

YEAR 2024 - 2025

Faculty: Ayurveda

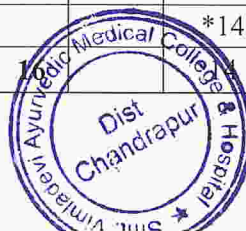
Name of College: Smt. Vimladevi Ayurvedic Medical College & Hospital
Wandhari, Chandrapur

College Code: 3516

(i) Teaching Staff:

Sr. No.	Type of Post		Principal (01)								
	Principal		Professor			Reader			Lecturer		
Sr. No.	Name Of Department	Intake	CCIM	Exist	Deficit	CCIM	Exist	Deficit	CCIM	Exist	Deficit
1	Samhita & Siddhanta , Sanskrit (#)	Up to 60	*1			*1			1+1#		
		Upto 61 to 100	1	1+1#		1		1	1	2+1#	
		Additional for PG	*1			*1			1		
2	Rachana Sharir	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
3	Kriya Sharir	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
4	Dravyaguna	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
5	Rasashastra evam B.K.	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
6	Roga Nidan evam V.V.	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
7	Swasthavritta	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
8	Agad Tantra evam V.V.	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
9	Prasuti evam Striroga	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		2	2	
		Additional for PG	*1			*1			1		
10	Kaumarbhritya (Balaroga)	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
11	Kayachikitsa	Up to 60	1			1			1		
		Upto 61 to 100	1	1+1#		1	1		2	1	
		Additional for PG	*1			*1			1		
12	Shalya Tantra	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
13	Shalakya Tantra	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
14	Panchakarma	Up to 60	*1			*1			1		
		Upto 61 to 100	1	1		1	1		1	1	
		Additional for PG	*1			*1			1		
	TOTAL: 30	Up to 60	*14			*14			16		
	TOTAL: 45	Upto 61 to 100	14			13	01		17	17	

For PG departments Professor Post is compulsory Date:







Principal
Smt. Vimladevi Ayurvedic Medical

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024


Subject: Samhita Siddhant
 Whether UG ___/ UG+PG ___
 Intake Capacity UG : 100

Subject : Samhita Siddhant
 College Code : 3516

Whether UG ___/ UG+PG ___
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./ Regular/ Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/ No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG years			PG Years						From	To	Temp./ Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Samhita Siddhant	Dr. Raju Rameshwar Tatewar AYSS00148	Professor & Principal	9822203487	dr.rajutatewar@gmail.com	05-03-1968	NT-B	22-01-2019	3 Year 3 Months	4 Years 3 Month	11 Years 1 Months				Regular	Yes	03-06-2023 13-05-2023	02-06-2024 12-05-2025				 Dr. Raju Rameshwar Tatewar	
2	Samhita Siddhant	Dr. Amolshah Murari Madavi AYSS00712	Professor	7588773289	amolshaha.madavi@gmail.com	13-06-1981	ST	09-04-2021	11 Months	5 Years 10 Months	5 Years 2 Months				Regular	Yes	03-06-2023	02-06-2025				 Dr. Amolshah Murari Madavi	
3	Samhita Siddhant	Mrs. Pranita Prashant Bhakare AYSN00365	Lecturer Sanskrit	9823242949	pranitabhakare123@gmail.com	19-12-1976	Open	01-08-2012			11 Years 6 Months				Regular	Yes						 Mrs. Pranita Prashant Bhakare	
4	Samhita Siddhant	Dr. Anant Nanaji Khiratkar AYSS01338	Lecturer	7709717346	anant0995@gmail.com	26-09-1988	OBC	22-02-2020			4 Years				Regular	Yes	13-05-2023	12-05-2025				 Dr. Anant Nanaji Khiratkar	
5	Samhita Siddhant	Apurva Ganpat Gedam AYSS01679	Lecturer	9767702036	apurva22gedam@gmail.com	22-05-1989	ST	01-06-2022			1 Year 8 Months				Regular	Yes	13-05-2023	12-05-2024				 Apurva Ganpat Gedam	




 Signature of Dean / Principal
Principal




Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Rachana Sharir
 College Code : 3516

Whether UG ___/___ / UG+PG ___/___
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Rachana Sharir	Dr. Vaishali Tarachand Kurve (Ganvir) AYRS00483	Professor	9960186128	vaishalikurve44@gmail.com	18-11-1969	SC	18-12-2021	4 Years 4 Months	9 Months	10 Years 2 Months				-----	Regular	Yes	03-06-2023	02-06-2025	-----	-----		 DVK
2	Rachana Sharir	Dr. Vineet Vijay Bharne AYRS00101	Reader	9422835148	vineet.bharne@gmail.com	06-06-1985	SC	08-09-2014	-----	9 Months	7 Years 7 Months				-----	Regular	Yes	03-06-2023	02-06-2025	-----	-----		 VJB
3	Rachana Sharir	Dr. Rameshwari Vijay Yelme AYRS01091	Lecturer	9359224205	drameshwari26@gmail.com	26-07-1982	ST	15-03-2022	-----	-----	2 Year 3 Months				-----	Regular	Yes	03-06-2023	02-06-2025	-----	-----		 R.V. Yelme







 Signature of Dean / Principal
Principal
 Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

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 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda

Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Kriya Sharir
College Code : 3516Whether UG ___/___ / UG+PG ___
Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/ No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Kriya Sharir	Dr. Ashish Satyanarayan Agrawal AYKS00200	Professor	9822694541	ashishagrwal7577@gmail.com	05-06-1976	Open	02-06-2018	3 Years 11 Months	5 Years 2 Months	10 Years 5 Months				Regular	Yes						 Approved	
2	Kriya Sharir	Dr. Prashant Dhanraj Chandekar AYKS00063	Reader	8600134307	waytoprashant.pc1@gmail.com	16-08-1983	ST	29-12-2014		3 Years 11 Months	5 Years 2 Months				Regular	Yes	13-05-2023	12-05-2025				 Prashant	
3	Kriya Sharir	Dr. Isha Niren Kathale AYKS00849	Lecturer	9921553557	ishakathale@gmail.com	11-11-1978	OBC	01-04-2021			2 Year 10 Months				Regular	Yes	10-01-2024	09-01-2025				 Isha	



(Signature)
 Signature of Dean / Principal
Principal




Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

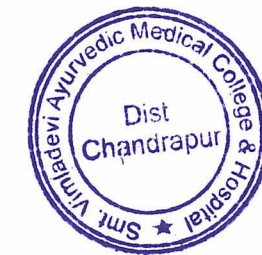
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ____/____/2024

Faculty : Ayurveda

Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Dravyaguna
College Code : 3516Whether UG _____ / UG+PG _____
Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University-Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Dravyaguna	Dr. Sandip Bhimrao Kamble AYDG00259	Professor	9422432002	ayu.sandeep@gmail.com	02-05-1982	SC	29-07-2011	10 Months	6 Years 2 Months	5 Years 6 Months				-----	Regular	Yes	03-06-2023	02-06-2025	-----	-----		 Signature
2	Dravyaguna	Dr. Vinodkumar Subhashrao Ganure AYDG00126	Reader	8208908619	drganure@gmail.com	15-04-1974	OBC	06-03-2018	-----	10 Months	5 Years 1 Months				-----	Regular	Yes	13-05-2023	12-05-2025	-----	-----		 Signature
3	Dravyaguna	Dr. Amit Ramchandra Kosurkar AYDG01724	Lecturer	7588301043	drkosurkaramit@gmail.com	29-03-1982	OBC	24-02-2023	-----	-----	11 Months				-----	Regular	Yes	13-05-2023	12-05-2025	-----	-----		 Signature






Signature of Dean / Principal
 Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

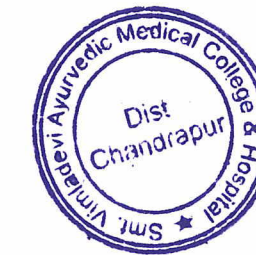
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda

Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Rasashastra
College Code : 3516Whether UG ___/ UG+PG ___
Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes /No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Rasashastra	Dr. Sonal Sanjay Zanzad AYRB01156	Professor	9422104884	sonalzanzad@gmail.com	25-06-1963	Open	01-08-2011	12 Years 6 Months	5 Years 7 Months	5 Years				-----	Regular	Yes	03-06-2023	02-06-2025	-----	-----		 S. S. Zanzad
2	Rasashastra	Dr. Gunja Kiran Dahikar AYRB00161	Reader	9850283679	drgunjadahikar@gmail.com	06-05-1983	SC	29-07-2011	-----	6 Years 11 Months	5 Years 6 Months				-----	Regular	Yes			-----	-----		 Dahikar
3	Rasashastra	Dr. Khushal Narayanrao Dahule AYRB00473	Lecturer	8087150205	dr.khushal.d28@gmail.com	28-11-1984	OBC	19-01-2016	-----	-----	9 Years				-----	Regular	Yes			-----	-----		 Dahule




Signature of Dean / Principal




Principal
 Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

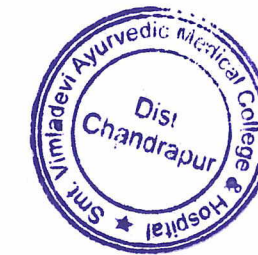
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Rognidan
 College Code : 3516

Whether UG ___/ UG+PG ___
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Rognidan	Dr. Avinash Sudhir Radke AYRN00611	Professor	7875015120	drasradke@gmail.com	10-11-1974	OBC	01-02-2022	7 Years 4 Months	6 Years	5 Years 4 Months				----	Regular	Yes	03-06-2023	02-06-2025				
2	Rognidan	Dr. Sanjay Chokhoba Kosankar AYKC00300	Reader	9823648826	drsanjaykosankar@gmail.com	16-09-1978	SC	21-07-2011	----	6 Years	6 Years 5 Months				----	Regular	Yes						
3	Rognidan	Dr. Pankaj Deorao Thawari AYRN00799	Lecturer	9403146557	pankajthawari4@gmail.com	20-08-1991	OBC	23-02-2021	----	----	2 Year 11 Months				----	Regular	Yes	13-05-2023	12-05-2025				



(Signature)
 Signature of Dean/Principal




Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

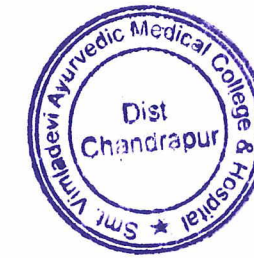
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024


Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Swasthavritta
 College Code : 3516

Whether UG ___/___/___ / UG+PG ___/___/___
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Swasthavritta	Dr. Prerana Madhav Uikey AYSV00332	Professor	9075201812	drprernadakhane08@gmail.com	23-12-1982	ST	02-04-2012	1 Years 9 Months	5 Years 7 Months	6 Years 7 Months				----	Regular	Yes	03-06-2023	02-06-2025	----	----		 Prerana
2	Swasthavritta	Dr. Jyoti Krushnarao Varthi AYSV00068	Reader	9403269154	drjyotivarthi@gmail.com	15-11-1987	ST	09-08-2017	----	10 Months	5 Year 7 Months				----	Regular	Yes	13-05-2023	12-05-2025	----	----		 Jyoti
3	Swasthavritta	Dr. Smita Pandurangrao Roge AYSV00877	Lecturer	9420869085	drsmitaroge17@gmail.com	17-07-1982	OBC	16-01-2023	----	----	1 Year					Regular	Yes	13-05-2023	12-05-2025	----	----		 Smita







 Signature of Deap / Principal
Principal
 Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Agadtantra
 College Code : 3516

Whether UG _____ / UG+PG _____
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (Fist Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/ No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Agadtantra	Dr. Daheganekar Yogesh Anand AYRB01101	Professor	9423110090 8788227043	drydaheganekar@gmail.com	01-11-1981	SC	01-04-2019	1 Month	4 Years 11 Months	6 Years 6 Months				----	Regular	Yes	10-01-2024	09-01-2026	----	----		 <i>Daheganekar</i>
2	Agadtantra	Dr. Akhilesh Ashok Deshmukh AYAT00052	Reader	9226420378 9665493969	akhilayurved@gmail.com	02-09-1983	OBC	14-12-2018	----	1 Month	5 Years				----	Regular	Yes	10-01-2024	09-01-2026	----	----		 <i>Deshmukh</i>
3	Agadtantra	Dr. Deepali Boudhadas Chandekar AYAT00729	Lecturer	9834502705	deepalichandekar50@gmail.com	12-11-1993	SC	16-12-2023	----	----	1 Month				----	Regular	Yes	10-01-2024	09-01-2026	----	----		 <i>Chandekar</i>



Deepali Chandekar
 Signature of Dean / Principal

Principal





Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

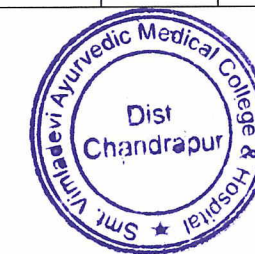
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
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Faculty : Ayurveda

Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Prasutitantra Strirog
College Code : 3516Whether UG ____ / UG+PG ____
Intake Capacity UG : 100

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									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Prasutitantra Strirog	Dr. Umesh Rameshchand Lunawat AYPS00529	Professor	7972968743	umesh.lunavat@gmail.com	29-05-1984	Open	15-03-2022	1 Year 11 Month	5 Years 11 Months	5 Years 2 Months				----	Regular	Yes	03-06-2023	02-06-2025	----	----		 <i>Umesh</i>
2	Prasutitantra Strirog	Dr. Namrata Balaji Nandankar AYPS00094	Reader	8446780687	dr.namrata@gmail.com	08-02-1987	Open	15-09-2014	----	4 Years 3 Months	5 Years 2 Months				----	Regular	Yes			----	----		 <i>Namrata</i>
3	Prasutitantra Strirog	Dr. Vaibhav Pralhad Khirodkar AYPS01268	Lecturer	7218737379	khirodkarvaibhav@gmail.com	08-05-1987	OBC	23-03-2022	----	----	1 Year 10 Months				----	Regular	Yes	03-06-2023	02-06-2025	----	----		 <i>v.p.khrodkar</i>
4	Prasutitantra Strirog	Dr. Snehal Ramesh Kale AYPS01387	Lecturer	7875413919	kalesnehal1616@gmail.com	16-07-1993	OBC	22-12-2023	----	----	1 Month				----	Regular	Yes	10-01-2024	09-01-2026	----	----		 <i>Snehal</i>



[Signature]
 Signature of Dean / Principal
Principal




Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

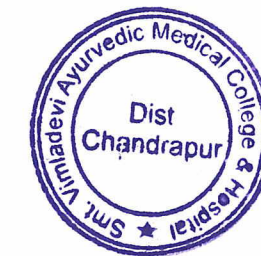
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Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Kaumarbhritya
 College Code : 3516

Whether UG ___/___/___ / UG+PG ___/___/___
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Kaumarbhritya (Balroga)	Dr. Nitin Bhairvnath Bansode AYKC01159	Professor	8600848993	nbansode879@gmail.com	20-06-1985	SC	25-09-2012	10 Months	4 Year 9 Months	5 Year 9 Months				-----	Regular	Yes	03-06-2023	02-06-2024	-----	-----		
2	Kaumarbhritya (Balroga)	Dr. Nilesh Dnyaneshwar Dhumne AYKB00056	Reader	9890832761	drnileshdhumne@gmail.com	09-07-1987	OBC	17-01-2023	-----	2 Year 6 Months	5 Year 9 Months				-----	Regular	Yes	03-06-2023	02-06-2024	-----	-----		
3	Kaumarbhritya (Balroga)	Dr. Nandeshwar Kiran Prakash AYKB00464	Lecturer	9175088387	kirannandeshwar12@gmail.com	30-07-1990	SC	18-11-2019	-----	-----	4 Year 2 Months				-----	Regular	Yes	13-05-2023	12-05-2025	-----	-----		








 Signature of Dean / Principal
Principal
 Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

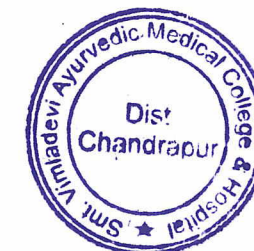
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda

Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Kayachikitsa
College Code : 3516Whether UG ___ / UG+PG ___
Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes /No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/ No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Kayachikitsa	Dr. Sanjay Rahbhau Zanzad AYKC02116	Profesor	9422104884	sanjayzanzad@gmail.com	08-05-1962	Open	01-03-2017	12 Years 5 Months	6 Years 4 Months	4 Years 3 Months				-----	Regular	Yes			-----	-----		 <i>Sanjay Zanzad</i>
2	Kayachikitsa	Dr. Mandali Vishwas Zade AYKC00455	Profesor	0604577041	mandalivzade@yahoo.com	01-07-1979	OBC	30-10-2017	5 Months	5 Years 8 Months	5 Years 2 Months				-----	Regular	Yes	13-09-2023	12-09-2025	-----	-----		 <i>N Zade</i>
3	Kayachikitsa	Dr. Sandesh Prakash Goje AYKC00234	Reader	9765934704	spgoje@gmail.com	30-03-1980	OBC	16-08-2018	-----	5 Months	5 Years				-----	Regular	Yes	13-09-2023	12-09-2025	-----	-----		 <i>Sandesh Goje</i>
4	Kayachikitsa	Dr. Suvidha Manohar Pazare AYKC03164	Lecturer	9156592069	suvipazare07@gmail.com	07-04-1990	SC	01-04-2021	-----	-----	2 Years 10 Months				-----	Regular	Yes	03-06-2023	02-06-2025	-----	-----		 SUVIDHA PAZARE <i>Suvidha Pazare</i>






S. T. Patil
 Signature of Dean / Principal
Principal
 Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024

Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Shalya Tantra
 College Code : 3516

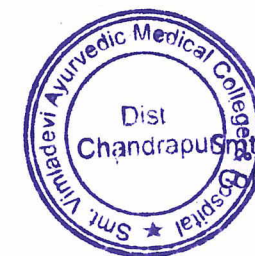
Whether UG ___ / UG+PG ___
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment to College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes /No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/ No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Shalya Tantra	Dr. Nitin Nilratan Biswas AYST00165	Professor	9975723429	dr.biswas84@gmail.com	05-09-1984	SC	06-10-2012	10 Months	4 Years 8 Months	5 Years 9 Months				-----	Regular	Yes	03-06-2023	02-06-2024	-----	-----		
2	Shalya Tantra	Dr. Pranali Sureshwar Manthanwar AYST00131	Reader	9860995348	dr.29pranalimanthanwar@gmail.com	29-08-1987	NT-B	22-12-2017	-----	10 Months	5 Year 2 Months				-----	Regular	Yes	13-05-2023	12-05-2025	-----	-----		
3	Shalya Tantra	Dr. Monika Prashant Nagpure AYST02237	Lecturer	7977492718	mesaremonika@gmail.com	09-08-1991	NT-B	02-01-2023	-----	-----	1 Year 1 Month				-----	Regular	Yes	13-05-2023	12-05-2025	-----	-----		

Nitin Biswas

Pranali Manthanwar

Monika Nagpure



Prashant
 Signature of Dean / Principal




Principal
 Smt. Vimladevi Ayurvedic Medical College & Hospital, Chandrapur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ____/____/2024

Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Shalaky Tantra
 College Code : 3516

Whether UG ____ / UG+PG ____
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Shalaky Tantra	Dr. Ajay Ghansham Bhalradhare AYSK00407	Professor	9423112623	ajaybhaladhare@gmail.com	04-10-1974	SC	01-02-2022	6 Years 3 Months	5 Years	4 Years 6 Month				----	Regular	Yes	03-06-2023	02-06-2024	----	----		 AB
2	Shalaky Tantra	Dr. Nagpure Prashant Bhaskar AYSK00064	Reader	9860211606	prashantnagpure84@gmail.com	13-06-1984	NT-B	20-12-2017	----	10 Months	5 Year 3 Months				----	Regular	Yes	13-05-2023	12-05-2025	----	----		 Prashant
3	Shalaky Tantra	Dr. Pranati Buddhadev Biswas AYSK01095	Lecturer	7387615236	pranatiswas129@gmail.com	07-06-1994	Open	16-03-2023	----	----	11 Months				----	Regular	Yes	13-05-2023	12-05-2025	----	----		 Biswas



(Signature)
 Signature of Dean / Principal
 Principal




Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur

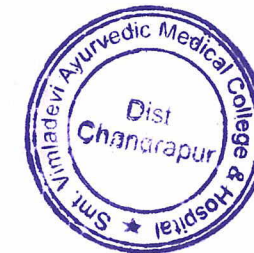
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAILS INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/ PG Degree) AS ON ___/___/2024


Faculty : Ayurveda
 Name of the College: Smt. Vimladevi Ayurvedic Medical College & Hospital Wandhari, Chandrapur

Subject : Panchakarma
 College Code : 3516

Whether UG _____ / UG+PG _____
 Intake Capacity UG : 100

Sr. No.	Subject	Full Name of the Teaching Staff (First Middle Surname)	Designation	Mobile No.	E-mail ID	Date of Birth	Whether Belongs to Reserved Category (If So Specify category)	Date of appointment at College	Teaching Experience						Total Teaching Exp. In Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Temp. Approval		Details of PG Teachers Recognition by MUHS (Yes/No)		MET Workshop Attend in last 5 Years	Photograph with Signature
									UG Years			PG Years						From	To	Temp./Regular	Letter No. & Date		
									P	R	L	P	R	L									
1	Panchakarma	Dr. Arvind Ramanuj Talaha AYPK00681	Professor	9370664848	arvindtalaha@yahoo.in	28-07-1979	OBC	16-11-2012	1 Year 10 Months	9 Years 5 Months	6 Years 7 Months				-----	Regular	Yes	03-06-2023	02-06-2024	-----	-----		 Talaha
2	Panchakarma	Dr. Pramod Maruti Gongale AYKC01995	Reader	9425070001	pgongale@gmail.com	21-07-1973	SC	01-02-2022		1 Year 11 Months	6 Years 3 Months				-----		Yes	18-05-2023	17-05-2024	-----	-----		 Gongale
3	Panchakarma	Dr. Shubhangi Sudhir Matte AYPK01205	Lecturer	9923737607	drshubhangim.sm@gmail.com	11-11-1985	OBC	01-08-2022	-----	-----	1 Year 5 Months				Regular	Yes	13-05-2023	12-05-2025	-----	-----		 Matte	




 Signature of Dean / Principal
 Principal

Smt. Vimladevi Ayurvedic Medical
 College & Hospital, Chandrapur