



**Indian Academy of Oral Medicine and Radiology**

## **IAOMR COMPETITION -2015**

### **ESSAY COMPETITION 2015**

**1. CATEGORY I- UG STUDENTS**

**TOPIC- ROLE OF DENTAL SURGEON IN PREVENTION OF ORAL  
CANCER**

**2. CATEGORY II- PG STUDENTS-10**

**TOPIC – ROLE OF ORAL MEDICINE SPECIALIST IN PALLIATIVE  
CARE**

**3. CATEGORY III- PRACTISING DENTIST- MDS in OMR**

**TOPIC- INTEGRATION OF ORAL MEDICINE WITH MEDICINE TO  
PROMOTE OPTIMAL HEALTH**

**a. Note – participants should not be working in any college**

**4. CATEGORY IV- MDS FACULTY STAFF MEMBERS (ACADEMIC)**

**TOPIC- PROBLEMS AND CHALLENGES FOR ORAL MEDICINE  
FACULTY.**

**ALL PARTICIPANTS OF CAT- 2, 3 AND 4 SHOULD BE MEMBER OF IAOMR-  
MENTION L M NUMBER, OR ANNUAL MEMBER FOR 2015.**

**CHECK THE WEBSITE FOR THE MEMBERSHIP NUMBER AND OTHER DETAILS FOR  
ESSAY COMPETATION**

**MENTION –NAME DESIGNATION, COLLEGE – ADDRESS**

**SEND THE ESSAY IN PDF DOCUMENT TO [hgs\\_iaomr@yahoo.co.in](mailto:hgs_iaomr@yahoo.co.in)**

**MENTION THE CATEGORY OF THE ESSAY IN THE E MAIL**

**2500 WORDS MAXIMUM FOR ALL CATEGORIES**

**Last date for Entries – 10<sup>th</sup> NOV- 2015,**

**DOWNLOAD APPLICATION FROM - [www.iaomr.org](http://www.iaomr.org)**



**Indian Academy of Oral Medicine and Radiology**  
**IAOMR COMPETITION -2015**

---

**Rules for submission of Essay**

**Typed Essay in A4 size, Times New Roman**

**Font 12, words 2500, Covering letter from HOD**

**Write your name address and contact number in  
forwarding letter**

**MS WORD DOCUMENT/PDF**

**send it as attachment to**

**[hgs\\_iaomr@yahoo.co.in](mailto:hgs_iaomr@yahoo.co.in)**

---

**UG ACADEMIC AWARD - 2015**

**DOWN LOAD APPLICATION FROM WEBSITE**

**(READ IT CAREFULLY)**

**FILL IT, SIGN IT, AND SEND IT**

**BY POST ON OR BEFORE 10 NOV 2015.**

**TO HON SECRETARY.**

---



# Indian Academy of Oral Medicine and Radiology

## IAOMR COMPETITION -2015

---

### **BEST DISSERTATION AWARD-2015**

#### **SUB- ORAL MEDICINE AND RADIOLOGY**

SEND PDF FORMATT OF THE DISSERTATION

SCAN A FORWARDING LETTER FROM HOD, GUIDE AND CO-GUIDE, ALONG WITH DISSERTATION IN PDF FORMATT

SEND IT TO [hgs\\_iaomr@yahoo.co.in](mailto:hgs_iaomr@yahoo.co.in)

**ELIGIBILITY – P G STUDENTS OF 2015 MDS  
EXAMINATIONS ONLY**

**Last date 10<sup>th</sup> NOV-2015**

---

### **COMMUNITY SERVICE AWARD**

1. Individual
2. College level- by DEPT OF OMDR,  
Kindly send nomination with proof of work done  
under the banner of IAOMR

**Last date for entry - 10<sup>th</sup> November -2015**

**TO SUBMIT ESSAY, APPLICATION FOR AWARDS GO TO  
[www.iaomr.org](http://www.iaomr.org)**

---



# Indian Academy of Oral Medicine and Radiology

## IAOMR COMPETITION -2015

### **COMMUNITY SERVICE AWARD**

### **REGULATIONS**

- Categories:**
1. Individual award FOR THE YEAR 2015
  2. College level by Department of OMDR award for year 2015

**Eligibility:**

1. Individual Award – Individuals specialized in Oral Medicine and Radiology.
2. Group award – Individual Group with Minimum of 3 Oral Medicine and Radiology Specialist OR Oral Medicine & Radiology Department headed by Oral Medicine and Radiology Specialist.

**Criteria:**

The Department should have contributed to the community in the field of Oral Medicine & Radiology through Health education (like Oral Cancer, HIV, Habits, etc.), Camps at rural areas and Education / Treatment of Oral lesions and related conditions.

The above activity should have been carried out under the banner of IAOMR.

I therefore request you to kindly give due publicity, encouragement & participation and send the nominations to the Head Office – 10<sup>TH</sup> NOV 2015

Sealed envelopes containing the nomination form with a covering letter should be superscripted as “IAOMR Community Service Award 2015” and sent to:

**Dr. Shivaprasad S**  
**Hon. Gen. Secretary, IAOMR,**  
**Professor, OMDR**  
**Bapuji Dental College & Hospital,**  
**Davangere – 577004**  
**Phone: 9448053148**  
[hgs\\_iaomr@yahoo.co.in](mailto:hgs_iaomr@yahoo.co.in)



# Indian Academy of Oral Medicine and Radiology

## IAOMR COMPETITION -2015

### Format for Entry Form FOR COMMUNITY SERVICE-2015

Name of the participant: .....

I.A.O.M.R. Membership Type: Life/Associate Life/Annual

I.A.O.M.R. Membership No. .... (In case you don't have the no., please submit a self-declaration form containing receipt no./date of payment/person to whom payed )

Full Postal Residential Address: .....

of the Participant with Pin Code .....

.....  
.....

#### Participants

Telephone No's (With STD Code) (R) ..... (C).....

Email Address .....

Fax No. .... Mobile No. ....

Activities carried out: Attach separate sheet

Theme of the activity:

Proof of the activity:

1. Photographs
2. Certificates
3. Media clipping
4. And others

#### DECLARATION

I, Dr. .... hereby declare that the above mentioned activity carried out is not sponsored / part of any other activity sponsored by any association/company/group and the same has been done under the sole banner of Indian Academy of Oral Medicine & Radiology.

Signature of participant ..... Name of the participant.....

Date .....

Place .....