


Monthly Teaching Schedule Web Request form (MCI Compliance) month wise
(add the contents in the Department page)

Name of Teacher : *Dr. Sanjay Singh*

Designation: *Professor*

Department: *Dermatology & Venereology IMS BHU.*

Teaching						
Under Graduate			Post Graduate			
Theory Lecture	Practical / Clinical Session	Tutorials	Seminar	Journal Club	Case Discussion/ Practical Demonstration	Any Other



 Signature of Head
Dr. Satyendra Kumar Singh
 Professor & Head
 Deptt. of Dermatology & Venereology
 IMS, BHU, Varanasi

Please send the information in the form of Hard copy, Soft Copy and also send to the email : mdean.ims@gmail.com,
 copy to : santanubosebhu@gmail.com

Monthly Teaching Schedule Web Request form (MCI Compliance) month wise
(add the contents in the Department page)

Name of Teacher : DR TULIKA RAI
 Designation: ASSISTANT PROFESSOR
 Department: DERMATOLOGY & VENEREOLOGY.

Teaching						
Under Graduate → NIL FOR NOVEMBER			Post Graduate			
Theory Lecture	Practical / Clinical Session	Tutorials	Seminar	Journal Club	Case Discussion/ Practical Demonstration	Any Other
			4		3	Group Discussion-2




Signature of Head
Dr. Satyendra Kumar Singh
 Professor & Head
 Deptt. of Dermatology & Venereology
 IMS, BHU, Varanasi

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 copy to : santanubosebhu@gmail.com

Monthly Teaching Schedule Web Request form (MCI Compliance) month wise
(add the contents in the Department page)

Name of Teacher : *Satyenbha Kumar Singh*
 Designation: *Professor*
 Department: *Dermatology & Venereology*

Teaching						
Under Graduate			Post Graduate			
Theory Lecture	Practical / Clinical Session	Tutorials	Seminar	Journal Club	Case Discussion/ Practical Demonstration	Any Other
<i>5</i>	<i>10</i>	<i>7</i>	<i>4</i>	<i>4</i>	<i>4</i>	


 Signature of Head

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 copy to : santanubosebhu@gmail.com