

ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು

RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU $4^{
m th}$ T Block, Jayanagar, Bengaluru – $560\,041$

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Ref: RGUHS/Pre-Exam/PG-Theory Center/01/2024-25

Date:07.06.2024

CIRCULAR

Sub: Implementation of DigiTab Examinations for PG Dental MDS Part -I Courses during June - 2024.

Rajiv Gandhi University of Health Sciences, Karnataka is the biggest health science university in the nation with more than 1400 associated colleges and over 2 lakh students enrolled.

In Order to achieve more efficiency, transparency and accurate approach in examination system, Rajiv Gandhi University of Health Sciences, Karnataka has initiated the implementation of paperless examination using DigiTabs. As the digitab examination of Allied Health & Physiotherapy PG theory examination were conducted in May 2024 to further the efficiency and implement the prosses of conducting the digitab examination digitab 2nd pilot examination for PG 1st year dental is being undertaken as discussed by the principals of Dental college on Dated:06-06-2024.

On a pilot project basis, the examinations of PG Dental MDS Part-I courses of June-2024 will be held using DigiTabs. The list of students who are eligible to appear this DigiTab examinations is already shared with the colleges.

The plan of action for conduct of aforementioned pilot project is as follows:

- 1. To complete the IRIS scanning of students by respective examination Centres to be completed by **12.06.2024**. The procedure of IRIS scanning is enclosed as Annexure 1
- 2. To conduct the first Mock examination on **14.06.2024** (11.30 a.m. to 1.30 p.m.) Compulsory for all students. (Reporting time: 11.00 a.m.).
- 3. To obtain the consent from the students in a prescribed format **14.06.2024** (Before 4.00 p.m.). Proforma of consent form is enclosed as Annexure –2. The hardcopy of the consent forms to be preserved at examination centers. Scanned copy of the same to be sent by email to registrareva@rguhs.ac.in and dentalexamrguhs@gmail.com on or before **14.06.2024** (Before 5.00 p.m.). Only students give the consent and having practiced students allowed for digitab exam.

4. To conduct the second Mock examination on **17.06.2024** (11.30 a.m. to 1.30 p.m.) – Optional (Reporting time: 11.00 a.m.).

For any queries regarding conduct of DigiTab Examination you may contact the **Helpline** – **91542 84994 or 8121008462**

The kind co-operation of the colleges is solicited.

(Dr.Riyaz Basha S) REGISTRAR(EVALUATION)

To,

1. The Chief Superintendents of Examination Centres of PG Dental (MDS Part -I) of RGUHS

Copy to:

- 1. PA to VC/Registrar/Registrar (Evaluation)/Finance Officer, RGUHS.
- 2. The Officers & Officials of Pre-& Post Examination Section.
- 3. Office Copy.

DECLARATION /UNDERTAKING FROM THE STUDENT FOR ONSENT TO WRITE THE UNIVERSITY EXAMINATION ON THE ELECTRONIC DEVICE (TAB)

| I, |)/o/W/o | ,student of |
|--|-------------------|---|
| Course/program, | bearing the | University Register |
| No, belonging to the | College | , affiliated to R.G.U.H.S, |
| with permanent address, | | *************************************** |
| | | |
| | | |
| | | |
| | *********** | |
| Mobile No:, do h | nereby undertak | e on this the(Day) , |
| of (Month) (Year), as under: - | | |
| I understand that as per the University regulation | ıs, I am eligible | to write the Examination, |
| which is scheduled from | | |
| 2. I hereby give my full consent to write my univer | rsity examinatio | n in the proposed PLES |
| format, i.e in the TAB, provided by the University. | | |
| 3. I hereby declare that, | | |
| I have been given enough time and opport | - | · |
| to the writing on the electronic device, before | _ | _ |
| 2. I am accustomed to writing on the electrons | | I am willing to write my |
| university examination in the electronic de | | |
| I am giving this consent voluntarily with university. | out any force i | by Institutions or by the |
| I or my legal guardian, will not be question | ning the mode o | f conducting examination |
| through PLES (TAB), after my results are | | |
| 5. I hereby declare that the entries made above by me are complete and true to the | | |
| best of my knowledge, belief, and information | tion. | |
| Signature of the Student: | Signature of t | he Head of the Institution |
| Signature of the Student. | Signature or t | · |
| Register Number: | Name of the I | nstitution |
| Mobile Number of the student: | E-mail ID of the | ne Institution |
| Course Name: | Name of the | course |
| Name of the Institution: | Date & Place | : |

- Paperless examination using DigiTab is taken up by RGUHS on a pilot
 Project basis for PG-Dental MDS Part-I (Yearly Course only) Courses, June-2024
- 2. College shall log in to the examination management system and download the list of candidates.
 - a. Steep 1. Login URL http://164.100.133.129:83/RGUHS_online
 OR Https://RGUHS.karnataka.gov.in/rguhs_online
 - b. Select the menu "Report"
 - c. Step 2. Select the submenu "Data To DigiTab"
 - d. Step 3. Download the Report for iris scanning.
- 3. Share the pseudo-ID shown in the downloaded report to the DigiTab Vendor and capture the iris of the candidate pseudo-ID. However, do not share student identity with the vendor like Register number, Name of the Candidate, etc. The College shall make sure that the iris of the candidate shall be captured against the pseudo-ID only.
- 4. Share only pseudo-ID and iris file to the DigiTab Vendor.
- 5. Share the list showing College Code, College Name, Registration Number, Pseudo ID, Student Name along with compressed iris files to RGUHS(registrareva@rguhs.ac.in)