



## SRIMANTA SANKARADEVA UNIVERSITY OF HEALTH SCIENCES

(A State University of Govt. of Assam)

NARAKASUR HILLTOP, BHANGAGARH, GUWAHATI-781032, ASSAM

Phone: 6026177313 (O) E-mail: ssuhs\_assam@yahoo.in Website: [www.ssuhs.in](http://www.ssuhs.in)

No. SSUHS/205/2011/Pt.II/Ex/8023

Dated : 01-08-2023

From : The Deputy Controller of Examinations,  
Srimanta Sankaradeva University of Health Sciences, Assam.

To : The Principal,  
Govt. Ayurvedic College,  
Guwahati.

Sub : **M.D./M.S. (Ayurveda) Final (Supplementary) Examinations, September, 2023.**

Sir,

I am directed to inform you that the M.D./M.S. (Ayurveda) Final (Supplementary) Examinations is going to be held on **5<sup>th</sup> September, 2023.**

The last date of submission of application forms for candidates appearing in the examination is **05-08-2023** and with delay fine is **07-08-2023**. You are therefore requested to collect application forms from the eligible candidates. The eligible candidates are required to pay Examination Fee in **online mode** through the payment gateway (SBI Fee Collect) available in the University website: [www.ssuhs.in](http://www.ssuhs.in) The Candidates are also required to enclose the e-receipt challan along with the form. However, screenshots printout of the e-receipt will not be accepted.

**Fees details:**

Examination	Exam Fee	Delay Fine
M.D./M.S. (Ayurveda) Final Examination, September, 2023.	8000/-	3000/-

Further, you have been appointed as the **Officer-in-Charge** for the examinations and are requested to make necessary arrangements conduct the examinations smoothly.

**Enclosure:** Datesheet of the Examination.

Yours faithfully,

Deputy Controller of Examinations  
Srimanta Sankaradeva University of Health Sciences

No. SSUHS/205/2011/Pt.II/Ex/8024-26

Dated : 01-08-2023

Copy to.:

1. The Controller of Examinations, Srimanta Sankaradeva University of Health Sciences.
2. The F.A.O, Srimanta Sankaradeva University of Health Sciences for information & necessary action.
3. SSUHS Website.

Deputy Controller of Examinations  
Srimanta Sankaradeva University of Health Sciences



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No. SSUHS/205/2011/Pt.II/Ex/8027

Dated : 01-08-2023

## DATE SHEET OF M.D./M.S. (AYURVEDA) FINAL (SUPPLEMENTARY) EXAMINATION, SEPTEMBER, 2023

### THEORY EXAMINATION

<b>Date</b>	<b>Day</b>	<b>11 A.M. To 2 P.M.</b>
05-09-2023	Tuesday	Paper – I RACHANA SHARIR
07-09-2023	Thursday	Paper – II RACHANA SHARIR
08-09-2023	Friday	Paper – III RACHANA SHARIR
09-09-2023	Saturday	Paper – IV RACHANA SHARIR

### PRACTICAL EXAMINATION

*Time: 9 AM onwards*

<b>Date &amp; Day</b>	<b>Subject</b>
11-09-2023 (MONDAY)	RACHANA SHARIR
12-09-2023 (TUESDAY)	RACHANA SHARIR

\* Dates for Clinical & Practical Examinations may be arranged as per convenience with information to SSUHS.

**Deputy Controller of Examinations**  
Srimanta Sankaradeva University of Health Sciences  
Guwahati



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No. SSUHS/205/2011/Pt.II/Ex/8028

Dated : 01-08-2023

From : The Deputy Controller of Examinations,  
Srimanta Sankaradeva University of Health Sciences, Assam.

To : The Principal,  
Govt. Ayurvedic College,  
Guwahati.

Sub : **Recommendation of External Examiners and Internal Examiners for M.D./M.S. (Ayurveda) Final (Supplementary) Examinations, September, 2023.**

Sir,

With reference to the subject cited above, I hereby request you to forward names of Internal Examiners and External Examiners for the ensuing **M.D./M.S. (Ayurveda) Final (Supplementary) Examinations, September, 2023** to be held from **5<sup>th</sup> September, 2023**.

The Heads of the Departments of the concerned subjects are required to submit name, address, Email ID, contact number of Internal and External Examiners in the format prescribed below. You are therefore request to collect the same from respective HODs and forward to the University by Email [controller.ssuhs@gmail.com](mailto:controller.ssuhs@gmail.com) and [dycoe.ssuhs@gmail.com](mailto:dycoe.ssuhs@gmail.com) on or before **07-08-2023** positively.

**Prescribed Format:**

Subject	Name of External Examiner	Official Address of External Examiner including Email Id & Phone. No	Name of Internal Examiner	Official Address of Internal Examiner including Email Id & Phone. No.	Date of Examination

You are also requested to submit fund requirement with detailed breakup of provisional expenditure for smooth conduction of the Examination on or before 07-08-2023.

Yours faithfully,

Deputy Controller of Examinations  
Srimanta Sankaradeva University of Health Sciences  
Guwahati