THE WEST BENGAL UNIVERSITY OF HEALTH SCIENCES

DD – 36, Sector – 1, Salt Lake, Kolkata 700 064

**:** 2321- 3461, 2334-6602,/Ext. 224 & 225

**Fax:** 2358- 0100 Email Id of COE: controller@wbuhs.ac.in

Memo No: COE/UHS/3001 /2019 Date: 12.09.2019

To

1. The Principal, Institute of Post Graduate Ayurvedic Education & Research at SVSP

**Sub: Schedule of MD Ayurved Part I September,2019 Examination**

Sir/Madam,

 I am sending herewith the Schedule **MD Ayurved Part I September,2019 Examination** for wide circulation amongst all concerned.

 Your active co-operation in this respect is earnestly solicited.

 Yours faithfully,



 Dy. Controller of Examinations

Memo No: COE/UHS/ 3001 /1( 08 )/2019 Date : 12.09.2019

Copy forwarded for favour of information and necessary action to:

1. The Pro-Vice Chancellor, WBUHS
2. The Registrar, WBUHS
3. The Dean, Faculty of Modern Medicine, WBUHS
4. The Finance Officer, WBUHS
5. Controller of Examinations, WBUHS
6. Dr. P.B. KarMahapatra, Officer-in-Charge, Ayurved
7. Asstt Controller of Examinations, WBUHS
8. P. A. to the Vice Chancellor, WBUHS



 Deputy Controller of Examinations

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**SCHEDULE OF MD Ayurved Part I (Theory) September 2019 Examination**

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|  |
| **Subject Name** | **Date of Examination** | **Venue** | **Time** |
| Research Methodology & Statistics | 23.09.2019 |  WBUHS Campus | 12.00 noon – 3:00 p.m.  |
| Rog Nidan Evum Bikriti Vigyan | 24.09.2019 | 12.00 noon – 3:00 p.m.  |

**SCHEDULE OF MD Ayurved Part I (Practical) September 2019 EXAMINATION**

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| **Subject Name** | **Date of Examination** | **Venue** | **Time** |
| Research Methodology & Statistics | 26.09.2019 | Institute of Post Graduate Ayurvedic Education & Research at SVSP | 10:00 am onwards |
| Rog Nidan Evum Bikriti Vigyan | 27.09.2019 | 10:00 am onwards  |



 Deputy Controller of Examinations

 The WBUHS