

**ANNEXURE – “G”****Information of Co-coordinator of Training Centre**  
**It shall be verified by the Head of the concerned Training Center,**

Sr. No.	Particular	Information to be filled
01.	Name of the Co-ordinator	: Dr. Sneha Puri
02.	Date of Birth	: 3.5.1986
03.	Address	: Plot no 224, Ramnagar, Nagpur
04.	Mob. No.	: 9158988818
05.	E-mail id	: sneha.puri@sdk-dentalcollege.edu.in
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: BDS, MDS
08.	Present Appointment	: Assoc. Professor
09.	Any other relevant information	

Date: 25/5/22.

Sign. of Co-ordinator

Sign & Stamp  
Head of the Department

Date: 25/5/22

PROFESSOR &amp; HOD

Department of Periodontology  
Swargya Dadasaheb Kalmegh Smruti  
Dental College & Hospital,  
Nagpur

Training Centre Round Seal

Sign & Stamp  
Dean/ Principal/ Director of Training Centre  
Date: 25/5/22DEAN  
Swargya Dadasaheb Kalmegh Smruti  
Dental College & Hospital  
Hingna, Dist. Nagpur.