

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Darshan Dental College, Udaipur
Address of College	RANAKPUR ROAD, VILLAGE – LOYARA, UDAIPUR – 313011 (RAJ.)
Website of College	www.darshandentalcollege.org
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Meenakshi Khandelwal
Phone No. (Office)	9414779044
Mobile No.	9414779044
Email ID	darshandentalcollege@yahoo.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. Dushyant Verma
Designation	Manager (Administration)
Phone No. (Office)	9928536618
Mobile No.	9928536618
Email ID	darshandentalcollege@yahoo.com

Bank Details	
Account Name	DARSHAN DENTAL COLLEGE & HOSPITAL
Account Type	Current
Bank	ICICI BANK
Account No.	777705858687
IFSC	ICIC0006943
Branch Name	VIDYA BHAWAN SOCIETY
Branch City	UDAIPUR
In case of Cheque/DD, Drawn in Favour of	DARSHAN DENTAL COLLEGE & HOSPITAL
Payable at	UDAIPUR

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Daswani Dental College, Kota
Address of College	IPB-19, INstitutional Area RIICO, Ranpur Kota
Website of College	www.daswanidentalcollege.com
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Guljot Singh
Phone No. (Office)	07442845080
Mobile No.	9001822638, 9829093380
Email ID	apvmskota@gmail.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. Anil Kumar
Designation	Asso. Professor
Phone No. (Office)	07442845080
Mobile No.	9829093380, 9001822638
Email ID	apvmskota@gmail.com

Bank Details	
Account Name	Daswani Dental College & Research Centre
Account Type	Current
Bank	Canara Bank
Account No.	3531201000001
IFSC	CNRB0003531
Branch Name	Ranpur
Branch City	Kota
In case of Cheque/DD, Drawn in Favour of	Daswani Dental College & Research Centre
Payable at	Kota

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Eklavya Dental College, Kotputli
Address of College	NH-8, DELHI JAIPUR HIGHWAY, KOTPUTLI-303108, DISTT. JAIPUR
Website of College	EKLAVYA.AC.IN
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	DR. SANJAY BANSAL
Phone No. (Office)	9309083012
Mobile No.	9416039480
Email ID	EKLAVYAA05@HOTMAIL.COM

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Mr. Ashok Yuadav
Designation	Office Supredentant
Phone No. (Office)	9309083012
Mobile No.	9672947157
Email ID	eklavyaa@hotmail.com

Bank Details	
Account Name	EKLAVYA DENTAL COLLEGE & HOSPITAL
Account Type	Current
Bank	AU SMALL FINANCE BANK
Account No.	2121219732169353
IFSC	AUBL0002197
Branch Name	KOTPUTLI
Branch City	KOTPUTLI
In case of Cheque/DD, Drawn in Favour of	EKLAVYA DENTAL COLLEGE & HOSPITAL
Payable at	KOTPUTLI

Recognition			
Status of DCI recognition	DCI /GOI permission letter no.	Date	Remarks
Recognized	F.N-12017/22/2003-DE	29/09/2011	

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Geetanjali Dental College, Udaipur
Address of College	GEETANJALI DENTAL AND RESEARCH INSTITUTE, NH 8, Near Eklingpura Chouraha, Manwakhera, Udaipur
Website of College	https://www.geetanjaliuniversity.com/
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Nikhil Verma
Phone No. (Office)	0294-2500000-6
Mobile No.	9116170347, 9116170347
Email ID	counselling@geetanjaliuniversity.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Deepesh Mehata
Designation	Coordinator
Phone No. (Office)	0294-2500000-6
Mobile No.	9116170347, 9116170347
Email ID	counselling@geetanjaliuniversity.com

Bank Details	
Account Name	GEETANJALI DENTAL & RESEARCH INSTITUTE
Account Type	Current
Bank	INDIAN BANK
Account No.	6200714628
IFSC	IDIB000M251
Branch Name	MANVAKHERA
Branch City	UDAIPUR
In case of Cheque/DD, Drawn in Favour of	GEETANJALI DENTAL & RESEARCH INSTITUTE
Payable at	UDAIPUR

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	V.12017/5/2019-DE	08/03/2019	100 SEATS RECOGNISED

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Jaipur Dental College, Jaipur
Address of College	VILLAGE-DHAND, JAIPUR-DELHI NATIONAL HIGH WAY NO.11-C, TEHSIL-AMER, JAIPUR-302028, ADMINISTRATIVE OFFICE:- S1-S2, P.NO. 36-37, DAKSH
Website of College	www.jdc.ac.in
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	DR. DEEPAK SHARMA
Phone No. (Office)	01426-284175
Mobile No.	9799339654, 9785400312
Email ID	jdc@mvgu.ac.in

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	D.K.SINGH
Designation	SENIOR MANAGER
Phone No. (Office)	0141-2352188
Mobile No.	9414058792, 9785400639
Email ID	dksingh1958@hotmail.com

Bank Details	
Account Name	JAIPUR DENTAL COLLEGE
Account Type	Current
Bank	HDFC
Account No.	00542000004327
IFSC	HDFC0000054
Branch Name	ASHOK MARG, C-SCHEME, JAIPUR
Branch City	JAIPUR
In case of Cheque/DD, Drawn in Favour of	JAIPUR DENTAL COLLEGE
Payable at	JAIPUR

Recognition			
Status of DCI recognition	DCI /GOI permission letter no.	Date	Remarks
Recognized	V.12017/8/2020-DE	25.11.2019	

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Maharaja Gangasingh DC, Ganganagar
Address of College	11L.N.P,HANUMANGARH ROAD,NEAR RIICO,SRI GANGANAGAR
Website of College	www.mgsdentalcollege.org
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr Devender chaudhary
Phone No. (Office)	0154-2494429
Mobile No.	9414094629, 9414453888
Email ID	mgsdc@outlook.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr Jaskirat sidhu
Designation	Administrative officer
Phone No. (Office)	0154-2494429
Mobile No.	9414453888
Email ID	mgsdc@outlook.com

Bank Details	
Account Name	Maharaja ganga singh dental college & Research centre
Account Type	Current
Bank	State bank of india
Account No.	61163647005
IFSC	SBIN0031591
Branch Name	JAWAHAR NAGAR
Branch City	SRI GANGANAGAR
In case of Cheque/DD, Drawn in Favour of	Maharaja ganga singh dental college & Research centre
Payable at	Sri ganganagar

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	V.12017/44/2007-DE	07/05/2015	Recognized by Dental council of India/Govt.of India

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	MG Dental College, Jaipur
Address of College	RIICO Institutional Area, Tonk Road, Sitapura, Jaipur-302022
Website of College	www.mgumst.org
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Narendra Padiyar
Phone No. (Office)	01412770326
Mobile No.	9928561339, 9928561339
Email ID	principal.dental@mgumst.org

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. R.C. Gupta
Designation	Emeritus Professor
Phone No. (Office)	01412770798/233
Mobile No.	9414451793, 9414451793
Email ID	drrcg999@gmail.com

Bank Details	
Account Name	Mahatma Gandhi University of Medical Sciences & Technology
Account Type	Current
Bank	Canara Bank
Account No.	83003050000118
IFSC	CNRB008300
Branch Name	SME Branch, MI Road, Jaipur
Branch City	Jaipur
In case of Cheque/DD, Drawn in Favour of	Mahatma Gandhi University of Medical Sciences & Technology
Payable at	Jaipur

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Permitted	Govt. of India, Ministry of Health and Family Welfare letter No. V.12017/6/2020-DE(Pt.II)	19.08.2021	Increase of seats in BDS course from 60 to 100
Recognized	Govt. of India, Ministry of Health and Family Welfare letter No. V.12017/15/2003-DE(Pt)	17.05.2016	Recognition of 60 seats

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	NIMS Dental College, Jaipur
Address of College	Jaipur Delhi Highway, NH- 11C, Jaipur - 303121 (Rajasthan)
Website of College	www.nimsuniversity.org
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Mridula Trehan
Phone No. (Office)	9829008289
Mobile No.	9829008289, 9982683023
Email ID	mridula.jaipur@gmail.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. Sunil Sharma
Designation	Pro-President
Phone No. (Office)	9982683023
Mobile No.	9829278382, 9116010407
Email ID	provcnimsuniversity@gmail.com

Bank Details	
Account Name	NIMS UNIVERSITY RAJASTHAN
Account Type	Current
Bank	ICICI Bank
Account No.	375205000016
IFSC	ICIC0003752
Branch Name	NIMS Achrol
Branch City	Jaipur
In case of Cheque/DD, Drawn in Favour of	NIMS UNIVERSITY RAJASTHAN
Payable at	JAIPUR RAJASTHAN

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	No. V. 12017/128/2005-DE	11-04-2011	

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Pacific Dental College & Hospital, Udaipur
Address of College	Airport Road, Debari, Udaipur, Rajasthan -313024
Website of College	www.pacificdentalcollege.com
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. A. Bhagavandas Rai
Phone No. (Office)	9672917861
Mobile No.	9828057442, 9116132834
Email ID	Pacificdental2000@yahoo.co.in & pacificdch@gmail.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Mr. Pranav Khamesra
Designation	Admin Manager
Phone No. (Office)	7665017760
Mobile No.	9116132834, 9587890069
Email ID	Pacificdental2000@yahoo.co.in & pacificdch@gmail.com

Bank Details	
Account Name	PACIFIC DENTAL COLLEGE & HOSPITAL
Account Type	Saving
Bank	Kotak Mahindra Bank
Account No.	5412741374
IFSC	KKBK0000272
Branch Name	Madhuban
Branch City	Udaipur
In case of Cheque/DD, Drawn in Favour of	PACIFIC DENTAL COLLEGE & HOSPITAL
Payable at	Udaipur

Recognition			
Status of DCI recognition	DCI /GOI permission letter no.	Date	Remarks
Recognized	GOI (Ministry of Health & Family Welfare)- Letter No. V.12017/4/2015-DE	9th Sept. 2015	

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Pacific Dental College & RC, Udaipur
Address of College	Pacific Dental College & Research Centre, Bhilo Ka Bedla, Udaipur(Raj)
Website of College	pmudental.ac.in
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Ravi Kumar C.M
Phone No. (Office)	02943920000
Mobile No.	9549892673, 9549892694
Email ID	pdrcudaipur@gmail.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Bhagwat Singh
Designation	Administrator
Phone No. (Office)	9649298767
Mobile No.	9784060886
Email ID	bhagwatsingh54@yahoo.com

Bank Details	
Account Name	Pacific Dental College & Research Centre
Account Type	Current
Bank	Central Bank of India
Account No.	3465665477
IFSC	CBIN0280454
Branch Name	Shastri Circle
Branch City	Udaipur
In case of Cheque/DD, Drawn in Favour of	Pacific Dental College & Research Centre
Payable at	Udaipur

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Rajasthan Dental College, Jaipur
Address of College	NH-8, Bagru Khurd, Ajmer Road, Jaipur-302042
Website of College	www.rdchjaipur.com
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. B.R. Adyanthaya
Phone No. (Office)	0141-2585457
Mobile No.	9343197079
Email ID	rajasthandental@yahoo.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. Neelkant Patil
Designation	Professor & HOD (O.M.R.)
Phone No. (Office)	0141-2585457
Mobile No.	9929337724, 9829011205
Email ID	rajasthandental@yahoo.com

Bank Details	
Account Name	RAJASTHAN DENTAL COLLEGE & HOSPITAL
Account Type	Saving
Bank	Punjab National Bank
Account No.	04182011014903
IFSC	PUNB0041810
Branch Name	Vidhyut Nagar, Ajmer Road, Jaipur
Branch City	Jaipur
In case of Cheque/DD, Drawn in Favour of	RAJASTHAN DENTAL COLLEGE & HOSPITAL
Payable at	Jaipur

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	V-12017/03/2002-DE	26/06/2008	Total - 100 Seats Intake

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	RR Dental College, Udaipur
Address of College	OPPOSITE UMRA RAILWAY STATION,UMARDA,UDAIPUR-313015 (RAJASTHAN)
Website of College	www.rrdentalcollege.com
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	DR. PRAMOD J.
Phone No. (Office)	9772443789
Mobile No.	8660481766, 9460078900
Email ID	prin.rrdentalcollege@rres.org.in

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	DR. G. M. KACHHAWA
Designation	ADMIN.OFFICER
Phone No. (Office)	9772443789
Mobile No.	9772443999, 9460078900
Email ID	DRGMKACHHAWA@GMAIL.COM

Bank Details	
Account Name	R R DENTAL COLLEGE & HOSPITAL
Account Type	Current
Bank	BANK OF BARODA -UDAIPUR
Account No.	01370200004475
IFSC	BARBOUDAIPU
Branch Name	UDAIPUR MAIN BRANCH
Branch City	UDAIPUR
In case of Cheque/DD, Drawn in Favour of	R R DENTAL COLLEGE & HOSPITAL
Payable at	UDAIPUR

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	No.V.12017/5/2019-DE	08-03-2019	AFFILIATED WITH GOVERNMENT UNIVERSITY OF RAJASTHAN

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	RUHS College of Dental Sciences, Jaipur
Address of College	RUHS College of Dental Sciences, Jaipur.
Website of College	education.rajasthan.gov.in
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. Anjali Kapoor
Phone No. (Office)	0141-2280333
Mobile No.	9829131624
Email ID	anjalikapoor66@yahoo.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. Akshay Bhargava
Designation	Asst. Professor
Phone No. (Office)	0141-2280333
Mobile No.	9314167851
Email ID	bhargava_akshay@rediffmail.com

Bank Details	
Account Name	Principal Govt. Dental college Jaipur
Account Type	Saving
Bank	S.B.I.
Account No.	61143861906
IFSC	SBIN0031026
Branch Name	SBI Jaipur Collectorate(31026) Branch Banipark, Distt Jaipur
Branch City	Jaipur
In case of Cheque/DD, Drawn in Favour of	Principal Govt. Dental college Jaipur
Payable at	Jaipur

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized			
Recognized			

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Surendra Dental College, Ganganagar
Address of College	H H GARDENS, POWER HOUSE ROAD, SRIGANGANAGAR
Website of College	www.sdcri.in
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr. SANDEEP KUMAR
Phone No. (Office)	0154-2440071
Mobile No.	9413385160, 9024606318
Email ID	skg@sgi.org.in

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	Dr. Rajnish Aggarwal
Designation	Professor
Phone No. (Office)	0154-2440071
Mobile No.	9414210253, 8005578855
Email ID	drrajnish.hmh@gmail.com

Bank Details	
Account Name	SURENDRA DENTAL COLLEGE & RESEARCH INSTITUE
Account Type	Current
Bank	HDFC BANK LTD
Account No.	50200030301680
IFSC	HDFC0000505
Branch Name	GOSHALA ROAD
Branch City	SRIGANGANAGAR
In case of Cheque/DD, Drawn in Favour of	SURENDRA DENTAL COLLEGE & RESEARCH INSTITUE
Payable at	SRIGANGANAGAR

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	V-12017/03/2002-DE	26-06-2008	

Name, Designation and Signature (Head of Institution)

COLLEGE INFORMATION SHEET FOR DENTAL UG ALLOTMENTS - 2021

Name of College	Vyas Dental College, Jodhpur
Address of College	Near kudi haud,pali road,jhalamand, Jodhpur
Website of College	www.vyaseducation.org
Hostel facility for students	YES

Contact Information (Principal)	
Name of Principal	Dr RAGHAVENDRA S KURDEKAR
Phone No. (Office)	02912721011
Mobile No.	8209121168, 8209121168
Email ID	principal.vdch@gmail.com

Contact Information (Nodal Officer Representing Principal)	
Name of Nodal Officer	ASHOK KUMAR BHANSALI
Designation	MANAGER
Phone No. (Office)	02912721011
Mobile No.	8619495802, 8619495802
Email ID	vdch.exam@gmail.com

Bank Details	
Account Name	Vyas dental college and hospital
Account Type	Current
Bank	Canara bank
Account No.	1088201003264
IFSC	CNRB0001088
Branch Name	Jalori gate
Branch City	jodhpur
In case of Cheque/DD, Drawn in Favour of	Vyas dental college and hospital
Payable at	jodhpur

Recognition			
Status of DCI recognition	DCI/GOI permission letter no.	Date	Remarks
Recognized	v.12017/79/2005	21-09-2010	

Name, Designation and Signature (Head of Institution)