

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)




Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

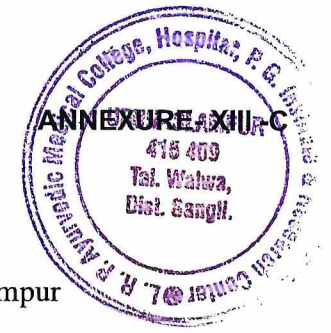
Phone/Mobile No. :

Name of the Subject : Dravyaguna Vigyan

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes /No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/ No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Prasanna Tukaram Gavali	Professor	Dravyaguna Vigyan	Regular	M.D. Dravyaguna	Approval Pending in Muhs Nashik-Ref- PSM/LRPAMC HPG /544/2023 Date-15-03-2023	11 Y 5 M	Yes	Approval Pending in Muhs Nashik-Ref- PSM/LRPAMC HPG /543/2023 Date-15-03-2023	0	25-12-1974	prasannagavali@yahoo.com	9921638074	202172931764	No	
2	Dr. Aniket Yashwant Joshi	Reader / Associate Professor	Dravyaguna Vigyan	Regular	M.D. Dravyaguna	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	1Y 4 M	Yes	Approval Pending in Muhs Nashik-Ref- PSM/LRPAMC HPG /1535/2022 Date-12-10-2022	0	01-01-1985	vdaniket@gmail.com	9890890889	677195043818	No	


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Loknete Rajarambapu Patil
Ayurvedic Medical College, Hospital,
P. G. Institute & Research Center,
Unrun-Islampur, Tal. Walwa, Dist. Sangli.



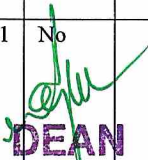
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Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

Phone/Mobile No. :

Name of the Subject : Rasashastra & Bhaishajya Kalpana

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Pramodini Sachin Patil	Professor	Rasashastra & Bhaishajya Kalpana	Regular	M.D. Rasashastra	MUHS/E-3/UG&PG/1932/2022Dt. 01.07.2022	3 Y 3 M	Yes	Approval Pending in Muhs Nashik-Ref-PSM/LRPAMH P G /578/2022-Dt.04/05/2022	2	13-06-1977	praodinichougule@gmail.com	9890231133	249613231605	No	
2	Dr. Jyotsna Murlidhar Takalikar	Professor	Rasashastra & Bhaishajya Kalpana	Regular	M.D. Rasashastra	MUHS/E-3/UG/3215/3204 Dt. 21.11.2009	13 Y 7 M	Yes	MUHS/E-3/PG/3215/215 Dt. 27.01.2011	3	16-12-1962	dr.jyotsna16@gmail.com	9422406864	551651378259	No	
3	Dr. Shital Anil Raskar	Reader / Associate Professor	Rasashastra & Bhaishajya Kalpana	Regular	M.D. Rasashastra	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	4Y 7 M	Yes	MUHS/PG/E-3/1101/2023 . Dt. 24.04.2023	5	15-12-1987	drshitalraskar@gmail.com	9975463664	511786141575	No	
4	Dr. Mrunali Ajit Patil	Reader / Associate Professor	Rasashastra & Bhaishajya Kalpana	Regular	M.D. Rasashastra & BK	MUHS/E-3/UG&PG/1933/2022Dt. 01.07.2022	2 Y2 M	Yes	MUHS/E-3/PG/122113/31/10/3280/2022 Dt. 06.09.2022	2	16-03-1988	mrunali.p16@gmail.com	9421987355	441421179637	No	


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Loknete Rajarambapu Patil
Ayurvedic Medical College, Hospital,
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Islampur, Tal. Walwa, Dist. Sangli.



**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
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Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

Phone/Mobile No. :

Name of the Subject : Rognidan avum Vikruti Vigyan

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/ No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Gouri Atmaram Mulik	Professor	Rognidan avum Vikruti Vigyan	Regular	M.D. Rognidan avum V.V.	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	11 Y 5 M	Yes	MUHS/E-3/PG/3215/2405 Dt. 20.10.2011	10	01-08-1977	mohitegouri2007@rediffmail.com	8806073556	446746954549	No	
2	Dr. Sandip Shahajirao Patil	Reader / Associate Professor	Rognidan avum Vikruti Vigyan	Regular	M.D. Kayachikitsa	Approval Pending in Muhs Nashik-Ref- PSM/LRPAMC HPG /544/2023 Date-15-03-2023	5 Y 11 M	Yes	Apprvl Pending in Muhs Nashik-Ref- PSM/LRPAMC HPG /543/2023 Date-15-03-2023	4	08-07-1983	sandipkanase87@gmail.com	9823531537	920398401853	No	
3	Dr. Abhimanyu Shivajirao Patil	Professor	Rognidan avum Vikruti Vigyan	Regular	M.D. Rognidan avum V.V.	MUHS/ UG/E-3/122113/819/2023.Date. 16.03.2023	4Y 2 M	Yes	MUHS/PG/E-3/1119/2023. Dt. 27.04.2023	2	27-05-1986	manyupatil@gmail.com	9960538603	323168598924	No	


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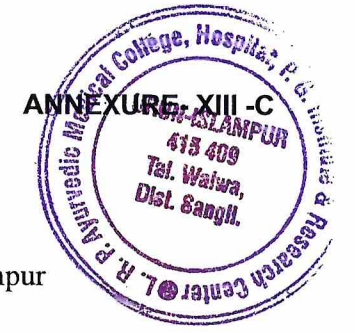
Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

Phone/Mobile No. :

Name of the Subject : Swasthavritta & Yoga

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes /No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/ No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
10	Dr. Rahul Bapusaheb Nakil	Professor	Swasthavritta & Yoga	Regular	M.D. Swasthavritta	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	7 Y 4 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	11	25-05-1972	rahul_nakil@yahoo.com	9822287051	989857681134	No	
11	Dr. Nitin Netaji Jathar	Professor	Swasthavritta & Yoga	Regular	M.D. Swasthavritta	MUHS/E-3/UG&PG/1932/2022Dt. 01.07.2022	1Y 5 M	Yes	MUHS/E-3/PG/122113/31/03/304/2022 Dt. 02.02.2022	0	05-06-1983	drnjathar@gmail.com	9765902565	846915016803	No	
12	Dr. Shweta Rahul Nakil	Reader / Associate Professor	Swasthavritta & Yoga	Regular	M.D. Swasthavritta	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	3 Y 8 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	4	16-02-1977	shwetanakil@yahoo.com	9850920891	341952970570	No	
13	Dr. Vinod Sharaappa Koravi	Reader/Associate Professor	Swasthavritta & Yoga	Regular	M.D. Swasthavritta	Approval Pending in Muhs Nashik-Ref-PSM/LRPAMC HPG /544/2023 Date-15-03-2023	8Yrs 09 months	Yes	Approval Pending in Muhs Nashik-Ref-PSM/LRPAMC HPG /544/2023 Date-15-03-2023	0	26.12.1985	Vinod4ursmile@gmail.com	9058715350	944196479170	No	 DEAN

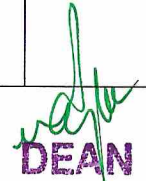
Loknete Rajarambapu Patil
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Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur
 Phone/Mobile No. :
 Name of the Subject : Agadtantra

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Shruti Dinesh Bhokare	Professor	Agadtantra	Regular	M.D. Kayachikitsa	Approval Pending in Muhs Nashik-Ref-PSM/LRPAMC HPG /544/2023 Date-15-03-2023	12 Y 3 M	Yes	MUHS/E-3/PG/3215/2890 Dt. 24.12.2010	3	16-05-1976	shrutibhokare@gmail.com	9975600891	386779826762	No	
2	Dr. Ashwini Abhinandan Patil	Reader / Associate Professor	Agadtantra	Regular	M.D. Agad Tantra	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	4 Y 2 M	Yes	MUHS/PG/E-3/1101/2023 . Dt. 24.04.2023	0	02-10-1982	drashwiniapatil@gmail.com	9822735373	655603137440	No	
3	Dr. Houserao Anandrao Patil Jadhav	Reader / Associate Professor	Agadtantra	Regular	M.D. Agad Tantra	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	2 Y 3 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	1	01-06-1987	drhouserao1376@gmail.com	7588587332	585505555344	No	


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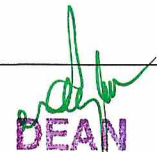


Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

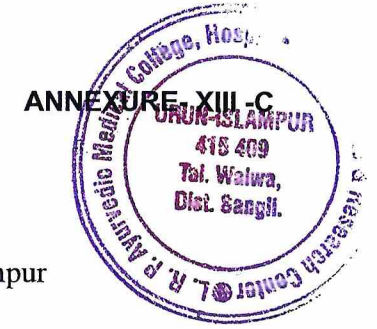
Phone/Mobile No. :

Name of the Subject : Prasuti Tantra & Strirog

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes /No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/ No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Sachin Jagannath Patil	Professor	Prasuti Tantra & Strirog	Regular	M.S. Strirog Prasuti Tantra	MUHS/E-3/UG&PG/1932 /2022Dt. 01.07.2022	10 Y 8 M	Yes	Approval Pending in Muhs Nashik-Ref- PSM/LRPAMH P G /577/2022-Dt.04/05/2022	2	13-04-1977	sachinpatil5190@gmail.com	9422407301	512981708730	No	
2	Dr. Hemalata Chandrash ekhar Kongi	Professor	Prasuti Tantra & Strirog	Regular	M.S. Strirog Prasuti Tantra	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	10 Y 4 M	Yes	MUHS/E-3/PG/3215/1831 Dt. 17.07.2012	15	22-01-1976	drkongihe@gmail.com	9225347295	752838866304	No	
3	Dr. Salim Musa Mulla	Reader / Associate Professor	Prasuti Tantra & Strirog	Regular	M.S. Strirog Prasuti Tantra	MUHS/E-3/UG&PG/1933 /2022Dt. 01.07.2022	8 Y 7 M	Yes	Approval Pending in Muhs Nashik-Ref- PSM/LRPAMH P G /577/2022-Dt.04/05/2022	5	13-10-1976	drsmmulla@hotmail.com	7588627408	502915554430	No	


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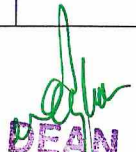
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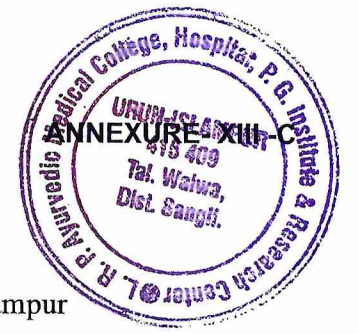
Phone/Mobile No. :

Name of the Subject : Kaumarbhritya

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Masudaalam Shabbir Mujawar	Professor	Kaumarbhritya	Regular	M.D. Kaumarbhritya	MUHS/UG/E-3/122113/819/2023. Date. 16.03.2023	5 Y 3 M	Yes	MUHS/PG/E-3/1100/2023 . Dt. 24.04.2023	15	10-06-1983	dr.masudaalam10@gmail.com	9823645588	216072539506	No	
2	Dr. Sandeep Vasanttrao Patil	Reader / Associate Professor	Kaumarbhritya	Regular	M.D. Kaumarbhritya	MUHS/E-3/UG&PG/1932/2022Dt. 01.07.2022	1 Y 10 M	Yes	MUHS/E-3/PG/122113/31 / 10/3280/2022 Dt. 06.09.2022	12	01-04-1986	sandeep.patil76.sp@gmail.com	9860970379	287282632650	No	
3	Dr. Jyotsna Jayavant Ahir	Reader / Associate Professor	Kaumarbhritya	Regular	M.D. Kaumarbhritya	MUHS/UG/E-3/122113/820/2023. Date. 16.03.2023	3 Y 4 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	9	16-03-1986	drjyotsnaahir@gmail.com	7276538181	602940488652	No	


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Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

Phone/Mobile No. :

Name of the Subject : Kayachikitsa

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Sonal Abhijeet Shah	Professor	Kayachikitsa	Regular	M.D. Kayachikitsa	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	2 Y 2 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	12	14-11-1981	drsonalshah2014@gmail.com	7972759476	660118163574	No	
2	Dr. Abhinandan Yuvaraj Patil	Professor	Kayachikitsa	Regular	M.D. Manovigyanavum Manas Roga	MUHS/E-3/UG&PG/1932/2022Dt. 01.07.2022	6 Y 7 M	Yes	MUHS/E-3/PG/122113/31/10/3280/2022 Dt. 06.09.2022	9	09-06-1981	drabhinandanpatil@gmail.com	9890205000	942683084534	No	
3	Dr. Amit Anil Chingale	Reader / Associate Professor	Kayachikitsa	Regular	M.D. Kayachikitsa	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	2 Y 3 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	4	30-10-1987	amitchingale257@gmail.com	7350420508	512302722052	No	

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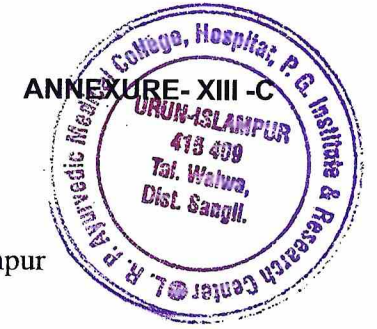
Phone/Mobile No. :

Name of the Subject : Panchkarma

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Deepak Kumar Raghav Parida	Professor	Panchkarma	Regular	M.D. Kayachikitsa	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	9 Y 8 M	Yes	MUHS/PG/E-3/1101/2023 . Dt. 24.04.2023	12	18-03-1972	dpkparida@yahoo.co.in	9730245036	224999246974	No	
2	Dr. Vinay Dadasaheb Chavan	Professor	Panchkarma	Regular	M.D. Panchakarma	MUHS/ UG/E-3/122113/819/2023.Date. 16.03.2023	6 Y 1 M	Yes	MUHS/PG/E-3/1119/2023. Dt. 27.04.2023	7	01-06-1981	purvachavan007@gmail.com	9767676779	707874270155	No	
3	Dr. Suhas Bhagwan Mohite	Reader / Associate Professor	Panchkarma	Regular	M.D. Panchakarma	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	2 Y 7 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	0	13-05-1973	mohiteshas2007@rediffmail.com	9923151158	479994808013	No	


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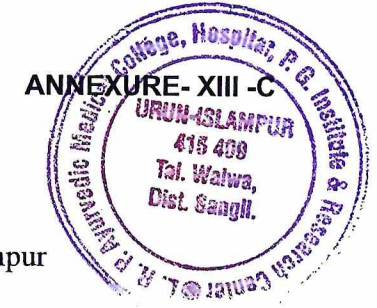
Phone/Mobile No. :

Name of the Subject : Shalya Tantra

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Veerendra Kalyanrao Meenkire	Professor	Shalya Tantra	Regular	M.S. Shalya Tantra 2004	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	10 Y 10 M	Yes	MUHS/PG/E-3/1101/2023 . Dt. 24.04.2023	9	09-12-1973	meenkire@gmail.com	9225347263	890048829869	No	
2	Dr. Prashant Dagadu Date	Professor	Shalya Tantra	Regular	M.S. Shalya Tantra 2004	MUHS/E-3/UG&PG/1932/2022Dt. 01.07.2022	7 Y 4 M	Yes	Approval Pending in Muhs Nashik-Ref-PSM/LRPAMH P G /577/2022-Dt.04/05/2022	2	08-07-1978	drdateprashan@gmail.com	9822706975	545054130702	No	
3	Dr. Amit Ramchandra Shedge	Reader / Associate Professor	Shalya Tantra	Regular	M.S. Shalya Tantra 2009	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	8 Y 5 M	Yes	MUHS/PG/E-3/957/2023 . Dt. 24.04.2023	15	21-02-1981	amit.shedge@gmail.com	8888944733	698521239459	No	


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Loknete Rajarambapu Patil
 Ayurvedic Medical College, Hospital,
 P. G. Institute & Research Center,
 Urun-Islampur, Tal. Walwa, Dist. Sangli.



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

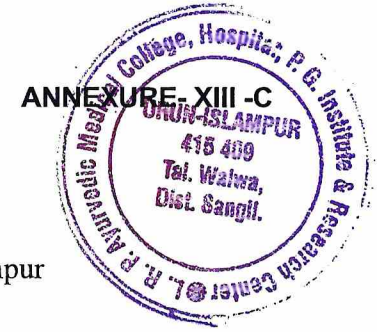
Phone/Mobile No. :

Name of the Subject : Shalakyia Tantra

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes/No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Pravin Vitthal Chavan	Professor	Shalakyia Tantra	Regular	M.S. Shalakyia Tantra	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	9 Y 1 M	Yes	MUHS/PG/E-3/1101/2023 . Dt. 24.04.2023	9	25-07-1980	drpravin999@gmail.com	9822338613	654530740163	No	
2	Dr. Neeta Ramesh Patil	Professor	Shalakyia Tantra	Regular	M.S. Shalakyia Tantra	MUHS/E-3/UG&PG/1932/2022Dt. 01.07.2022	6 Y 9 M	Yes	Approval Pending in Muhs Nashik-Ref-PSM/LRPAMH P G /577/2022-Dt.04/05/2022	9	02-06-1980	drnecapatil@rediffmail.com	9975335457	394624671637	No	
3	Dr. Sunil Sadashiv Walvekar	Reader / Associate Professor	Shalakyia Tantra	Regular	M.S. Shalakyia Netra Roga	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	2 Y 5 M	Yes	MUHS/PG/E-3/1101/2023 . Dt. 24.04.2023	12	08-06-1974	sunilwalvekar101@gmail.com	9822442719	246406402979	No	

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 Urun-Islampur, Tal. Walwa, Dist. Sangli



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : Loknete Rajarambapu Patil Ayurvedic Medical College, Hospital, Post Graduate Institute & Research Center, Islampur

Phone/Mobile No. :

Name of the Subject : Research Methodology and Medical Statistics

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular / Temp. / Honorary)	Qualification	University Approval at (UG)	PG Teaching Experience (in Years) (after PG)	PG Teacher Recognition (Yes /No)	Recognition Letter No. & date issued by the University	No. of PG Students guided in last 5 year	Date of birth	E-mail ID	Mobile No.	Aadhar Card No.	Debarred (Yes/ No) If Yes plz specify	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Ajit Vijaykumar Patil	Reader	M.D. Samhita	Regular	M.D. Samhita	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	7 Y 7 M	No	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	0	02.06.1988	ajitpatil23@gmail.com	9860756724	364137359708	No	
2	Dr. Pramod Prakash Kanap	Reader	M.D. Sharir Kriya	Regular	M.D. Sharir Kriya	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	8Y 7 M	Yes	MUHS/ UG/E-3/122113/820/2023.Date. 16.03.2023	0	05.09.1987	dr.pramodkanap@gmail.com	9970131351	500378805113	No	

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