

ANNEXURE-VIII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
UG Degree AS ON : 15/03/2023

Faculty :- Ayurveda

Whether UG ☐ /UG+PG ☐
Intake Capacity : 50

College Code :- 3311

Name OF College :- KDMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISGAON

S. N.	Subject	Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (if Yes, specify category)	Date of Appointment at College	Teaching Experience						Total PG Teaching Experience	Type of Appointment		University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		METW orksho p Attend ed In last 5 Years	Photograph with Signature
									UG Year		PG Year		Temp/Regular/Contractual	From		To	Temp/Regular		Letter no & Date					
									P	R	L	P								R	L			
2	SAMHITA SIDHHANT	Vd. Smita Anil Pawar	Reader	7588095268	drsmitapawar82@gmail.com	09-05-1982		01-02-2014	0	3	6			NA	Regular	YES	28-04-2022	27-04-2024	NA	NA				
3	SAMHITA SIDHHANT	Vd. Tushar Hemant Shelar	Lecturer	9665716917	drstushar@gmail.com	10-02-1988		13-07-2019	0	0	3			NA	Regular	NO	28-04-2022	27-04-2024	NA	NA	Yes			
3	SAMHITA SIDHHANT	Vd. Buwa Anagha Ajit	Lecturer	9422169815	anaghabuwa6@gmail.com	06-06-1969		28-11-2008	0	0	15			NA	Regular	YES	28-11-2008		NA	NA				

Note : 1) The College shall submit one hard copy & soft copy (in Excel Format) in pen drive to the IIC Committee



Signature of Dean / Principal
PRINCIPAL
AYURVED MEDICAL COLLEGE
CHALISGAON DIST JALGAON

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College Code : 3311

Whether UG ☐ /UG+PG ☐
Intake Capacity : 50

S. N.	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (if Yes, specify category)	Date of Appointment	Teaching Experience					Total PG Teaching	Type of Appointment	University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)	MET Workshop Attended in last 5 Year	Photograph with Signature
									UG	PG	Year	P	R	L	P	R	L	From	To	Letter no & Date	
1	RACHANA SHARIR	Vd. Nishikant Sayaji pagar	Reader	9906024495	drnspatil9@gmail.com	28-05-1982		31-12-2020	0	4	6				NA	Regular	YES	28-04-2022	27-04-2024	NA	NA
2	RACHANA SHARIR	Vd. Prassanna Bhaskar Ahire	Lecturer	7588647809	Prasannaahire22@gmail.com	22-06-1980		03-02-2018	0	0	5				NA	Regular	YES	28-04-2022	27-04-2024	NA	Yes

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Signature of Dean with Seal



PRINCIPAL
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Name OF College :- KDMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISGAON

College Coad : 3311

Whether UG /UG+PG
Intake Capacity : 50

Name of College :- KRIYA SHARIR MEDICAL COLLEGE AND HOSPITAL CHANDIGARH																				Contact No :- 99221										Mobile No :- 99221									
S. N.	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (If Yes,specify category)	Date of Appointment	Teaching Experience						Total PG Teaching Experience	Type of Appointment		University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Works hop Attend ed In last 5 Year	Photograph with Signature															
									UG Year		PG Year		Temp/Regular/Contractual	Letter no & Date		From	To		Temp/Regular	Letter no & Date																			
									P	R	L	P									R	L																	
1	KRIYA SHARIR	Vd. Kekan Aparna Narayan	Reader	8446934943	draparna.kekan@gmail.com	31-01-1988		13-01-2021	0	4	5		NA	Regular	NO	28-04-2022	27-04-2024	NA	NA																				
2	KRIYA SHARIR	Vd. Mahajan Vishal Prahlad	Lecturer	9767790055	dr.mahajanvishal@gmail.com	13-06-1988		31-01-2019	0	0	4		NA	Regular	YES	28-04-2022	27-04-2024	NA	NA																				

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College Coad : 3311

Whether UG /UG+PG
Intake Capacity : 50

Name of College :- KDMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISSAON College Code : 33111 Intake Capacity : 50																				Photograph with Signature			
S. N.	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (if Yes,specify category)	Date of Appointment	Teaching Experience					Total PG Teaching Experience	Type of Appointment		University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Workshop Attended in last 5 Year	
									UG Year		PG Year				Temp/R egular/C ontractual	From		To	Temp/Regular	Letter no.& .Date			
									P	R	L	P	R								L		
1	DRAVYA GUNA	Vd. More Nandini Manojkumar	Professor	976551552	nandini.more@gmail.com	12-08-1970		28-04-2022	4	11	5	—	—	—	NA	NA	YES	28-04-2022	27-04-2024	NA	NA	YES	
2	DRAVYA GUNA	Vd. Baviskar Rahul Dagadu	Lecturer	9403754619	dr.rahul2hands@gmail.com	25-07-1990		18-01-2021	0	0	4		NA	Regular	YES	28-04-2022	27-04-2024	NA	NA	Yes			

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College Code : 3311

Name Of College :- KDMGS A TORKVED MEDICAL COLLEGE AND HOSPITAL CHALISGAON College Code :- 2211															University Approval Status (Yes/No)		Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Works hop Attend ed in last 5 Year	Photograph with Signature	
S. N.	Subject	Full Name of teaching Staff	Designati on	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (if Yes,specify category)	Date of Appoinmen t	Teaching Experience			Total PG Teaching Experie nce	Type of Appoinme nt	University Approval Status (Yes/No)	From	To	Temp/R egular	Letter no& .Date					
									UG Year	PG Year													
									P	R	L	P	R	L									
2	Rasashastra	Vd. Rahul Ramchandra Zade	Reader	9764262770	dr.rahulzade@rediffmail.com	15-11-1986		09-12-2016	0	1	5				NA	Regular	YES	09-07-2022	08-07-2024	NA	NA	Yes	
2	Rasashastra	Vd. Mukund Kisanrao Chandile	Lecturer	7588535169	mukundc2@gmail.com	03-03-1992		28-05-2022	0	0	1				NA	Regular	NO	09-07-2022	08-07-2024	NA	NA	Yes	

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Intake Capacity : 50

College Code : 3311

Name of College :- KDMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISGAON																			College Code : 3311				Intake Capacity : 50				Photograph with Signature
S.N	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (if Yes,specify category)	Date of Appointment	Teaching Experience				Total PG Teaching Experience	Type of Appointment		University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Works hop Attend ed in last 5 Year						
									UG Year		PG Year			Temp/Regular	Reg ular/Contractual		From	To	Temp/R	Letter no & Date							
1	ROGNID AN	Vd. Jadhav Megha Gopichand	Reader	8605192523	dr.megha974@gmail.com	09-03-1990		21-01-2022	0	1	5	2	—			—					NA	Regular	YES	21-01-2022	20-01-2022	NA	NA
2	ROGNID AN	Vd. Swami Gopal Solanke	Lecturer	9766100083	swamigopaso@gmail.com	16-03-1988		28-12-2019	0	0	6	—	—	—	NA	Regular	YES	28-04-2022	27-04-2024	NA	NA						

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Name Of College :- KDMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISGAON

Name of College :- KDMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISARON College Code :- 55111																			Teaching Experience		Total PG Teaching Experience		Type of Appointment		University Approval Status (Yes/No)		Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Workshop Attended in last 5 Year	Photograph with Signature
S. N.	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (If Yes,specify category)	Date of Appointment	UG Year			PG Year			Temp/R Regular/C ontractu	Yes (No)	From	To	Temp/R regular	Letter no& .Date												
									P	R	L	P	R	L							P	R	L									
2	SWASTH AVRITTA	Vd. Shinde Lekhraj Bhaliyasahab	Reader	9421537636	lekhrishinde28@gmail.com	28-04-1987		01-10-2015	0	9	8				NA	Regular	YES	09-07-2022	08-07-2024	NA	NA											
3	ASTHAVRI	Vd. Pawar Anjali Nandkishor	Lecturer	8668284990	anjali.17pawar@gmail.com	17-01-1992		05-05-2021			1	9			NA	Regular	YES	09-07-2022	08-07-2024	NA	NA											

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Name Of College :- KUMGS AYURVED MEDICAL COLLEGE AND HOSPITAL CHALISGAON													College Code :- 5511				Intake Capacity :- 50				Signature				
S. N.	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (If Yes,specify category)	Date of Appointment	Teaching Experience						Total PG Teaching Experience	Type of Appointment	University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Workshop Attended in last 5 Year			
									UG Year		PG Year		P					R		From			To	Temp/R	Letter no & .Date
									P	R	L	P	R	L				L	L						
2	AGADTA NTRA	Vd.Bhirud Harshal Chandrakant	Reader	997573454	drhcb1985@gmail.com	21-06-1985		10-03-2023	0	0	9				NA	Regular	In Process		NA	NA					
2	AGADTA NTRA	Vd. Rohan Suresh Golahit	Lecturer	9421524844	golahirtohan1@gmail.com	20-03-1988		10-03-2023	0	0	3.5				NA	Regular	In Process		NA	NA					
3	AGADTA NTRA	Vd. Dinesh Satish Panchbhai	Lecturer	9011095357	vaideyadinshp@gmail.com	02-04-1985		29-03-2023	0	0	0.2				NA	Regular	In Process		NA	NA					

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S. N.	Subject	Full Name of teaching Staff	Designation	Mobile no	E-mail Id	Date of Birth	Whether belong to Reserved category (If Yes,specify category)	Date of Appointment	Teaching Experience					Total PG Teaching Experience	Type of Appointment		University Approval Status (Yes/No)	Temp. Approval		Details of PG Recognition by MUHS (Yes/No)		MET Workshop Attended in last 5 Year
									UG Year		PG Year		Temp/R regular/Contractual		Regular	From		To	Letter no& Date	NA	NA	
									P	R	L	P		R								
1	PRASUTI TANTRA AND STREEROG	Vd.Sachinkumar Kantiram Sanap	Reader	8087260388	drsachinsanap@gmail.com	15-07-1985		09-07-2022	0	9	5	—	—	—	NA	Regular	YES	09-07-2022	08-07-2024	NA	NA	
2	PRASUTI TANTRA AND STREEROG	Vd.Thorwat Pratibha Ramrao	Lecturer	8007999635	thorwat.pratibha52@gmail.com	24-12-1988		13-04-2022	0	0	1	—	—	—	NA	Regular	YES	09-07-2022	08-07-2024	NA	NA	

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									UG Year		PG Year		From	To				Temp/R	Letter no & .Date					
									P	R	L	P								R	L			
									P	R	L	P								R	L			
1	KAUMA RBHRITY A	Vd. Amol Kailas Patil	Reader	9421158788	amup3924991@gmail.com	29-08-1988		10-12-2021	0	1	5			5.05	Regular	YES	10-12-2021	20-12-2023	NA	NA				
2	KAUMA RBHRITY A	Vd. Kamallesh Shivajirao Patil	Lecturer	9823977999	drkamleshpatil369@gmail.com	15-09-1987		09-06-2021	0	0	5			6	Regular	YES	10-12-2021	20-12-2023	NA	NA				

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(Signature)
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CHALISGAON DIST. JALGAON

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									UG Year		PG Year		Temp/Regular/Contractual	From		To	Letter no & .Date							
									P	R	L	P							R	L				
1	KAYACHI KITSA	Vd. Pravin Ashok Mali	Professor/Principal	9922904168	drpravinmali@gmail.com	01-06-1979		10-12-2022	1	7	7		NA	Regular	Yes	10-12-2021	20-12-2023	NA	NA	YES				
2	KAYACHI KITSA	Vd.Sainath Dilip Patil	Reader	9021971207	drsaipatil87@gmail.com	21-07-1987		21-01-2022	0	1	6		NA	Regular	Yes	21-01-2022	20-01-2022	NA	NA					
3	KAYACHI KITSA	Vd. Tambhale Swapnaja Laxman	Lecturer	8975339846	dr.swapnatambhale@gmail.com	07-02-1992		30-11-2021	0	0	1		NA	Regular	Yes	10-12-2021	20-12-2023	NA	NA	Yes				

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Signature of Dept with Seal
PRINCIPAL
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									UG Year		PG Year				From	To	Temp/R	Letter no& .Date		
									P	R	L	P	R	L					Temp/Regular	
1	SHALYAT ANTRA	Dr. Anup Bimrao Gadhari	Reader	9403084768	anup_25jun@rediffmail.com	25-06-1986		01-10-2022	5	4	6	NA	In Process			NA	NA	Yes		
2	SHALYAT ANTRA	Vd. Mali Dinesh Ashok	Lecturer	8668958136	dr.malidinesh@gmail.com	29-04-1981		10-01-2018		0	5	NA	Regular	YES	28-04-2022	27-04-2024	NA	NA		

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									UG Year		PG Year		P		R	L		P	R	L	Temp/Reg ular/Cont ractual		From	To	
1	SHALAKY ATANTRA A	Vd. Shashikant Shivdas Patil	Professor	9860445142	drshashikantpatil@rediffmail.com	25-06-1975		10-03-2023	0	5	5											NA			Regular
2	SHALAKY ATANTRA A	Vd. Sonwane Kalpesh Balasaheb	Lecturer	7841054605	drkbpatilms@gmail.com	04-09-1988		10-01-2018							NA	Regular	YES	28-04-2022	27-04-2024	NA	NA				

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CHALISGAON DIST. JALGAON

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									UG Year	P	R	L	PG Year	P	R	L	From	To	Temp/R regular	Letter no & .Date	
1	PANCHAK ARMA	Vd.Sarang Dashrath Patil	Reader	9923116288	drspatil7278@gmail.com	07-02-1978		02-05-2022	0	2	6	—	—	—	—	—			NA	NA	
2	PANCHAK ARMA	Vd. Manishkumar Arunkumar kale	Lecturer	9890664122	drmanishkumar55@gmail.com	05-01-1989		01-01-2018	0	0	5	—	—	—	—	—	28-04-2022	27-04-2024	NA	NA	
3	PANCHAK ARMA	Vd. Ruchika Dilip Bafana	Lecturer	9665907778	ruchikabafana10@gmail.com	10-10-1993		01-03-2023	0	0	0.2	—	—	—	—	—			NA	NA	



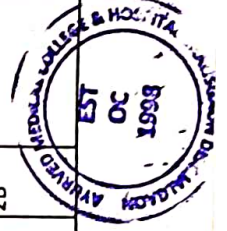
Signature of Principal with Seal
PRINCIPAL
 AYURVED MEDICAL COLLEGE
 CHALISGAON DIST. JALGAON

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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon
 Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Samhita Sidhant

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Samhita Sidhant	Dr. Smita Anil Pawar	Reader	28-04-2022	B.A.M.S. 2006	M.D. 2013	10 Year	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	8864 7558 7487	BTAP P418 4G	05-09-1982	drsmatapawar82@gmail.com	7588095268	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Samhita Sidhant	Dr. Tushar Hemant Shelar	Lecturer	13-07-2019	B.A.M.S. 2009	M.D. 2017	3 Year	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	9294 9199 2173	CYRP S034 1F	10-02-1988	drstushar@gmail.com	9665716917	No
3	KDMG's Ayurved Medical College & Hospital Chalisgaon, Dist- Jalgaon	Sanskrit	Dr. Anagha Ajit Buwa	Lecturer	28-11-2008	BAMS 1990	MA 2005	14 Year	Yes	MUHS/E-3/UG/3311/2506 DATE-07/09/2009	6815 1725 8305	AFGP B417 2B	06-06-1969	anaghabuwa6@gmail.com	9422169815	No



PRINCIPAL

AYURVED MEDICAL COLLEGE & HOSPITAL, CHALISGAON DIST JALGAON

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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Rachana Sharir

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist-	Rachana Sharir	Dr. Nishikant Sayaji Pagar	Reader	31-12-2020	B.A.M.S.2004	M.D. 2010	10 Yr	Yes	MUHS/E-3/UG/123113/1860/2022 date-28/06/2022	6384 1307 8424	ASPP P505 8E	28-05-1982	drnspari19@gmail.com	9906024495	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Rachana Sharir	Dr. Prasanna Bhaskar Ahire	Lecturer	03-02-2018	B.A.M.S. 2003	M.D. 2017	4 Yr	Yes	MUHS/E-3/UG/123113/1860/2022 date-28/06/2022	3399 5580 1241	ANSP A436 4Q	22-06-1980	prasannahire22@gmail.com	7588647809	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Kriya Sharir

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kriya Sharir	Dr. Aparna Narayan Kekan	Reader	13-01-2021	B.A.M.S. 2009	M.D. 2009	8 Yr	Yes	MUHS/E-3/UG/123113/21 44/2022 date-18/07/2022	9105 7007 5610	CDLP K005 5K	31-01-1988	draparnakeka n@gmail.com	8446934943	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kriya Sharir	Dr. Vishal Prahlad Mahajan	Lecturer	31-01-2019	B.A.M.S.2 013	M.D. 2017	4 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	4344 3789 6365	BPDP M293 4Q	13-06-1988	dr.mahaianvis hal@gmail.com	9767790055	No



(Signature)
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**AYURVED MEDICAL COLLEGE
 CHALISGAON DIST. JALGAON**

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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Dravyaguna

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Dravyaguna	Vd. More Nandini Manojkumar	Professor	28-04-2022	B.A.M.S.1 993	M.D. 1998	20	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	8843 0795 4094	AFLP M454 OF	12-08-1970	nandini.m.more@gmail.com	9765051552	NO
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Dravyaguna	Dr. Rahul Dagadu Baviskar	Lecturer	03-03-2021	B.A.M.S.2 011	M.D. 2018	3 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	7896 8824 9662	BXXP B312 2P	25-07-1990	dr.rahul22hans@gmail.com	9403754619	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Rasashastra & BK

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Rasashastra & BK	Dr. Rahul Ramchandra Zade	Reader	25-04-2022	B.A.M.S. 2011	M.D. 2016	6 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	6576 9409 3778	AAZP 2360 2J	15-11-1986	drrahulzade@rediffmail.com	9764262770	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Rasashastra & BK	Dr. Mukund Kisanrao Chandile	Lecturer	28-05-2022	B.A.M.S. 2016	M.D. 2020	3 Month	Yes	MUHS/E-3/UG/E3/3492/2022 date-30/09/2022	6511 6793 6360	BRQP C968 5K	03-03-1992	mukundc2@gmail.com	7588535169	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon
 Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Rognidan

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Rognidan	Dr. Megha Gopichand Jadhav	Reader	21-01-2022	B.A.M.S. 2011	M.D. 2016	6Yr	Yes	MUHS/E-3/UG/123113/42 3/2022 date-16/02/2022	6861 0100 1243	AYDP J6482 G	09-03-1990	dr.megha974@gmail.com	8605192523	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Rognidan	Dr. Swamy Gopal Solanke	Lecturer	28-12-2019	B.A.M.S. 2011	M.D. 2016	5 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	5384 2423 8688	DDW PS57 50K	16-03-1988	swamigoso@rediffmail.com	9766100083	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Agad Tantra avum Vidhi Vaidyaka

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Agad Tantra avum Vidhi Vaidyaka	Dr. Harshal Chandrakant Bhirud	Reader	01-01-2014	B.A.M.S. 2013	M.D. 2016	9 Yr	No	In Process	6379 4682 3731	BCW PB02 34L	21-06-1985	drhcb1985@gmail.com	9975773454	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Agad Tantra avum Vidhi Vaidyaka	Dr. Rohan Suresh Golahit	Lecturer	02-06-2019	B.A.M.S. 2013	M.D. 2018	3 Yr	No	In Process	5918 7205 5191	BEXP G266 1F	20-03-1988	golahitrohan1@gmail.com	9421524844	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Swasthavritta

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Swasthavritta	Dr. Lekharaj Bhaiyyasaheb Shinde	Reader	28-06-2021	B.A.M.S. 2012	M.D. 2015	7 Yr	Yes	MUHS/E-3/UG/123113/1860/2022 date-28/06/2022	8469 7670 3825	EISPS 2635J	28-04-1987	lekharajshinde28@gmail.com	9421537636	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Swasthavritta	Dr. Anjali Nandkishor Pawar	Lecturer	06-05-2021	B.A.M.S. 2013	M.D. 2019	1 Yr	No	MUHS/E-3/UG/E3/3492/2022 date-30/09/2022	3113 3066 6377	HBPP S939 OA	17-01-1992	anjali.17pawar@gmail.com	8087883915	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon
 Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Kaumarbhritya

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG (Passing o)	MUHS Approval (Yes/N o)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kaumarbhritya	Dr. Amol Kailas Patil	Reader	10-12-2021	B.A.M.S. 2011	M.D. 2015	5 Yr	Yes	MUHS/E- 3/UG/123113/25 0/2022 date- 31/01/2022	8226 8415 1875	CHGP P620 1D	29-08-1988	amup3924991@gmail.com	9421158788	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kaumarbhritya	Dr. Kamlesh Shivajirao Patil	Lecturer	08-06-2021	B.A.M.S. 2011	M.D. 2014	5 Yr	Yes	MUHS/E- 3/UG/123113/25 0/2022 date- 31/01/2022	4944 5240 5376	BEXP P599 4N	15-09-1987	drkamleshpatil369@gmail.com	9823977999	No



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CHALISGAON DIST- JALGAON

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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Kayachikitsa

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kayachikitsa	Dr. Pravin Ashok Mali	Professor	01-04-2020	B.A.M.S. 2000	M.D. 2006	15 Yr	Yes	MUHS/E-3/UG/123113/250/2022 date-31/01/2022	7994 8545 0051	AOJP M174 OE	01-06-1979	drpravin.mali@gmail.com	9922904168	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kayachikitsa	Dr. Sainath Dilip Patil	Reader	21-01-2022	B.A.M.S. 2010	M.D. 2014	7 Yr	Yes	MUHS/E-3/UG/123113/423/2022 date-16/02/2022	6795 6879 2872	BJDP P353 OP	21-07-1987	drsaikat187@gmail.com	9021971207	No
3	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Kayachikitsa	Dr. Swapnaja Laxman Tambhale	Lecturer	01-12-2021	B.A.M.S. 2014	M.D. 2021	1.4Yr	Yes	MUHS/E-3/UG/123113/250/2022 date-31/01/2022	6395 3097 0105	BNVP TS18 7Q	07-02-1992	dr.swapnatambhale@gmail.com	8975339846	No



AYURVED MEDICAL COLLEGE & HOSPITAL
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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon
 Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Panchakarma

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Panchakarma	Dr. Sarang Dashrat Patil	Reader	02-05-2022	B.A.M.S 1999	M.D. 2005	8 Yr	No	In Process	4950 1161 1457	ARIPP 3315 L	07-02-1978	drspatil7278@gmail.com	9923116288	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Panchakarma	Dr. Manishkumar Arunkumar Kale	Lecturer	28-05-2022	B.A.M.S 2011	M.D. 2016	4 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	5373 1845 5920	DKTP KS49 4Q	05-01-1989	drmanishkumar55@gmail.com	9890664122	No



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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon, Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Shalyatantra

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Shalyatantra	Dr. Anup Bimrao Gadhari	Reader	01-10-2022	B.A.M.S 2009	M.S. 2015	5.10 Yr	No	In Process	3594 3971 7874	AUVP G613 1H	25-06-1986	anup_25jun@rediffmail.com	9403084768	NO
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Shalyatantra	Dr. Dinesh Ashok Mali	Lecturer	10-01-2018	B.A.M.S. 2003	M.s. 2016	4 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	7662 7543 7695	BCHP M307 3R	29-04-1981	dr.malidinesh@gmail.com	9922504168	No



PRINCIPAL
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CHALISGAON DIST JALGAON

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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Shalakyatantra

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	Date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Shalakyatantra	Vd. Shashikant Shivdas Patil	Professor	10-03-2023	B.A.M.S 2011	M.D. 2016	10	In Process	In Process	2052 7421 3768	APKP P786 4G	25-06-1975	drshashikantpatil@rediffmail.com	9860445142	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Shalakyatantra	Dr. Kalpesh Balasaheb Sonawane	Lecturer	01-03-2022	B.A.M.S 2010	M.S. 2017	4 Yr	Yes	MUHS/E-3/UG/123113/1860/2022 date-28/06/2022	6465 7812 6931	CMU PS55 50R	04-09-1988	drkppatilms@gmail.com	7841054605	No



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CHALISGAON DIST- JALGAON

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

Name of the College : KDMGs Ayurved Medical College & Hospital, Chalisgaon. Dist- Jalgaon

Phone/Mobile No. :-9881461111,9766886789

Name of the Subject : Prasutitantra & Streerog

Sr. No.	College Name	Subject	Full name of the Teacher (First/ Middle/ Last)	Designation	date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in year)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Prasutitantra & Streerog	Dr. Sachinkumar Kantiram Sanap	Lecturer	07-11-2016	BAMS 2008	MD 2015	5 Yr	Yes	MUHS/E-3/UG/123113/18 60/2022 date-28/06/2022	5254 9359 9446	DBKP S107 3M	15-07-1985	drsachin.sanap15@gmail.com	8087260388	No
2	KDMGs Ayurved Medical College & Hospital Chalisgaon Dist- Jalgaon	Prasutitantra & Streerog	Dr. Pratibha Ramrao Thorwat	Lecturer	13-04-2022	BAMS 2011	MS 2017	4 Month	NO	MUHS/E-3/UG/E3/3492/2 022 date-30/09/2022	5924 0926 7373	ANCP T535 4R	24-12-1988	thorwat.pratibha552@gmail.com	9130010099	No



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