



ANNEXURE-VIII-A

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:- Sangam Seva Bhavi Trust's Ayurved Mahavidyalaya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Samhita Siddhanta

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Seva Bhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Samhita Siddhanta	Dr.Sawant Varun Madhavrao	Reader	14/12/2020	BAMS 2011	M.D Ayurved Samhita Siddhanta 2017	6 Yrs 11 Month	Yes	UG Approval Letter MUHS/UG/E-3/ 123107/674/2024 Date:-21/11/2024	5617XXXX XX90	DZQXX XX08J	04/04/1990 Age - 34	varunx78@gmail.com	880XXXX442	No
2		Samhita Siddhanta	Dr.Walzade Kalpita Amol	Lecturer	4/11/2024	BAMS 2010	M.D Ayurved Samhita Siddhanta 2018	5 Yrs 1 Month	In Process	In Process	2714XXXX XX48	ACNXX XX03A	24/07/1987 Age - 38	drkalpitawalzade@gmail.com	942XXXX191	No
3		Samhita Siddhanta	Mrs. Gunjal Priyanka Vilas	Lecturer	7/7/2012	B.A. Sanskrit Pune Uni. 2009	M.A Sanskrit Pune Uni 2012	12 Yrs 6 Month	Yes	UG Approval Letter MUHS/UG/E-3/ 3306/1813 Date - 10/04/2014	7507XXXX XX95	BHZXX XX51Q	28/09/1988 Age - 36	gunjalpiya@gmail.com	985XXXX381	No

Principal

Sangam Seva Bhavi Trust
Ayurved Mahavidyalaya
Sangamner-422 605



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

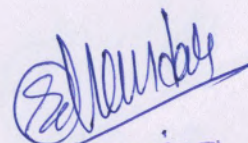
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:-Sangam Seva Bhavi Trust's Ayurved Mahavidyalya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Rachana Sharir

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Seva Bhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Rachana Sharir	Dr.Kapse Ganesh Sopanrao	Reader	8/1/2017	BAMS 2012	MD Rachana Sharir 2017	7 Yrs 5 Month	Yes	UG Approval Letter MUHS/(UG)/E3/12 3107/3027/2023 Date:- 01/11/2023	3478XXX XXX28	CYYXX XX28H	15/06/1987 Age - 37	gkapse1988@gmail.com	866XXXX976	No


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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:-Sangam Seva Bhavi Trust's Ayurved Mahavidyalya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Kriya Sharir

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Seva Bhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Kriya Sharir	Dr.Gaikwad Payal Dhananjay	Lecturer	11/3/2020	BAMS 2013	M.D Kriya Sharir 2019	5 Yrs	Yes	UG Approval Letter MUHS/(UG)/E3/123107/1672/2023 Date:-23/06/2023	4877XXX XXX32	BBVXX XX43A	13/05/1992 Age - 32	payalgaikwad.d@gmail.com	942XXXXX270	No

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Sangamner-422 605

**ANNEXURE-VIII-A****MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK****SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)****Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner****Phone/Mob.No.:- 02425-228006****Name of the Subject :- Dravyaguna**

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Dravyaguna	Dr.Pansare Vikram Maruti	Reader	24/01/2018	BAMS 1997	M.D. Dravyaguna 2017	7 Yrs	Yes	UG Approval Letter MUHS/(UG)/E3/12310 7/3027/2023 Date:- 01/11/2023	8182XX XXXX24	AJHXX XX05C	01/06/1975 Age - 49	vikramkansare 323@gmail.com	985XXXX767	No

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Sangamner-422 605



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Rasashastra & Bhaishajya Kalpana

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Rasashastra & Bhaishajya Kalpana	Dr.Walunj Manisha Balu	Reader	1/10/2016	BAMS 2008	M.D.Rasashastra Gujrat Ayurved 2013 Ph.D 2017	9 Yrs 4 Month (1 Year add. Regular Ph.D Exp.)	Yes	UG Approval Letter MUHS/UG/E-3/123107/674/2024 Date:-21/11/2024	3000XXX XXX62	ABLXXX X43L	26/07/1986 Age - 38	drmanishawalunj@gmail.com	846XXXX540	No
2	Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Rasashastra & Bhaishajya Kalpana	Dr.Shinde Rekha Bhagwat	Reader	8/10/2024	BAMS 1996	M.D. Rasashastra & B.K 2017	7 Yrs 4 Month	In Process	In Process	2671XXX XXX47	AOUXXX X27C	20/01/1964 Age - 61	drrekhabshinde@gmail.com	982XXXX424	No

(Signature)
Principal
Sangam Sevabhavi Trust
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ANNEXURE-VIII-A

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

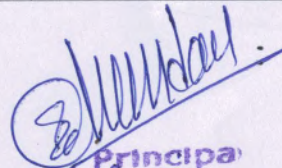
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:- Sangam Sevbhavi Trust's Ayurved Mahavidyalya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Agadtantra

Sr. No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevbhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Agadtantra	Dr. More Vidya Ramesh	Reader	23/12/2024	BAMS 2003	M.D. Rasa Shastra & Bhaishajya Kalpana 2009	14 Yrs 11 Month	In Process	In Process	3625XXX XXX67	BVWXX XX15K	27/09/1981 Age - 43	vmore99@gmail.com	887XXXX307	No


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ANNEXURE-VIII-A

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Rognidan

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Rognidan	Dr.Soman Prafull Vinayak	Professor	1/7/1995	BAMS 1990	M.D. Kayachikitsa 1995	29 Yrs 7 Month	Yes	MUHS/UG/E-3/3306/2541 Date:-10/08/2010	5669XXX XXX81	AEYXX XX50G	09/04/1967 Age - 57	somanprafull@yahoo.com	982XXXX298	No
2		Rognidan	Dr.Nagargoje Rohini Narayan	Lecturer	10/10/2023	BAMS 2009	MD. Rognidan 2014	6 Yrs 3 Month	In Process	In Process	2191XXX XXX03	ATDXX XX57H	19/06/1986 Age - 38	nagargojerohini@gmail.com	827XXXX887	No

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Sangamner-422 605



ANNEXURE-VIII-A																
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK																
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)																
Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner																
Phone/Mob.No.:- 02425-228006																
Name of the Subject :- Swasthavritta & Yoga																
Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Swasthavritta	Dr.Muneshwar Pallavi Jitendra	Reader	1/6/2006	BAMS 1999	M.D. Kayachikitsa 2004	17 Yrs 8 Month	Yes	UG Approval Letter No. MUHS/E3/UG/3306/2063/2018 Date - 21/05/2018	8803XXX XXX24	APKXXX X42P	22/12/1977 Age-47	pallavi.eml@gmail.com	997XXXX605	No
2		Swasthavritta	Dr.Murtak Shrikant Dattatray	Reader	4/10/2024	BAMS 2002	M.D. Kayachikitsa 2007	9 Yrs	In Process	In Process	8101XXX XXX73	BBEXXX X50A	15/05/1979 Age - 45	shrikant.sinna@gmail.com	820XXXX534	No

Shrikant
Principal

Sangam Sevabhavi Trust
Ayurved Mahavidyalaya
Sangamner-422 605



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner
Phone/Mob.No.:- 02425-228006

Name of the Subject :- Kayachikitsa

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	Designation	Date of Joining	UG Qualificati on & 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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Kayachikitsa	Dr.Soman Swati Prafull	Professor	1/7/1995	BAMS 1989	M.D. Kayachikitsa 1995	29 Yrs 8 Month	Yes	UG Approval Letter MUHS/UG/E-3/ 3306/3470 Date:-16/10/2008	5029XXX XXX48	AQZXX XX71K	12/01/1968 Age - 56	somanswati@ rediffmail.com	942XXXX178	No
2		Kayachikitsa	Dr. Chandak Ravin Sundarlal	Professor	23/07/2003	BAMS 1996	M.D. Kayachikitsa 2003	21 Yrs 6 Month	Yes	UG Approval Letter MUHS/UG/E3/ 123107/1671/2023 Date:-23/06/2023	5569XXX XXX40	AFCXX XX45A	16/06/1975 Age - 49	ravinchandak2000 @gmail.com	982XXXX748	No
3		Kayachikitsa	Dr.Dere Nilesh Vishwanath	Professor	18/06/2006	B.A.M.S 1998	M.D. Kayachikitsa Oct 2004	18 Yrs 7 Month	Yes	UG Approval Letter MUHS/UG/E-3/ 123107/674/2024 Date -21/11/2024	7058XXX XXX21	AKPXX XX50K	01/06/1977 Age - 47	dr.nilesh.dere@ gmail.com	927XXXX389	No
4		Kayachikitsa	Dr.Pansambal Sambhaji Ganpat	Reader	25/07/2019	BAMS 1983	M.D. Kayachikitsa 2000	16 Yrs 1 Month	Yes	UG Approval Letter MUHS/UG/E3/ 123107/1672/2023 Date:-23/06/2023	4169XXX XXX88	ABLXX XX41R	15/07/1960 Age - 64	drsambhajipansambal @gmail.com	932XXXX993	No
5		Kayachikitsa	Dr.Sagbhor Ravindra Namdev	Lecturer	9/10/2017	B.A.M.S 2010	MD Kayachikitsa 2016	8 Yrs 11 Month	Yes	UG Approval Letter MUHS/E-3/UG/ 3306/2063/2018 Date:-21/05/2018	8471XXX XXX50	CATXX XX59P	22/07/1988 Age - 38	dr.ravisagbhor @gmail.com	976XXXX204	No

Principal

Sangam Sevabhavi Trust
Ayurved Mahavidyalaya
Sangamner-422 605

**ANNEXURE-VIII-A****MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK****SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)****Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner****Phone/Mob.No.:- 02425-228006****Name of the Subject :-Prasuti Tantra & Striroga**

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Prasuti Tantra & Striroga	Dr.Shinde Amit Dattatraya	Reader	1/1/2009	BAMS 2002	M.S. Prasuti Tantra & Strirog 2007	16 Yrs 1 Month	Yes	UG Approval Letter MUHS/(UG)/E3/12310 7/3027/2023 Date:- 01/11/2023	5435XXX XXX42	BVNXXX X71M	07/04/1981 Age - 43	amitshinde112@gmail.com	988XXXXX593	No
2		Prasuti Tantra & Striroga	Dr.Moule Mangesh Chandrakant	Lecturer	2/1/2017	BAMS 2010	M.S. Prasuti & Strirog 2016	8 Yrs	Yes	UG Approval Letter MUHS/(UG)/E3/123107/1672/2023 Date:-23/06/2023	2099XXX XXX44	CEJXXX X90K	09/05/1987 Age - 37	mangeshmoule@gmail.com	758XXXXX466	No
3		Prasuti Tantra & Striroga	Dr.Naikwadi Ganesh Ashok	Lecturer	24/01/2018	BAMS 2013	M.S. Prasuti & Strirog 2017	6 Yrs 11 Month	Yes	UG Approval Letter MUHS/E-3/UG/3306/2063/2018 Date:-21/05/2018	5197XXX XXX54	AZHXX XX32B	20/02/1991 Age - 33	drganesh20291@gmail.com	992XXXXX777	No

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Sangamner-422 605



ANNEXURE-VIII-A

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :-Shalya Tantra

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist Ahmednagar	Shalya Tantra	Dr.Andhale Avinash Bhimrao	Reader	18/08/2001	B.A.M.S 1987	M.S. Shalya Tantra 1998	23 Yrs 5 Month	Yes	UG Approval Letter MUHS/(UG)/E-3/3306/5/83/2022 Date:-24/11/2022	4247XXX XXX44	ABGXX XX94E	06/11/1964 Age - 59	suvichar1@gmail.com	922XXXX444	No

Principal
Sangam Sevabhavi Trust
Ayurved Mahavidyalaya
Sangamner-422 605



ANNEXURE-VIII-A

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :-Shalakya Tantra

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	Designation	Date of Joining	UG Qualificatio n & 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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Shalakya Tantra	Dr.Jori Rekha Popatrao	Reader	8/3/2019	BAMS 2007	M.S. Shalakya Tantra 2010	14 Yrs 9 Month	Yes	UG Approval Letter MUHS/(UG)/E3/ 123107/1672/2023 Date:-23/06/2023	3169XX XXXX97	BOXXXX 5259J	19/12/1983 Age - 41	drrekhamatkar191 2@gmail.com	950XXXX787	No
2		Shalakya Tantra	Dr.Walzade Amol Krishnarao	Reader	2/12/2024	BAMS 2007	M.D.Shalakya Tantra 2016	8 Yrs	In Process	In Process	5264XX XXXX42	ABAXXX X22K	28/04/1984 Age - 40	dramolwalzade@g mail.com	982XXXX070	No
3		Shalakya Tantra	Dr.Deshmukh Nilesh Sanjay	Lecturer	9/1/2019	BAMS 2007	M.S. Shalakya Tantra 2014	6 Yrs 1 Month	Yes	UG Approval Letter MUHS/UG/E-3/ 123107/674/2024 Date -21/11/2024	8837XX XXXX80	ASJXXXX 19Q	22/06/1985 Age - 39	dr.nileshd22 @gmail.com	997XXXX756	No

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Sangamner-422 605



ANNEXURE-VIII-A

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)

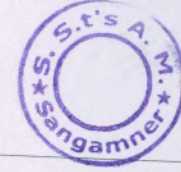
Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner

Phone/Mob.No.:- 02425-228006

Name of the Subject :- Panchakarma

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	Designation	Date of Joining	UG Qualificati on & Year of Passing	PG Qualification & Year of Passing	Teaching Experienc e After PG Passing	MUHS Approva l (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No	PAN No.	Date of Birth (Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Panchakarma	Dr.Sonawane Ravibhushan Sadashiv	Reader	5/2/2018	BAMS 2006	M.D. Panchkarma 2011	13 Yrs 6 Month	Yes	UG Approval Letter MUHS/E-3/UG/ 3306/2339/2018 Date-09/06/2018	5096XXX XXX32	CYAXX XX06R	05/09/1984 Age - 40	sparsh.ravi @gmail.com	942XXXXX196	No

Principal
Sangam Sevabhavi Trust
Ayurved Mahavidyalaya
Sangamner-422 606

**ANNEXURE-VIII-A****MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK****SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Course)**

Name of the College:- Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner
Phone/Mob.No.:- 02425-228006

Name of the Subject :- Kaumarbhritya

Sr.No	College Name	Subject	Name of Teacher (Last Name, First Name, Middle Name)	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 Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Sangam Sevabhavi Trust's Ayurved Mahavidyalaya, Sangamner, Tal- Sangamner, Dist - Ahmednagar	Kaumarbhritya	Dr.Dangat Ketan Haribhau	Reader	21/02/2014	BAMS 2007	M.D. Kayachikitsa 2012	10 Yrs 11 Month	Yes	UG Approval Letter MUHS/(UG)/E3/123107/1672/2023 Date:-23/06/2023	2709XX XXXX64	BFCXX XX85M	28/12/1985 Age - 39	vdketandangat@gmail.com	942XXXX617	No
2		Kaumarbhritya	Dr.Bombale Abhijit Bajirao	Lecturer	13/02/2019	BAMS 2013	M.D. Kayachikitsa 2018	6 Yrs	Yes	UG Approval Letter MUHS/(UG)/E3/123107/1672/2023 Date:-23/06/2023	2076XX XXXX01	BDDXX XX15M	12/05/1990 Age - 33	bombaleabhijit@gmail.com	986XXXX190	No

(Signature)

Principal

Sangam Sevabhavi Trust
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Sangamner-422 605