



INDIAN BOARD OF ORAL & MAXILLOFACIAL SURGERY



(ASSOCIATION OF ORAL & MAXILLOFACIAL SURGEONS OF INDIA)

15. Payment details:

Bank	Mode of transfer	DD No./ UID	Date	Amount

16. Verified by (for official use):

Documents to be attached (photocopies only) with the application form:

1. Curriculum vitae
2. MDS or equivalent examination certificate.
3. Council Registration.
4. Copies of experience certificate from relevant authority.
5. Surgical log book – past three years, attested by the head of the department / institution
6. Documents of proof for point tally (conference certificates, publications, citationsetc).
7. Three recent color passport size photographs(one of which is to be affixed on the application).
8. Payment details: UID number / demand draft details for **Rs.10000/- (Rupees ten thousandonly)** as examination fees



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The application with the necessary documents should be mailed to the following address in both hard and soft copies.

Send Soft Copy to: examinations.iboms@gmail.com

Send Hard Copy to: **Dr. Shaji Thomas**
Secretary, IBOMS
Rose 492, New Minal Residency,
JK Road, Bhopal 462023
Madhya Pradesh India.
Telephone No. +91 9827433449

**ONLY APPLICATIONS RECEIVED BY SOFT COPY ON OR BEFORE 11:59 PM,
30th SEPTEMBER 2023 WILL BE ACCEPTED.**

Examination Coordinator, IBOMS

Secretary, IBOMS