



ODISHA UNIVERSITY OF HEALTH SCIENCES, BHUBANESWAR

Office: Sishu Bhawan Square, Bapuji Nagar, Bhubaneswar, Pin- 751009
Web Site: www.ouhs.ac.in E-mail: ouhs2022@gmail.com / ouhs@ouhs.ac.in Tel: 0674-2917266

FILE NO:- OUHS-EXAM-EXM-0148-2025/15156/Exam

Date 26-11-2025

NOTIFICATION

REQUISITION FOR VERIFICATION OF ADDITION OF PAPER

This is to inform all Dean & Principals of affiliated colleges offering courses of MBBS under OUHS, Bhubaneswar for the academic year 2024-25 that candidate seeking verification of additional marks obtained in the 1st Professional MBBS Examination 2024-25 may submit their applications through the Principal of their respective colleges.

The prescribed fee for verification is Rs100/- per paper, which must be deposited by the concerned candidate to the college and the college will deposit through SB Collect of OUHS. Students are required to submit their applications to their respective colleges within **seven days** from the date of issuance of this notification. The deadline for colleges to submit the consolidated applications to OUHS is **04.12.2025**.

Colleges are requested to ensure timely submission to facilitate smooth processing.

N.B – While submitting the application forms, candidates' names must be listed in serial order, corresponding to their respective registration numbers and respective papers.

By Order of Vice-Chancellor

4200526/11/25
Controller of Examination

Memo No 15157/OUHS

Dated 26-11-2025

Copy forwarded to the principals of all affiliated colleges offering the above course for 2024-25 under OUHS, Bhubaneswar for information and necessary action. They are requested to collect all application forms of the students and submit the same to this office on or before the above date.

4200526/11/25
Controller of Examination

Memo No 15158/OUHS

Dated 26-11-2025

Copy forwarded to the PS to Vice-Chancellor/ Registrar/ CoF for kind information and necessary action.

4200526/11/25
Controller of Examination