reviewer: 4. Any other: Score:	ne



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Website: www.theoxford.edu

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Professor/& Head of the Department Department of Conservative Presistry & Endodonice The Oxford Dental College

(Signature of the Teacher)

Dean and Director

The Oxford Dental College, Bommnahalt Hosur Road Bengaluru - 560 068



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GENERAL INFORMATION

Name: Praveen J

Address: 111/30, 70th cross, 5th block, Rajajinagar, Bangalore -560010

Phone number: 9980045451

Designation: Reader

Department: Periodontics

Specialization: Periodontics

Date of joining the institution: 6-12-2013

Nature of employment: Permanent

Total years/ months of service in the institution: Byears 6 months

Date of birth: 27-03-1978

Email id: jayarampraveen@yahoo.in



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Website: www.theoxford.edu

II. ACADEMIC	C QUALIFICATIONS	1	145.44	Grade / Merit
	University	Subjects	Year 1994	72%
Exams passed HIGH SCHOOL	National Public School, Indiranagar, Bangalore, Karnataka India			65%
HIGHER SECONDARY/PRE- DEGREE	BHS First		1996	
BACHELOR'S DEGREE	Sri Siddhartha Dental College, Tumkur, Karnataka, India	Dentistry	2001	60%
MASTER'S DEGREE	The Oxford Dental College, Bangalore, Karnataka, India	Periodontics	2006	62%
PHD				
FELLOWSHIPS				
DIPLOMA / CERTIFICATION COURSES				

TEACHING EXPERIENCE III.

COURSES (UG/PG)	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
BDS and MDS	Sri Sai College of Dental Surgery, Vikarabad, AP, India	2 years 5 months





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805 and MOS	KLE Society's Institute of Dental Sciences, Bangalore, Karnataka, India	2 years 7 months
BDS and MDS	Awadh Dental College and Hospital, Jamshedpur, India.	1 year 1 month
BDS and MDS	The Oxford Dental College, Bangalore, Karnataka, India	3 years 6 months

IV. RESEARCH EXPERIENCE AND TRAINING

Research Stage	Title Of Work/Thesis	University Where The Work Was Carried Out
M.Phil/ Equivalent		
Ph.D		
Post Doctoral		
Research Guidance(give names of students guided successfully)	Effect of Non@surgical Periodental Therapy on Stress and Salivary Chromogranin@A Levels: A Clinico@biochemical Study	Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka, India.
Fraining(please specify)	Multi-design approach to optimize implant-based rehabilitation	Rajiv Gandhi University of Health Sciences, Bangalore, Karnataka, India.

V. RESEARCH PUBLICATION, BOOKS AUTHORED AND MAGAZINES IN THE ACADEMIC YEAR. (Enclose Copy)

SL.NO	NAME OF THE PUBLICATION/ BOOKS AUTHORED/MAGAZINES	CATEGORY	POINTS
1.	Desquamative gingivitis mimicking mild gingivitis	1	7.5
2.	Probiotics in the treatment of periodontal disease: A systematic review	1	15





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VI. RESEARCH PROJECTS CARRIED OUT/ GUIDED

VI. RESEARCH	THE PARTY OF THE P		REMARKS
TITLE OF THE PROJECT	NAME OF THE FUNDING AGENCY	Dujoviion	
	Self	2 years	Completed
Effect of NonEsurgical Periodontal Therapy on Stress and Salivary bromograninEA Levels: A linicoEbiochemical Study	seii	32.033947.23	

VII. CONFERENCE, WORKSHOPS, CDE, GUEST LECTURES, RESOURCE PERSON PAPER/POSTER PRESENTATIONS (TV/Radio Talks)

		ATTENDED	CONDUCTED	DETAILS
SL NO	NAME		CONTROL	CDE
1.	Oral hygiene day 2016	Attended		CDE
2.	Periospardha	Attended		CDE
3.	Autologous platelet concentrates	Attended		540,540
4.	ARDS Implants- Minimum Drilling and Maximum Stability	Attended		CDE
5.	Listerine talk on "Biofilm and Periodontal disease" at The Oxford Dental College		Conducted	CDE

VIII. TEACHER PROFILE AND QUALITY

1. Classes handled: UG: Yes

PG: Yes

- Remedial classes/ counseling classes taken:
- 3. Teaching methods:
- Innovations in teaching: Attended teachers training program in 2014-15.



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- 5. Design of curriculum
- 6. Laboratory experiments
- 7. Evaluation Methods:
- Preparation of resource material: Including books, reading materials, Laboratory manuals etc.
- 9. Mentoring activity:
- 10. Awards/ Achievements:

IX. EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

relief,small family norms etc.)

- Community work: (Such as values of national integration, Secularism, democracy, socialism, humanism, peace, scientific temper, flood or drought
- National Literacy Mission
- Positions held/ leadership role played in organizations linked with extension work or any other similar activity:
- X. PARTICIPATION IN CORPORATE:

Please give a short account of your contribution to:

- College/ university/ institution
- Co-curricular activities
- Enrichment of the campus life(hostel/sports/cultural activities):



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4. Students Welfare and discipline:
Membership/participation in bodies/committees on education and national development:
6. Professional organization of teachers:
7. Any other:
 MEMBERSHIPS OF PROFESSIONAL BODIES AND SOCIETIES Membership in committees in the college/universities:
Membership in professional body/society/associations (participation in the organizing teams):
Member: Indian Society of Periodontology
International Association of General Dentists.
3. Editorial board/ Reviewer:
Editorial board member: International board of Dental Medicine.
Reviewer for: Journal of Indian Society of Periodontology
International Journal of Clinical Oral and Maxillofacial Surgery
4. Any other:
core:05(out of 5)





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 $\mathbf{10}^{\mathsf{TH}}$ MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Lingegowda. K.
Address # 33, 1" main Road, 4" Grow. Hongasandra, Bangalore - 56006

Phone number: 810560 24 59

Designation: Lab Technician.

Department: Depailment of Prosthodontics

Specialization: Pacallulantia

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 36 07 1970.

Email id:



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	SMORE		Year	Grade / Merit	
DEMIC QUALIFICA	University	Subjects		Second Class	
Exams passed	Unwersity		1989	Secone on	
HIGH SCHOOL	M. V-M Highschool				
HIGHER					
BACHELOR'S DEGREE				Cal clays.	
MASTER'S DEGREE	Vinagaka Missions University	Martin of Library and Implimation	2014	First Clars.	
DIPLOMA /		Library and Information Science	2005	Second Class.	
COURSES	100	Tufelmalis			
WORKING EX	NAME OF THE L	INIVERSITY/COLL	EGE	DURATION	
WORKING EX	NAME OF THE L	INIVERSITY/COLL	EGE	DURATION	
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EXTENSION WORK/ COMMUNITY SERVICE

please give a short account of your contribution to:

- Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- Participation in corporate:
- 5. Co-curricular activities:
- Membership in committees in the college:

Score = ____(out of 5)

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for panalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

(Signature)

PRINCIPAL
The Oxford Dental College
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Banyakore - 560 068.



Date of birth:

Email id:

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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF
GENERAL INFORMATION
Name: Mahader Downskinsk
Name: Mahader Address: Road No-12, 3rd cross, 2 hd style. Remediesin li Dourdinnelle Banglorie. Phone number: 8943400180.
Phone number: 8943400180
Designation: Attender
Department: Pedodontic & Presentine Dertitry.
Specialization:
Date of joining the institution:
Nature of employment: Permanent/ Temporary/ Deputation/ Part Time
Total years/ months of service in the institution:



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			Year	Grade / Meri
DEMIC QUALIFIC	ATIONS	Subjects	Year	ant (1
	University	Subjects	- W 10	Rot au
Exams passed HIGH SCHOOL	1. K.V	6 subjects	10141110	
HIGHER SECONDARY	Public Sikiv Public Schal	4 subjects	比如何力	Pass.
BACHELOR'S DEGREE	Schak			
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES				
WORKING EX			ear l	DURATION
WORKING EX	NAME OF THE U	NIVERSITY/COLLE	EGE .	DURATION
17.47%	NAME OF THE U		EGE	DURATION
17.47%	NAME OF THE U		EGE .	DURATION
17.47%	NAME OF THE U		EGE .	DURATION
17.47%	NAME OF THE U		EGE .	DURATION



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EXTENSION WORK/ COMMUNITY SERVICE

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- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college;

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Bangatore - 566 003.



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10TH MILE STONE BOMMANAHALU, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Sis. Kumari

Address Hong as and To

Phone number:

Designation: Staff nursc

Department: Dept of whitey

Specialization:

Date of joining the institution: 18 | 03 | 2018

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 2 4013

Date of birth:

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

1. Community work: ->

campe I vaccine

2. Enrichment of the campus life(hostel/sports/cultural activities):

Participated in entireal prog

3. Membership in committees

4. Participation in corporate:

5. Co-curricular activities:

6. Membership in committees in the college:

Score = _____(out of 5)

TRINCIPAL
The Oxford Dental College
Bommanahalli, Hosur Road,
Bangalore - 560 068.

CERTIFICATE

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Professor & Head of the Department
Department of Contertains (vectorly & Endotedies
The Oxford Dental College

Kumagai (Signature)



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF - 2016

Mar. Suja y
Address Barvangladi, Blose
Phone number:

Designation: Affordas

Department: Conresvative den he try 2 Endodon to

Specialization:

Date of joining the institution:

Nature of employment: Permanent/Temporary/Deputation/Part Time

Total years/months of service in the institution: 29 years

Date of birth:

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

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- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college: Eganising flower decided during inagration progs.

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Preference & Head of the Department
Department of Conservative Pensistry & Endudorsize
Time Cartard Dentisal College

別とし (Signature)

PRINCIPAL
The Oxford Dental College
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Bangalore - 560 068.



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GENERAL INFORMATION

HARISH.S.C

Address # 9 9th crown Juymoyer 4th Block B'Core

Phone number: 9060413449

comist technician. Designation:

Cons d Esido Department:

Specialization:

16/05/2011 Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

2/12/1984 Date of birth:

Harish Scau @ gmail. (m. Email id:



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Ph: 080-61754680 Fax: 080 – 61754693E-mail:deandirectortodc@gmail.com Website: www.theoxford.edu

EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities): participated in
- 3. Membership in committees
- 4. Participation in corporate:
- Co-curricular activities
- Membership in committees in the college: —

Score = ____(out of 5)

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Dr. SRIRE & P.

Preference & Head of the Department
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THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Address

Name:

NO: 113, 45 CRISS. R.K. LAY OUT
BSK TI Stark. Pademotorage. Bargala. 56000

Phone number: 7899 4963 69

LAB-TECHNICIAN Designation:

ORAL-PATHOLOGY & MECROBEOLOGY Department:

HISTOPATHOLOGY. Specialization:

Date of joining the institution: 05-12-2002

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/months of service in the institution: 17 years.

Date of birth: 03-01-1969

Email id: amratherhoma Gmail. Cort.



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Website: www.theoxford.edu

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- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = (out of 5)

CERTIFICATE

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116



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10[™] MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name:

SVMATHI MANICKAM

Address

10, 3rd MAIN, NETIRVST, VDAYANAGAR BANGALOFETE

Phone number:

9535915581

Designation:

LAB. TECHNICIAN

Department:

DRAL PATHOLOGY

Specialization:

Date of joining the institution: 21-04-2011

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth:

17/07/1962

Email id:

117



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Website: www.theoxford.edu

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ADE MIC QUALIF	University Of St.	Subjects	1399	fans
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EXTENSION WORK/ COMMUNITY SERVICE Please give a short account of your contribution to: Community work: Enrichment of the campus life(hostel/sports/cultural activities): 3. Membership in committees 4. Participation in corporate: Co-curricular activities: 6. Membership in committees in the college: 3core = _____(out of 3) CERTIFICATE This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University. (Signature) CUPAL The Oxford Dental College Bommanahaili, Hosur Road,

Bangalore - 566 068.



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: RASHMI'S

Address No. 573 6th Phase 16th Cross J.P. Nagan Borgalole.

Phone number: 8197678974

Designation: Office Staff

Department: Domital

Specialization:

Date of joining the institution: 19-05-2011

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 5 Years 11 Non Hu

Date of birth: 27/06/1987

Email ld: radmistriction 578@gmail.com



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EXTENSION WORK/ COMMUNITY SERVICE

please give a short account of your contribution to:

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- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = _____(out of 5)

CERTIFICATE

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PRINCIPAL

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GENERAL INFORMATION

Name: KRISHNA MURTHY M

Address # 14612, 2nd Cross, ITI layout, Elukurte, Bommanahalli, Bangalore

Phone number: 9945631934

Designation: Pittendus.

Department: Oral and Maxillofacial Suggery

Specialization:

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 15 Yea/s

Date of birth: 0 1 /06 /19 12

Email id:



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Website: www.theoxford.edu

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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Communitywork: Actively participated in arranged dental treatment camps
- Enrichment of the campus life(hostel/sports/cultural activities): Filways an active
 participant in all the organizing events, games, etc
- Membership in committees
- Participation in corporate: Has a good knowledge in medical waste segregation.
 which has always helped in camps organized
- 5. Co-curricular activities: Porticipated in sports volleyboll, cricket, etc. and Cultural activities Dancing, singing
- Membership in committees in the college:

The Oxford Dental College Bermanahalli, Hoser Soud, -Bangalore - 500 864.

Score = 3.5 (out of 5)

CERTIFICATE

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(Signature)



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10™ MILE STONE BOMMANAHALU, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Address # 35, 4th main boad, bullenaballe, bangalore

Phone number: 9844 2 23116 -

Designation: Attended Department: Public Hearth Sentitly

Specialization:

Date of Joining the institution: 28 /4/200 | .

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: IS year.

Date of birth:

Email id:



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- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = ____(out of 5)

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> の見。定 (Signature)

he Oxford Dental College Benns-rahalli, Hosur Road, Sangarore - 560 06a. Protestor and Heart of the Copartment



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION	ìΝ
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Name: Chandlanina

Address - Doot No 11/231 Saptagir's layout, munnekoleles
Phone number: 7760707663 Bangline -5600

Designation:

Allerdu

Department:

Redodoutris.

Specialization:

Date of joining the institution: 1 1 2005

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 12 years Formers

Le Harris

Date of birth: 8/04/1982,

Email id:



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ACADEMIC QUALIFICATIONS

Exams passed	University	Subjects	Year	Grade / Merit
HIGH SCHOOL	Clonerman + Palethe Cohast	5 subjects	loth sto	And class
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BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES				

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
Dertal.	The cofford Dental College.	1/11/2006 124kari
	College.	12yarı



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Please give a short account of your contribution to:

1. Community work: Assisted in lental carrys -

- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- Membership in committees in the college:

Score = S (out of 5)

Deen and Director
The Oxford Dental College, Bosomnahi,
Hostir Road, Bengaluru - 560,066

CERTIFICATE

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(Signature)



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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: BM AMRUTHESHA

Address # NO. 113, 44 CRISS. R.K LAYOUT, BEK FOR Steepe Padmish rays. Bangalon- 560070 Phone number: 7899496369

Designation: LAB-TECHNIZCEAN

BRAL-PATHOLOGY + MELROBSOLOGY Department:

Specialization: 115 STOP NTHOLOGY

Date of joining the institution: 05.19 - 2001

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Date of birth: 03-01-1969
Email id: amruthe 8h bon@ Boniv. Cott



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Ph: 080-61754680 Fax : 080 – 61754693E-mail:deandirectortodc@gmail.com Website: www.theoxford.edu

	FICATIONS	Subjects	Year	Grade / Merit
HIGH SCHOOL	Karontele	4	1985	pres
HIGHER SECONDARY	11 1-	PU	1988	PASS
BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES	DM LT J.M LT		1996	Fire class
MANORY INDEED	ADEDIES LEE			
COURSES COURSES	NAME OF THE UNI			DURATION
	NAME OF THE UNI	UTION		DURATION 2002
	NAME OF THE UNI	UTION		
	NAME OF THE UNI	UTION		



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EXTENSION WORK/ COMMUNITY SERVICE

please give a short account of your contribution to:

- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities
- 6. Membership in committees in the college:

Score = 4 (out of 5)

anser

Dean and Director .

The Oxford Dectal College, Bornman, Hosel Road Bengalury - 560 058

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

B.M. Amralketho (Signature)

The Oxford Dental College Bommaria Halli, Hosur Road, Bangalore - 560 063.

CHILDREN'S EDUCATION SOCIETY (Regd.) THE OXFORD DENTAL COLLEGE



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THE OXFORD DENTAL COLLEGE

10¹¹ MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Address Jayaganahallo Government Medel Primary 3hale, Annay Japa Garden, Bangalere - 550078.

Phone number: 1740887029

Designation: () Handes

Department: Department of Prosthedentics

Specialization:

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 05 - 01 - 1958

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

1. Community work:

Camps.

- Enrichment of the campus life[hostel/sports/cultural activities]:
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = 4 (out of 5)

The Oxford Dental College)
Sommanahall, Hosut Roads
Sommanahall, Hosut Roads

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(Signature)

136



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10[™] MILE STONE BOMMANAHALU, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF -2017

GENERAL INFORMATION

Mr. Nitherh

Address

Phone number: 988 640 2180 Attender Conservative dentity & Endodontis Designation:

Department

Specialization:

Date of joining the institution: 1996

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Date of birth: 1 41 1976
Email id: STINVALA 516@ gmail. Com



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Website: www.theoxford.edu

Exams pass	sed	University	California	Year	Grade / Mer
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HIGHER SECONDAR	tv	Srivingho a Light a Sri sha Vidya	raha perta collega	ar stee	+10
BACHELOR' DEGREE	'S	Sort 9	00-1		
MASTER'S DEGREE	1	P polici	-13		4
			-		
DIPLOMA / CERTIFICATIO COURSES			3 1		
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COURSES WORKING	EXPER	ME OF THE UNIVE	ERSITY/COLLEGE		ATION



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Website: www.theoxford.edu

EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- Community work:

2. Enrichment of the campus life(hostel/sports/cultural activities):
cultural padgram - participated

- 3. Membership in committees
- 4. Participation in corporate:
- Co-curricular activities:
- 6. Membership in committees in the college:

CERTIFICATE

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Professor & Head of the Department Department of Conservative Pentistry & Endodonlics

The Oxford Dental College

The Oxford Dental College Bommanahalli, Hosur Rc. 3, Bangalore - 560 000.



Email id:

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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION
Name: M.C. Kaksbonamma Address It 35, 19th Hair Good, Putteraballe, Bangalor
Phone number: 98 44 22 5 116 .
Designation: Attender a title
Designation: Attender Department: Public Frank Dentilly:
Specialization:
Date of joining the institution: &8/4/200 1
Nature of employment: Permanent/ Temporary/ Deputation/ Part Time
Total years/ months of service in the institution: 1 Bytas
Date of birth:



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Website: www.theoxford.edu

EXAMS passed	University	Subjects	Year	
HIGH SCHOOL				
				-
HIGHER SECONDARY				
BACHELOR'S DEGREE		-		
MASTER'S DEGREE				
DIPLOMA / ERTIFICATION COURSES			0.10	
COURSES		NIVERSITY/COLLECTION	SE	DURATION
	JHE DEFOR	D DENTAL		16 years.
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- Enrichment of the campus life[hostel/sports/cultural activities]:
- 3. Membership in committees
- 4. Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

(out of 5)

PRINCIPAL The Oxford Dental College Bommanahalli, Hosur Road, Bangaiore - 560 96a.

CERTIFICATE

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GENERAL INFORMATION

Name: KRISHNA MURTHY . M

Address # 14612, 2nd Crou, ITI layout, Elukunte, Bommanahalli, Banglore

Phone number: 9945637934

Designation: Altender

Department: Oral & Maxillofacial Surgery. Specialization: House Keeping

6-10-2002

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 07/06/1972 -

Email id:



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and the same of th	ATIONS			Grade / Merit
SEMIC QUALIFIC	The second secon	Subjects	Year	
Exams passed	University	300		
HIGH SCHOOL				
(MCME)	Caut. High		1000	
HIGHER SECONDARY [SSLC]	Govf High Echool, Begur Bongalore-68		1323	0 10
BACHELOR'S DEGREE				
MASTER'S DEGREE			UL, K	
DIPLOMA / CERTIFICATION				11

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION	
	the Oxford Dental College.	2002 - 2018	



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: Pailicipated in devilal camps
- 2. Enrichment of the campus life(hostel/sports/cultural activities): activity furbraphted in all cultural a sports activity
- Membership in committees
- 4. Participation in corporate: Good knowledge about waste sequegelism.
 5. Co-curricular activities: Participated on viccess to a cultural activities.
- Membership in committees in the college;

Score = 4 (out of 5)

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> The Oxford Dental College Bommanahalli, Hosur Road,

Bangalore - 560 065.

(Signature)



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Mr. Harish, S.C

Address 19, 9h croms Jaymayour, 4th Blownt, B'we

Phone number: 9060413449

Designation: Cenarist technician.

Department: Cons d'Endo

Specialization:

Date of joining the institution: 16/05/2011

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 2 12 84

Email id: havil Sc 84 @ garrail. (om.



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = _____(out of 5)

Dean and Director
The Oxford Dental College, Bostonnahir
Hostir Road, Bengalutu - 560 068

CERTIFICATE

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Dr. SRIREKHA.A

Professor & Head of the Department
Department of Construction Perfectly & Endedonica
The Oxford Dental College

jan. SC (Signature)



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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF - 2019

GENERAL INFORMATION

Name: Sis. Lakshmi

Address will Ramchnolsa #512150. Beguer Good, Vienaturiagar, Akar B.MP Bommanahalli. Bangulore karnataka-560068

Phone number: 9071829880

State Nurse Designation:

cons and Endo Department:

Specialization:

Date of joining the institution: 18-09-8018

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 22 7 11989.

Email id:



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	CATIONS			Grade / Meri
ACADEMIC QUALIF	ich in the same	Subjects	Year	
Exams passed HIGH SCHOOL	JSS High		2006	
	School 0			
HIGHER	MADRAS PU COllege	PCMB	2008	
BACHELOR'S DEGREE				
MASTER'S DEGREE			11/1	
DIPLOMA / CERTIFICATION COURSES	HEMALAYAN University	operation	J	
COURSES		NIVERSITY/COLLE	EGE	DURATION
	NAME OF THE U	NIVERSITY/COLLE		127.5651011715
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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: ASHA Tour
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- 5. Co-curricular activities:
- Membership in committees in the college;

Score = ____(out of 5)

Dean and Director

The Oxford Dental College, Bommahail

Hasur Road, Bengaturu - 550 068

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Dr. SBIREKHA.A

Professor & Head of the Department
Department of Construies Penintry & Endocorrice
The Oxford Dental College

(Signature)



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10TH MILE STONE BOMMANAHALU, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: BM. AMRUTHESHA

Address # NO. 113, 415 cross. R. K. Layout,

Phone number: A899496369

Designation:

Designation:

LAB-TECHNECIAN

ORAL-PATHOLOGY & MECK Brology Department:

Specialization: HISTOPATHOLOGY

Date of joining the institution: 05-12-2002

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 03 - 01 - 1969

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	-A110NS		Yea		Grade /	/ Merit
CADEMIC QUALIFI	16	Subjects	1982		PRS	
10 th Stat	Sumdery &	-			PASS	
HIGHER SECONDARY	Karamila.	wal	198	8	415.00	
BACHELOR'S DEGREE						
MASTER'S DEGREE						
DIPLOMA /	DMLT		19.		Fire	class
COURSES WORKING EX	and the same of th	INIVERSITY/C		7,2	DURATION	
COURSES	NAME OF THE L	INIVERSITY/C		7,2		
WORKING EX	NAME OF THE L	TITUTION	OLLEGE			
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EXTENSION WORK/ COMMUNITY SERVICE

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- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- Membership in committees in the college:

ansen

Score = 3 (out of 5)

Dean and Directo
The Oxford Dental College, Borns
Hosur Road, Bengaluru - 550 068

CERTIFICATE

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> B.M. Amulterly (Signature)



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10TH MILE STONE BOMMANAHALU, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name:

SUMATHI MANIEKAM

Address

10,3nd Main Xekou St, Wayanagar, Bongalore-A

Phone number:

9535925581

Designation:

LAB. TERHNICIAN

Department:

CRAL PATHOLOGY

Specialization:

Date of joining the institution:

21.04.2011

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

& years

Date of birth:

17.07.1962

Email id:



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Website: www.theoxford.edu

and the second second	ALIFICATIONS	15.46	Year	Grade / Mera
Exams pas	sed University	. T. A.	1971	fats
HIGHER	tol Edurib	solve -	1976	fass
Pre	Road &	Her		
BACHELOR DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATIO COURSES	n Medical M Laborals Technol	578	1988	2ml clas
2000	EXPERIENCE			
WORKING	NAME OF THE U	NIVERSITY/COLLEGE	DU	RATION
2000	NAME OF THE U	ITUTION		**************************************
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- 3. Membership in committees
- Participation in corporate:
- Co-curricular activities?
- Membership in committees in the college:

ean and Director. The Orderd Durital College, Bommos Hospit Road Bengaluru - 560 06c

CERTIFICATE

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(Signature)



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10™ MILE STONE BOMMANAHALU, HOSUR ROAD, BANSALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Mr. Babu Name:

Address

Designation: Affendor Department. Concervative destity & Endodontics

Specialization:

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth:

Email id:



THE OXFORD DENTAL COLLEGE

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Bommanahalli, Hosur Road, Bangalore – 560 068.
Ph: 080-61754680 Fax: 080 – 61754693E-mail:deandirectortodc@gmail.com
Website: www.theoxford.edu

EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- Community work: . .
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:

Dept. proge - organizing

- 5. Co-curricular activities:
- Membership in committees in the college:

Score = ____(out of 5)

Dean and Dir.
The Oxford Dental College, 5-1,
Hosur Road Bengaluru - 560 068

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Professor & Head of the Department
Department of Conservative Pertistry & Endedonics
The Oxford Dental College

(Signature)

25 200



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THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF -2018

GENERAL INFORMATION

Name: Mrs. Acelanna.

Address # 2417, om Shakthi Ach, om Shakthi Leyout, branchewi palya Brance number . 80 51726 569

Phone number: 8951736559

Designation: .

Department: cons and Endo

Specialization:

Date of joining the institution: 24 3 30 6

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 01 101 1943.

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

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- Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- Participation in corporate:
- Co-curricular activities:
- 6. Membership in committees in the college: pact of

Score = ____(out of 5)

Dean and Director The Oxford Dental College, Bon. Hosur Road Bangaluru - 500 Gds

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Dr. SRIREKHA A Professor & Head of the Department Department of Conservative Pentistry & Endodorrica

The Oxford Dental College

(Signature)



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OF ADDRAIGAL FOR NON-TEACHING STAFF

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STATE
GENERAL INFORMATION
Name: Chardeanna
Address - Dun No 11/2 3 1 Saptrigiri Cajon 6, manne
Phone number: 1-160 7 07
Designation: Attender.
Department: Pededouties
Specialization:
Date of joining the institution: 1 11 2006.
A / Townsorm / Deputation / Part Time
The least of service in the institution:
Date of birth: 8 04 1982
Email id:





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Karnataka & Dental Council of India, New Delhi)

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Website: www.theoxford.edu

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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

Community work:

Assisted in dental campus

- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = ______(out of 5)

Dean and Director
The Oxford Dental College, Bomms....
Hosut Road Bengaluns - 560 068

CERTIFICATE

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> Chandhamma (Signature)



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name:

WINDD.S

Address

BHAVANI NAGAR, BSIS IIND STAGE. BANGALORE

Phone number:

9880597041

Designation:

DENTAL MECHANICAL

Department:

PROSTHO DONJICS

Specialization:

DIPLOMA

Date of joining the institution: 7-10-2017

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 3 YEARS

Date of birth: 19-11-1994

Email id:

VINEDUDAY 6 OGMAIL COM



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GENERAL INFORMATION

Name: SARVOIMMAN AUGUST, PhiD Office, +lospete Anekal-Address Muniyappa layout, PhiD Office, +lospete Anekal-Bonyalar-562106.

Phone number: 9844726839

Designation: Attendu

Duff of orthodontics Department:

Specialization:

Date of joining the institution: 10 / 11 / 2004

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 02 · 02 · 1976

Email id: Saeu Soniya 90@ Gmail.com



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EXTENSION WORK/ COMMUNITY SERVICE

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- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- Participation in corporate:
- Co-curricular activities:
- 6. Membership in committees in the college:

Score = ______(out of 5)

Man and Director
The Oxford Dental College, Bominn, alti,
Hosur Road Bengaluru - 560 068

CERTIFICATE

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> CS:509700700000 (Signature)



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

SARVOTHAMA C.S

Address

runningappa layout, PWD Office, Hospete Anekal

Phone number: 9844726839

Designation:

Attender

Department: Dept 9 orthodonties

Specialization:

Date of joining the institution:

10/11/2004

Nature of employment: Permanent/Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: トキ げいろ

Date of birth: 0 ン・0 2・19 千6

Email id:

Sacusoniya 40@ Cimail · lons



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short accoun	t of your contribution to:
----------------------------	----------------------------

- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = 5 (out of 5)

Dean and Director
The Oxford Dental Coflege, BornstnatHosur Road, Bengaluru - 560,068

CERTIFICATE

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> C.S. SOTUSTHAMU (Signature)



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2018 - 2019

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GENERAL INFORMATION

Name: Krishna Multy.

Address # 14612, 2nd own, ITI layout Mukemte, Bommanohalli, fanfan

Phone number: 99 45637934

Designation: Affender

Department: Dral & Maxillofanal Jungery

Specialization: House Keeping Staff
Date of Joining the Institution: 06 | 10 | 2002

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/months of service in the institution: 16 years 5 months

Date of birth: 07/06/1972

Email id:



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CADEMIC QUALIFI	University	Subjects	Year	Grade / Merit
Exams passed HIGH SCHOOL	CAMPOSIT			
HIGHER SECONDARY (SSLC)	Jury- high School, Begun Bangalere 62		1024.	
BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES				

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
	the begord Dental contege.	2002-2049.



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: Intripated in stranged dental, camps.
- 2. Enrichment of the campus lifethostel/sports/cultural activities): Activity farticipated in the Enrichment of the campus lifethostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate: good knowledge about the wante seggeration
- 5. Co-curricular activities: lanticupated in sports tike wither a cultural activities Singing
- 6. Membership in committees in the college:

Score = 5 (out of 5)

Dean and Direct.
The Oxford Dental College, Bornata.
Hosar Rosal Bangalura - 500 088

CERTIFICATE

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(Signature)



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GENERAL INFORMATION

Accress It 51, 2nd main load, Kanakpula Hain head, Bangalile

Phone number: 8 88 43 70 343

stitender bublic Health obertietry. Designation: Department:

Specialization:

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 4 years/

Date of birth:

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

2. Community work: Dental camps in school, oficial Enrichment of the campus life(hostel/sports/cultural activities):

Membership in committees

Participation in corporate:

Co-curricular activities:

Membership in committees in the college:

(out of 5)

Dean and Director The Oxford Dental College, Bommnér -Hoster Road Bengalura - 560 068

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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Sr. K. D. Yamunor.

Address # 603. Chandra vivas stuain d'éross Hongrandra.

Phone number: 9731942298

Designation: Staff Nurse.

Department: Oval & Maxillofacial Surgery.

Specialization: Staff Name General Nussing & Mediurfery

Date of joining the institution: 12 01 2018

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 23 \ 05 | 1977

Email Id: yamuna Saltish 4@ gmail. com



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Website: www.theoxford.edu

The second secon	sed University	Subjects	Year	Grade
HIGH SCHO			1992-1995	Grade / M
HIGHER SECONDAR	ty			
BACHELOR DEGREE			1991 1999	
MASTER'S DEGREE	GHM		1995-1998	
DIPLOMA / CERTIFICATIO COURSES	ON Basic Computer		2008	
	EXPERIENCE			
COURSES	NAME OF THE UNIVE	ION		ATION
	INSTITUT	ION		
	Ramaknishna sera	Shranga Hongs	1998 -	l000
	Ramaknishna pera Penhampita Bahnsar dursing Handur A	Shange House	1998 - 1	2000 2004
COURSES	Ramaknishna sera	Shormer House	2001 - 3 2004 - 2004 2009 - 20	2000 2004 - 2006 - 240 011 - 2404
	Ramaknishna Bera Bahnshanger - Bahnshanger - Bahnshan Hospita The oxford Hospita The oxford Resp	Shormer House	2001 - 3 2004 - 2004 2009 - 20	2000 2004



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EXTENSION WORK/ COMMUNITY SERVICE

Please	give a	short	account o	of your	contribution to:
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1. Community work: Free medical camp, Participated in
Covid vaccination live by giving vaccination
2. Enrichment of the campus life(hostel/sports/cultural activities): to shulerly

Membership in committees

5. Co-curricular activities: "Paglazipated in Celebraling featurely

Membership in committees in the college:

Score = ________(out of 5)

Dean and Director The Oxford Dental College, Bonzhi Hosur Road, Bengaturu - 560 068

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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Shivamma .

Address · Bommaconalra.

Phone number: \$150 \$166 9 4

Designation: Attender Department: Ofthe fonter

Specialization:

Date of joining the institution: 25 66 2018

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

3 geors appear.

Total years/ months of service in the institution:

Date of birth: & Mof Kionen .

Email id:



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	- TIONS		15-05	Grade / Merit
DEMIC QUALIF	ICATIONS	Subjects	Year	
Exams passed	University			
HIGH SCHOOL				
HIGHER				
SECONDARY	4			
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BACHELOR'S DEGREE				
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MASTER'S DEGREE				
DEGREE				
DIPLOMA /				
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Ph: 080-61754680 Fax: 080 – 61754693E-mail:deandirectortodc@gmail.com

Website: www.theoxford.edu

EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = _______(out of 5)

Wean and Director
The Oxford Dental College, Bomins.
Hosur Road Bengaluru - 560 068

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

. कुट्टा क्री (Signature)



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Rathamma

THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Rathmamma Address 5th Fleet, Mantry Sterling Plot No I41, Survey No. 997/8, Madel Golony, New Deep Bring Phone number: 9611892060

Designation: Afterdur

Department: Prostludentico

Specialization: Prosylvodowhich

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 1/1/1969

Email Id:



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EXTENSION WORK/ COMMUNITY SERVICE
Please give a short account of your contribution to:

- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- Membership in committees in the college:

Score = Lout of 5

Offian and Director
The Oxford Dental College, Bommonahati
Hosur Road Bengaluru - 580 088

CERTIFICATE

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(Signature)

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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Gonzamna. Name:

Address - # 12/3rd cross, Dector 7, thubachelli, Banglare - 560037

Phone number: 7147296619

Designation: Attender

Department: Pedodontics.

Specialization:

Date of joining the institution: 810/2009.

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

10 years 8 months 14/1/201880

Email id:

Date of birth:



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Website: www.theoxford.edu

CADEMIC QUALIFI	CATIONS		Year		Grade / Merit	-
	and the second s	Subjects			Ist clear	1
Exams passed HIGH SCHOOL	SV.s Public	8 subjects	1.014		Jst Class	1
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BACHELOR'S DEGREE						-
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WORKING EX		NIVERSITY/COL	LEGE		DURATION	_
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EXTENSION WORK/ COMMUNITY SERVICE

please give a short account of your contribution to:

Community work:

Dental carrips.

2. Enrichment of the campus life(hostel/sports/cultural activities):

Membership in committees

4. Participation in corporate: Attended carrys in corporate with PGS.

Co-curricular activities:

6. Membership in committees in the college:

Score = 4.5 (out of 5)

Dean and Director The Oxford Dental College, Bommnahali Hosur Road Bengaluru - 560 068

CERTIFICATE

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(Signature)



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10" MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Sunanda.IM

Address 554/A 26th main 14th CHODD JP Nagar 15th Asa. Bangalow - 78

Phone number: 9886157450

Designation: Staff NUTLDE (ANM)

Department: Periodoutics

Specialization: 31aff NUTUSE CANM)

Date of joining the institution: 20.01.2019

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time : คิยาพลงเป็

Total years/ months of service in the institution: 1 >2001.

Date of birth: 90.06.1973

Email id: Imsuranda 599@gmail.com.



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ACADEMIC QUALIFICATIONS

Exams passed	University	Subjects	Year	Grade / Merit
HIGH SCHOOL	GGHS	SSLC	1988	PASS
HIGHER SECONDARY	NDRK	Ric	1993	PASS
BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES	Janatha Hospital	ANN	1994	PAS3

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short	account	of your	contribution to:
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- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = ____(out of 5)

Dean and Director
The Oxford Dental College: Sommulatur
Hosur Road Bengaluna - 560 068

CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

Bunanda. IM.

(Signature)



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THE OXFORD DENTAL COLLEGE

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SELF-	PERFORMANCE APP	RAISAL FOR N	ON-TEACHING	SIAFF	
GENERAL INFORMA	ATION				
Name: M.C.	Phiramma 5, Mantinaga 1508 6644	1,	dia	Bargalore	-
Address ± &	s, Mantinaga	e, Hongo	(Strong)	V	
Phone number: 8	150816644	. /	€:		
Designation:	turder.	0 .	11. 110	Sentietry	
Department: Ay	tunder. ractoment y	hubbic	tham i	1/	
Specialization: /	- Y			V	
Date of joining the i	nstitution: 05 Ju	ne, 2019	60		
	ent: Permanent/ Temp		on/ Part Time ~	-	
Total years/ months	of service in the instit	ution: 1 yu	ae.		
Date of birth:		(/			
Email id:		87 70			
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Website: www.theoxford.edu

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EXTEN	NSION WORK/ COMMUNITY SERVICE	
	e give a short account of your contribution to:	
	1. Community work:	
61	Enrichment of the campus life(hostel/sports/cultural activities):	
	Membership in committees.	
10.4	4. Participation in corporate:	
91	5. Co-curricular activities:	
	6. Membership in committees in the college:	
	Score =(out of 5)	
	The Oxford Dental College, 80mm/rs. Hosur Road, Bengaluru - 560 055	
	CERTIFICATE	
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	Profession vices	



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2019 - 2020 2019 - 2020

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10[™] MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Krishna Muilley M

Address = 1 12610, And Cross, 171 layout flukunte, Bommanchalli, Bangalore

Phone number: 9947637934

Designation: Attender of these keeping shaff
Department: Oval and Marillo facial Surgey

Specialization: House keep

Date of joining the institution: 06 (10 200 2

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: L& Years

Date of birth: oHoblighd

Email id:

193



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			Year	Grade / Merit
ACADEMIC QUALI	HCATIONS	Subjects	11.0	Grade / Merit
Fyams passed	Disversity			
HIGH SCHOOL				
			1988	
HIGHER SECONDARY	Govt High		her sales	
(22rg)	Stool : Regar			-
BACHELOR'S	trugator-60			W.
DEGREE				-
MASTER'S	-			3
DEGREE				
DIPLOMA/	-			
CERTIFICATION				4
COURSES				
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	NAME OF THE UNI	VERSITY/COLLEGE		DURATION
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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- I. Community work: Actively participated in amonged deates treatment
- 2. Enrichment of the campus life(hostel/sports/cultural activities): Always an active participant in all the organizing with Gance Etc
- 3. Membership in committees
- 4. Participation in corporate. Here good knowledge inwaite leggregation, which has always helped in lawps organized.

 5. Co-curricular activities:
- 5. Co-curricular activities: Participated in Sports-volleyboll, Cricket Etc. 4. Cultural authoris- Daneing, Singing Etc.
- Membership in committees in the college:

Score = 3.5 (out of 5)

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THE OXFORD DENTAL COLLEGE 10" MILE STONE BOMMANAHALU, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Sr. K.D. Yamkma.
W/o Late Relish Kumar
Address # 603, Chandro News 1 st main, and cross, suprogramma

Phone number: 9731 94 2298

Designation: Staff Nucle

Department: Oral & Marillo facial Surgery

Specialization:

12/01/2018 Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 23 05 1917

Email id: yamunatatirh 4@ gmail.com.



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Website: www.theoxford.edu

			Grade / Merit
ADEMIC QUALIFIC	ATTONS	jects Year	
Exams passed HIGH SCHOOL	Varnatabete	1992 - 1995	
	Board		
HIGHER SECONDARY		1940	
	1.111	1995-1948	
BACHELOR'S DEGREE	Tomil Nodu		
MASTER'S DEGREE			
DIPLOMA / CERTIFICATION COURSES	tasie computer	2.008	

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
Staff Norse	Ramakrutura sevaskrama Herpital, Penna mpet - S. hadagh	1998 - 2000
01	Bahadur Nursing home	2001-2004
	The efford Doubal Marpital	2004 - 2006
	The oxford Dontal college	2009 - 2011
	The Oxford Dental coverge	2018 - 2020



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: Participated in medical camp, wild, vaccination diese.
- 2. Enrichment of the campus life(hostel/sports/cultural activities): Participalization R
- 3. Membership in committees culture committee, Voluntary
- Participation in corporate: —
- 5. Co-curricular activities: Participation & valuating en awareness Anograme constructed in the Department.
- 6. Membership in committees in the college:

Score = 4 (out of 5)

The Oxford Dental College, Bommana.
Hosur Road, Bengalum - 560,068

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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Address No. 15, K-11/1, Jet main all cross, Byper Nam Road, Horge and B

Phone number: 9502591756

Designation: office resistant

Department:

central

Specialization:

Date of joining the institution: 용J. 08 · 의하

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 4 Year to Months

Date of birth: 13 | 05 | 1995

Email id: Parimula 12/95@ Just com



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CADEMIC QUALIFIC	ATIONS	Subjects	Ac	di	and the same of th
CADEMIC STOR	University	Stanfe		908 H	B Grade
Exams passed	O.S.		20	10	
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DIPLOMA / CERTIFICATION LOURSES					
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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of	your contribution to:
--------------------------------	-----------------------

- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities): Sports /cultural activities
- 3. Membership in committees
- 4. Participation in corporate: Participate in Quiz Guiffifion.
- 5. Co-curricular activities:
- 6. Membership in committees in the college: paragement neet Countte

Score = ____(out of 5)

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CERTIFICATE

This is to certify that all the details and information submitted is true and correct to the best of my knowledge. I understand that I am liable for penalization including criminal action for providing wrong/misguiding information as deemed fit by the University.

> الم الم (Signature)



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10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

B.M. AMRUTHESH Name:

Address

At No. 113, 4 to cross. R K Ley out
Box 6 of state, Padomishings. Bangalow- 560070

Phone number: 7899496369

LAB- 7 ECHNOCEANS. Designation:

ORAL- PATHOLOGY & MICROREOLOGY Department:

HISTOPATHOLOGY Specialization:

Date of joining the institution: 05-19-2002

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 03 - 01 - 1969

Email id:

amoutheshom@ gm iv. com.



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			Year	Grade / Meria
ADEMIC QUALIFI	CATIONS	Subjects		
Exams passed HIGH SCHOOL	University	Braid.	1 1988	Poss
10th 51d	Ediah		1988	POSS
HIGHER SECONDARY	Kaenlak	1	1100	
BACHELOR'S DEGREE				
MASTER'S DEGREE				
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THE OXFORD DENTAL COLLEGE

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Ph: 080-61754680 Fax: 080 – 61754693E-mail:deandirectortodc@gmail.com Website: www.theoxford.edu

EXTENSION WORK/ COMMUNITY SERVICE

r rease give a short account of	your contribution to:
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- Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = ____(out of 5)

mer

The Oxford Dental Coffege, Bommnahalf Hosur Road Bengaluru - 560 068

CERTIFICATE

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BM. Amrathable (Signature)



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THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

Name: Boba

Address Augpatemple, orp Road, Horgerander

Phone number: 8884604482

Designation: Attender

Department: pousho

GENERAL INFORMATION

Specialization:

Date of joining the institution: Jan 20 20

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth: 63 ym 19-01-1963

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:

PROFAHOD.

Membership in committees in the college:

Score = (out of 5)

Dean area

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> Bolly M Signature)



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THE OXFORD DENTAL COLLEGE 10" MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Ansar Shahina Banu. S

Address:2/575,A,Saratha Nagar,Sivakasi,Tamilnadu.

Phone number: 7904154594

Designation:Dental Hygienist

Department: Periodontics

Specialization: Dental Hygienist

Date of joining the institution:30.01.2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time:Permanent

Total years/ months of service in the institution:1year2Months

Date of birth:03.06.1999

Email id:ansarbanu00918@gmail,cbth



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ACADEMIC QUALIFICATIONS

Exams passed	University	Subjects	Year	Grade / Merit
HIGH SCHOOL	Glory Matric Higher Secondary school	SSLC	2013-2014	96%
HIGHER SECONDARY	Glory Matric Higher Secondary school	HSS	2015-2016	78%
BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES	Vinayaka Mission Sankrachariyar Dental College	DENTAL HYGIENIST	2016-2018	80%

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
Dental Hygienist	Thilagar Dental Clinic	Jan2019-Oct2019
Dental Hygienist	Arun Dental Clinic	Nov2019-Dec2019
Dental Hygienist	The Oxford Dental College and Hospital	Jan2020-At present



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- dental camps.
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate;
- Co-curricular activities:
- Membership in committees in the college:

(out of 5)



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Ansar Shahirla Banu.S

(Signature)

Dean and Director

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Hosur Road, Bengaluru - 560 068



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

Children	-			
	150	3.0	 1.04	

GENERAL INFORMATION

Name: Gr. Kowsolyer

Address + 23th 7th Cooks. M.G. Palya Bargalor

Phone number: 9739073742

Designation:

Public Health Derditty Department:

Specialization:

Date of joining the institution: 20 - 1 - 2021

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

21-1-1981 Date of birth:

Email id:



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Website: www.theoxford.edu

Exams passed	1 11 1	0.11.1.	Year	
HIGH SCHOOL	University	Subjects	10.01	Grade
HIGHER SECONDARY				
BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES				
	WALLS OF THE L	NIN/EDSITY/COLL	FGF	DURAT
COURSES	20000	INIVERSITY/COLL	EGE	DURAT
COURSES	INST	TITUTION		
COURSES	20000	TITUTION		25.55.54.340.
COURSES	INST	TITUTION		25.55.54.340.
COURSES	INST	TITUTION		1 year
COURSES	INST	TITUTION		25.55.54.340.



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = 3.5 (out of 5)

Dean and Director
The Oxford Dental College, Bommnahalf
Hospir Road, Bengaluru - 560,068

CERTIFICATE

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> Cr. Kowsaleyer (Signature)



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10" MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: SUNANDA · IM

Address 554/A 26th Main 14ht CNOBS JP Nagan 1st Phase, Bangalore 78

Phone number: 9886157450

Designation: Staff NURSO (ANM)

Department: Peniodonfics

Specialization:(ANM) Staff NUMAL

Date of joining the institution: ぬの. ゅんねのしゅ

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time : Penmane.ルセ

Total years/ months of service in the institution: 名yzの. て かのれんふ.

Date of birth: 20.06.1973

Emailid: Imsunanda 599 @gmail.com



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ACADEMIC QUALIFICATIONS

Exams passed	University	Subjects	Year	Grade / Merit
HIGH SCHOOL	GGH3	33Lc	1988	PASS
HIGHER SECONDARY	NDRK.	PUC	1992	PA 22
BACHELOR'S DEGREE				
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES	Janatha Hospital	ANM	1994	PASS

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
Staff Nuxusi TANN)	The oxford Deutal Collège X. Hospital	2019 to At Presont



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work:
- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = G (out of 5)

Dean and Director
The Oxford Dental College, Bommhahan
Hotel Road, Bengaluru - 550 068

CERTIFICATE

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Sunanda In Sunanda.IM. (Signature)



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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: Gr. K.D. Jamuna Note: We late Patish Kumar Address # 603. Chardra Nivay 1st Main. 2nd cross Hongasandra

Phone number: 9731942298

Designation: Staff News

Specialization: General nursing & mid unfer-

Date of Joining the Institution: 12 01 2019

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 3years 6 months

Date of birth: 23 05 1977

Jamunasatich 4 @ gmail. Low



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ACADEMIC QUALIFICATIONS

Exams passed	University	Subjects	Year	Grade / Merit
HIGH SCHOOL	Karnataka Bati Educatia Koard		1992-1995	
HIGHER SECONDARY				
BACHELOR'S DEGREE	anm Pamil Nadu		1995 - 1998	
MASTER'S DEGREE				
DIPLOMA / CERTIFICATION COURSES	Basic Computu	*94	2008	

WORKING EXPERIENCE

COURSES	NAME OF THE UNIVERSITY/COLLEGE INSTITUTION	DURATION
Staff Nurse	Ramakrishno sevashrama	1998 - 2000
n	Human Musike home	2001-2004
	The optied thernital Blace	2004 - 2006
	The oxford burlal college	2009-2001
	YEL Oxford Dental college	2018 - 2021



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

- 1. Community work: Free Medical Camp, could vaculation drive
- 2. Enrichment of the campus life(hostel/sports/cultural activities): Parliage to an of
- 3. Membership in committees artine somitte ; volundery.
- 4. Participation in corporate: -
- 5. Co-curricular activities: Participation of volumber in ourcumer peoplare conducted in few Dynastment.

6. Membership in committees in the college:

Score = 4 (out of 5)

Dean and Director The Oxford Dental College, Bottomnahath Hosur Road Bengaluru - 560 068

CERTIFICATE

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(Signature



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Website: www.theoxford.edu

THE OXFORD DENTAL COLLEGE 10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

Name: LATHA S

Address #314/3, AISHA MASTID ROAD, NEAR OM SHAKTI TEMPLE, MANGAMMAN PALYA,
BOMMANAHALLI, BANGALORE SOUTH, KARNATAKA-560068

Phone number: 7406021752

Designation: ATTENDER

Department: DEPARTMENT OF ORAL AIMS MANILLOTARIAL RURGERY

Specialization: -

Date of joining the institution: 3/2/2020

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 1 years 5 mouths

Date of birth: 3/5/1982

Email id:



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			100 COM 100 CO CO CO	Grade	/ Merit
ADEMIC QUALIFIC	ATIONS	Subjects	Year		
	Heiversny	Subjects	1005		
Exams passed HIGH SCHOOL	Con-School		1995		
HIGHER SECONDARY					
BACHELOR'S DEGREE					
MASTER'S DEGREE			1		
DIPLUMA /					
COURSES WORKING EXP	NAME OF THE UN		LEGE	DURATIO	N
COURSES WORKING EXP	NAME OF THE UN	NIVERSITY/COL TUTION	LEGE	DURATIO	N
WORKING EXP	NAME OF THE UN	TUTION		DURATIO 2020 - 2021	N
WORKING EXP	NAME OF THE UN	TUTION			N
WORKING EXP	NAME OF THE UN	TUTION			N
WORKING EXP	NAME OF THE UN	TUTION			N



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EXTENSION WORK/ COMMUNITY SERVICE

please give a short account of your contribution to:

Community work:

Garbage Segregation

- Enrichment of the campus life[hostel/sports/cultural activities]:
- Membership in committees
- Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = 3.5 (out of 5)

Dean and Director
The Oxford Dental College, Bormmahalii
Hosur Road Bengaluru - 560 068

CERTIFICATE

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> S | Lodik (Signature)



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THE OXFORD DENTAL COLLEGE

10TH MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

Service in the institution:

GENERAL INFORMATION

Name:

S. Purpalatha

No: 672/1, 6th floth following 8th 10

Address

Phone number:

Pesignation:

Department:

Department:

Department:

B. Com

Specialization:

Date of joining the institution:

Date of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution:

Date of birth:

Or 197/1969

Date of birth:

Date of birth:

Or 197/1969

Date of birth:

Date of birth:

Date of birth:

Or 197/1969

Date of birth:

Date of bir



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Website: www.theoxford.edu

		1000		Mont	Grade / Merit
ACADEMIC (QUALIFIC	ATIONS	Subjects	Year	
Exams I HIGH SC	assed.	BILL			
HIGH	ER MARY	P. U.C	_		
BACHELO	DR'S	B. com	Burnet-	1992	
MASTER DEGREE			-	~	
DIPLOMA CERTIFICATION COURSES	ON	-	-		
		NCE			
WORKING	EXPERIE		VERSITY/COLLEC	GE	DURATION
WORKING	NAM	E OF THE UNI			DURATION with Assertant.
WORKING	NAM	E OF THE UNI	JTION		



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

1. Community work: dental course

- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- 6. Membership in committees in the college:

Score = (out of 5)

Dean and Director
The Oxford Dental College, Bornmanhalli
Hosur Road, Bengaluru - 560 06a

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(Signature)



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THE OXFORD DENTAL COLLEGE

10[™] MILE STONE BOMMANAHALLI, HOSUR ROAD, BANGALORE

SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL INFORMATION

SUMATHI MANICKAM

Address=+10 3od main, Mehro of Udayanagar, Barg-16

Phone number: 9535 9255 81

Designation: LAB TECH NICIAN

Department: OPAL PATH ALOGY

Specialization:

Date of joining the institution: 21 /04/ 201)

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

not made.

Total years/ months of service in the institution: 10 Years

17/07/1962 Date of birth:

Email id:



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					Grade / Merit
ADEMIC QUALIFIC	ATIONS		Ye	ar	Grade / Went
Exams passed	University	Subjects	130	U	Pan
HIGHER SECONDARY	Secondary But acation 18	vand	138	16	Para
fre	ynivarity Estreolog	1-17-5	-		
BACHELOR'S DEGREE	- F	6.177			
MASTER'S DEGREE		Mayor.			
DIPLOMA / CERTIFICATION COURSES	Medical Laborotary technologa		19		andclass
WORKING EX	NAME OF THE UN		OLLEGE		DURATION
COURSES		TUTION			1
	Oxford 1	ental ge		Faor	n 2:011



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EXTENSION WORK/ COMMUNITY SERVICE

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- 1. Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- Membership in committees
- Participation in corporate:
- 5. Co-curricular activities
- Membership in committees in the college:

Score = 3 (out of 5)

Dean and Director
The Oxford Dental College, Bommnahalli
Hosur Road, Bengaluru - 560,068

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- Community work:
- Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- 5. Co-curricular activities:
- Membership in committees in the college:

Score = 3 __(out of 5)

Dean and Director The Oxford Denial College, Borrenahath Hosul Road, Bengaluru - 580 068

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Prefessor & Head of the Department

Department of Conservative Pentistry & Endodontics The Oxford Dental College



THE OXFORD DENTAL COLLEGE

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SELF-PERFORMANCE APPRAISAL FOR NON-TEACHING STAFF

GENERAL	INFORMATION

Name:

Kanitha J.

Address

Phone number:

Designation: Nusse

Department:

789 433 50 4 2 ber: Kudlu grite 1: Nurse t: Pedodantie & Premetine Destástry.

Specialization:

Nuing

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 6 Mulestin (

Date of birth:

9/1/87

Email id:



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EXTENSION WORK/ COMMUNITY SERVICE

Please give a short account of your contribution to:

1. Community work: dentel crange.

- 2. Enrichment of the campus life(hostel/sports/cultural activities):
- 3. Membership in committees
- 4. Participation in corporate:
- Co-curricular activities:
- Membership in committees in the college:

Score = 45 (out of 5)

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(Signature)



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GENERAL INFORMATION

Name: LAKSHMI

Address :- Bornmanahalli, Vinal nagar, Bangalore - 68.

Phone number: 9071829880 .

Designation: Staff. Nurse.

Department: Deptartment of conservative & Endodontist

Specialization:

Date of joining the institution:

Nature of employment: Permanent/ Temporary/ Deputation/ Part Time

Total years/ months of service in the institution: 3 years.

Date of birth: 23 07 1989.

Email id: lakshm: tomachandra29@gmail com.



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Dr. SRIREKHA A Professor & Head of the Department Department of Conder retirn Pentistry & Endodontice The Oxford Dental College

Latylui (Signature)

The Oxford Dental College, Bommhahaile Hosur Road Bengaluru - 560 068 Dean and Director