



No. 1-2/129/MGPGIDS/Aca-2/2025-26/ 360

Date: 24 MAR 2026

NOTICE

Applications are invited from External Candidates who have passed final BDS Examination from Pondicherry University and the resident of Puducherry who wish to do **Non - stipendary internship at Mahatma Gandhi Postgraduate Institute of Dental Sciences, Puducherry against the available Vacant Seats.** Application along with the following documents may be submitted to the Dean, Mahatma Gandhi Postgraduate Institute of Dental Sciences, Puducherry within 15 days from the date of declaration of final year BDS (Regular) results. Selection shall be on the basis on marks scored in the Final year BDS University Examination

LIST OF DOCUMENTS TO BE ATTACHED

1. Statement Reason by the candidate to do internship at Mahatma Gandhi Postgraduate Institute of Dental Sciences.
2. Puducherry Residence Certificate
3. No Objection Certificate from his/her passing out college to do internship at MGPGIDS and also stating that the college was not derecognized by Dental Council of India during the course of training from admission to his/her passing out and the college is duly recognized by Dental Council of India, subject to selection at MGPGIDS.
4. No Objection Certificate from the Pondicherry University is mandatory, in case of selection.
5. Character and conduct Certificate of the student from the parent College/Institution.
6. Self Attested photocopy of mark sheets of all the BDS examination (for each part/year) passed.
7. Attempt Certificate of passing BDS (each part/year).
8. An undertaking that the student is prepared to do internship without any pay, stipend or honorarium and payment of fee ₹ 36,000/- (Rupees Thirty Six Thousand only) as Internship Fee if got selected, in the form of Demand Draft in favour of the Dean, Mahatma Gandhi Postgraduate Institute of Dental Sciences, Puducherry, payable at HDFC Bank, Puducherry.
9. A deposit in the form of DD of ₹ 10,000/- (Rupees Ten Thousand only) in favour of the Dean, Mahatma Gandhi Postgraduate Institute of Dental Sciences, Puducherry, payable at HDFC Bank, Puducherry, which is refundable only in case the selection is not done. In case of selection, it will be adjusted within the total fee of ₹ 36,000/- (Rupees Thirty Six Thousand only). It will not be refunded in any case, if the candidate does not join after his/ her selection.
10. Undertaking that he/she would maintain good conduct, discipline and decorum and work as per Internship Programme of the Institution and the authorities of Mahatma Gandhi Postgraduate Institute of Dental Sciences, Puducherry have the right to discontinue his/her internship at any time for his/her misconduct, indiscipline and unsatisfactory work.
11. One passport size photograph to be affixed on the application form.
12. Applications can be downloaded from the institute website (<https://mgpgi.py.gov.in>). Duly filled in application form together with the prescribed fee by a Crossed Demand Draft for ₹ 1000/- (non-refundable) drawn in favour of the Dean, Mahatma Gandhi Postgraduate Institute of Dental Sciences, Puducherry, payable at HDFC Bank, Puducherry should be submitted.

NOTE

1. Individual who have earlier submitted their request for internship have to apply afresh along-with the required documents as above with prescribed proforma.
2. Internship Fee of ₹ 36,000/- (Rupees Thirty Six Thousand only) to be paid by the selected candidates before the start of training. The fee is non-refundable.
3. Application without requisite documents as per this notice will be summarily rejected and no extension will be granted for submission of any documents. Application fee of ₹ 1000/- will also stand forfeited.
4. The Institute will not be responsible for any delay on account of postal delivery or delivery through any other agency.

S. R. Kennedy
DEAN
MGPGIDS



APPLICATION FORM FOR INTERNSHIP

(Forms to be filled in by candidate in his/her own hand writing in Block letters)

1. Name of the Applicant : _____
(IN BLOCK LETTERS)
2. Father's / Husband's name : _____
3. Address for Correspondence : _____

4. Email I.D. : _____
5. Contact No. : _____
6. Mobile No. : _____
7. Date of Birth : Date _____ Month _____ Year _____
8. Name & Address of the Institute/ : _____
College/from where doing BDS _____

9. Name of University with Address : _____

10. Whether the College/Institute was derecognized during the study. (Please mark √) : Yes/No

Affix a recent passport size
photograph

11. Details of Final BDS Examination Passed

Paper No.	Subject Name	Max Marks	Marks obtained	% of marks	No. of extra attempt
I					
II					
III					
IV					
V					
VI					
VII					
VIII					
Total %					

UNDERTAKING

I, solemnly declare that the statements made by me in this form are true and correct to the best of my knowledge and belief. If at any stage, it is found that facts have been concealed or misrepresented by me, my candidature for internship may be treated as cancelled.

Place :

Signature of the Candidate: _____

Date :

Name in block letter : (_____)