
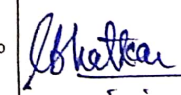


MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)


Name of the College :-Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject: Ayurved Samhita & Siddhant

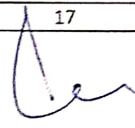
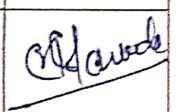
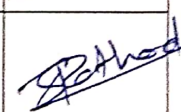
Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign.of Teahcer
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Manoj Sharad Nimbalkar	Professor	Ayurved Samhita Siddhant	Regular	BAMS MD	MUHS/E-3/UG & PG/125/01/384/2022/Dt.11/02/2022	19 Yrs	Yes	MUHS/E-3/UG & PG/125/01/384/2022/Dt.11/02/2022	6	16/06/1975	manojay16@gmail.com	9594954171	782204 845773	No	
2	Dr. Arun Uttamrao Bhatkar	Associate Professor	Ayurved Samhita Siddhant	Regular	BAMS MD	MUHS/E-3/UG/3503/5336/Dt.25/07/2016	25 Yrs	Yes	MUHS/PG/E-3/31/01/284/Dt.31/01/2017	10	19/02/1967	arunbhatkar19@gmail.com	9423681690 7387249075	447325 432828	No	
3	Dr. Ashvin Bhauroo Bagde	Assistant Professor	Samhita Siddhanta	Regular	BAMS, MD	YES	NO	YES	MUHS/E/PG/3402/312/14/DAT E 28/01/2014	NO	14-07-1979	drabbagde@gmail.com	9158955432	418186257422	NO	

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

Name of the College : -Government Ayurved College, Nagpur
Phone/Mobile No:- 0712-2749198
Name of the Subject: Rachana Sharir

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Vd. Gopal Biharilal Sharma	Professor	Rachana Sharir	Regular	BAMS, MD, Ph.D	Yes, MUHS/E.3/UG/3503/5336, Dt-25.07.2016	34 yrs	Yes	MUHS/PG/E-3/31/01/286 Dt.-21.01.2017	10	28/05/1960	dr.gopalsharma28@rediffmail.com	9422187016	770736126691	No	
2	Vd. Meena Omprakash Harode	Associate Professor	Rachana Sharir	Regular	BAMS, MD	MUHS/E.3/UG/3503/4309 Dt: 27/10/2015	31 yrs	Yes	MUHS/E-3/PG/31/14/4168 Dt.-29.11.2018	5	30/07/1959	meena.harode@gmail.com	9422807630	753326716768	No	
3	Vd. Sanjay Trimbak Rathod	Assistant Professor	Rachana Sharir	Regular	BAMS, MD	MUHS/E.3/UG/3403/3382/2018, Dt: 15/19/2018	16 Yrs	Yes	MUHS/PG/E-3/31/08/2033, Dt.-10.08.2016	10	23.03.1978	dr.rathod_sanjay@rediffmail.com	9096010578	690111977348	No	

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

Name of the College :-Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject: Kriyasharir

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debarred (Yes/No)	Sign.of Teahcer
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr.Sunil Gajananrao Topre	Professor	Kriyasharir	Regular	BAMS, MD (Kriyasharir) MA Sanskrit MA Philosophy	Yes	16	Yes	MUHS/E-3/PG/121101/31/09/127/ 2022] Dt. 18.05.2022	10	11.10.1960	sunil.topre@gmail.com	9421090999 7798436999	576808568649	No	<i>Sgtopre</i>
2	Dr. Dattatray Tukaram Kodape	Associate Professor	Kriyasharir	Regular	BAMS, MD (Kriyasharir)	Yes	8 yrs	Yes	MUHS/E-3/PG/125101/31/04/801/2022 Dt.29/03/2022	10	17.07.1978	kodattatuka@gmail.com	9881414949	361764 970472	No	
3	Dr.Kiran B. Pawar	Associate Professor	Kriyasharir	Regular	BAMS, MD (Kriyasharir)	Yes	6 yrs	Yes	MUHS/PG/E-3/3214/3152/14, Dt. 24.11.2014	3	05.06.1980	pawarkb640@gmail.com	9764259589	763487763171	No	<i>Pawar</i>
4	DR. Suwarna Deepak Vyas (Umarkar)	Assistant Professor	Kriyasharir	Regular	BAMS, MD, PhD (Kriyasharir)	Yes	6.5 yrs	Yes	MUHS/PG/E-3/31/13/2286, Dt. 09.10.2017	03	01.05.1982	dr.suwarnadvyas@gmail.com	9423404273	549157562751	No	<i>Suwarna</i>

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प्राध्यापक/विभाग पमुख
शरीरक्रिया विज्ञान विभाग
शासकीय आयुर्वेद महाविद्यालय
नागपुर ४४० ०२४



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Government Ayurved College
Nagpur

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

Name of the College : -Government Ayurved College, Nagpur
Phone/Mobile No:- 0712-2749198
Name of the Subject:

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign.of Teahcer
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Madhuri Hemant Wagh	Professor	Dravyaguna	Regular	MD Dravyaguna	Yes	35 years	Yes	MUHS/E-3/UG & PG/125101/000/2000	0	14-02-1961	dr.mhwagh@gmail.com	9422109993	768396430673	No	Mhgh
2	Sanjay Raghobaji Talmale	Associate Professor	Dravyaguna	Regular	MD Dravyaguna	Yes	21 Years	Yes	MUHS/E-3/PG/31/05/767 Date 21/12/2016	7	29-05-1965	dr.sanjaytalmale@gmail.com	9423340001	706016330001	No	R.T.
3	Dattatray Sopan Katkar	Assistant Professor	Dravyaguna	Regular	MD Dravyaguna	Yes	1 year	Yes	MUHS/E-3/PG/31/24/3379 Date 15/09/201	0	19-01-1976	dr.supriya512@gmail.com	9503892679	861122882918	No	S.P.
4	Adarsh Ashokrao Desai	Assistant Professor	Dravyaguna	Regular	MD Dravyaguna	Yes	No	No	No	0	06-06-1982	adarshdesai123@gmail.com	8149762759	920231599160	No	Adarsh

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प्राध्यापक विभाग
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नागपुर-४४१००४

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

Name of the College : -Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject:- Rasashastra & B.K.

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign Of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr.Khiyani Rajkumar Mansharam	Professor (Redesignated)	Rasashastra & B.K	Regular	B.A.M.S,M .D.Ph.d	MUHS/E-3/3503/3242/D.T.7/7/2006	24 Years & 01 Month	Yes	MUHS/PG/E-3/3503/40 Dt.4/06/07 MUHS/UDC/ Ph.D/E-3/195/2013 Dt.12/12/2013	9	29-06-1960	rajkumarkhiyani@gmail.com	9422807765	336566179852	NO	<i>Rajkumar</i>
2	Dr. Bhoyar Manish Sukhadeo	Assistant Professor	Rasashastra & B.K	Regular	B.A.M.S,M .D.	MUHS/E-3UG/3503/2809 Dt.18/06/2014	08Years & 03 Month ,14 days	Yes	MUHS/PG/E-3/3157/2014 Dt.24/11/2014	5	10-05-1980	drmanishbhoyar@gmail.com	9970379584	549202315632	NO	<i>Manish</i>

Rajkumar
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रसशास्त्र विभाग
राजकीय आयुर्वेद महाविद्यालय
नागपुर-४४०००४

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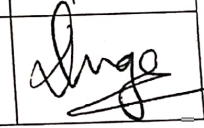
Rajkumar

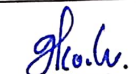
Manish

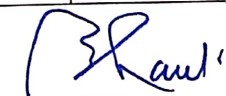
Nagpur.

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

Name of the College :- Government Ayurved Collage Nagpur
Phone/Mobile No:- 0712-2749198
Name of the Subject:Rognidan VV

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/)	Qualification	University Approval (UG)	PG Teaching Experience	PG Teacher Recog	(Recognition Letter Date issued by University)	No.of PG Students	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign.of Teahcer
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Vd. Ghanshyam Hotchand Kodwani	Professor	Rognidan & v	Regular	BAMS MD Rognidan, MD Kayachikitsa	YES	16	Yes	MUHS/PG/E3/3503/40 Dt.04/06/2007	11	23/10/1961	drkodwani@gmail.com	9422121546	828892658216	No	
2	Vd.Pranali Sandip Bhende	Asso.Professor	Rognidan & v	Regular	BAMS MD Rognidan,	YES	9	Yes	MUHS/PG/E3/125101/953/2023, Dt.06.04.2023	7	30/06/1980	vdpranali@gmail.com	9867351302	661127789561	No	
3	Vd.Ratna Vishwanath Damle	Asst.Professor	Rognidan & v	Regular	BAMS MD Rognidan,	YES	4	Yes	MUHS /E-3/ PG /31/05/1832/2019 Dt.04/05/2019	4	30/08/1981	ratnadamaleadake@gmail.com	9561080366	680823826681	No	
4	Vd.Dhananjay Vitthal Hange	Asst.Professor	Rognidan & v	Regular	BAMS MD Rognidan,	YES	8	Yes	MUHS /E-3/ PG /31/24/301/2020 Dt.01/02/2020	3	14/02/1975	drdvhange@gmail.com	9822246598	765403314777	No	


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विद्यार्थी प्रमुख
रोगनिदान वि.वि विभाग
सरकारी आयुर्वेद महा नागपूर २४


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

Name of the College : -Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject: Swasthavitta and Yog

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp./ Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Yr after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign.of Teahcer
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Sumeeta S Jain	HOD & Professor.	Swasthvritta and yoga	Regular	BAMS,MD, PhD Sch.	yes	10 Y 4M	yes	MUHS/PG/E-3/3503/31/07/2090/2021 Dt.06/08/2021	6	17-02-1978	sumeetasjain@gmail.com	9373111200	767351258289	NO	SJain
2	Dr Vidya Wasnik (thatere)	Asso.Prof	Swasthvritta and yoga	Regular	BAMS,MD, PHD	yes	9 Y 4M	yes	MUHS/PG/E-3/3403/1847/2014 Dt.16/07/2014	6	18-06-1976	dyawasnik@yahoo.com	9423723503	307944617506	NO	Wasnik
3	Dr.Manjiri Bhende	Asso.Prof	Swasthvritta and yoga	Regular	BAMS,MD, Phd.Scholar	yes	3 Yrs	Yes	MUHS/E-3/PG/31/34/4420, Dt.11/12/2018	1	08.03.1982	manjiri.palnitkar@gmail.com	9373127925	546890480405	NO	Manjiri

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स्वास्थ्य विभाग प्रमुख
स्वस्थवृत्त विभाग
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नागपुर-४०० ०२४

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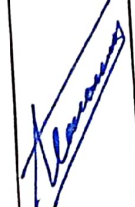


MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : -Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject:Agadtantra & Vyavahar Ayurved Evum Vidhi Vaidyk

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition (Yes/No)	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign.of Teahcer
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Rajendra D. Lambat	Associate Professor	Agadtantra & Vyavahar Ayurved Evum Vidhi Vaidyk	Regular	BAMS, D.T.F.M., MD	MUHS/E. 3/UG/3503/1000 Dt. 15.03.2013	23yrs	Yes	MUHS-MUHS/PG/E-3/3503/40 Dt. 04.06.2007	8	02.04.1961	rajendra.lambat@gmail.com	9422125852	325415353649	No	
2	Dr. Kalpana Ramesh Chavhan	Associate Professor	Agadtantra & Vyavahar Ayurved Evum Vidhi Vaidyk	Regular	BAMS, MD	MUHS/E. 3/UG&PG/125101/803/2022 Dt:29.03.2022	9 years	Yes	MUHS/E-3/PG/125101/31/06/977/2022 Dt.19.04.2022	5	20.07.1982	drkalpanachavhan@gmail.com	9.422E+09	784727581661	No	
3	Dr. Arvind Charandas Tumram	Assistant Professor	Agadtantra & Vyavahar Ayurved Evum Vidhi Vaidyk	Regular	BAMS, MD	MUHS/E. 3/UG/3503/1000 Dt:15/03/13	9 years 4 r	Yes	MUHS/PG/E-1/3503/3048/13 Dt. 28.10.2013	5	30.06.1976	atumram@gmail.com	9.923E+09	822543550351	No	

सह प्राध्यापक/विभागाध्यक्ष
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 नागपूर-४०० ०२४

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

Name of the College :- Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject: Prasuti- Tantra & Strirog

Sr. No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debared (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Vd. Anita Dhammapradip Bombarde	Professor	Prasuti-Tantra & Strirog	Regular	BAMS, MD	MUHS/E-3/ PG /3101/ Dt. /05/2004	16 Yrs 04 months	Yes	MUHS/E-3/ PG /3101/401 Date:- 04/06/2007	---	24/08/1967	dr.adbombarde57@gmail.com	9970115160	685209842056	No	<i>Ambesale</i>
3	Vd. Preeti Kshitij Jadhav (Pawar)	Associate Professor	Prasuti-Tantra & Strirog	Regular	BAMS, MS	MUHS/E-3/ UG /3503/1294, Dt. 03/04/2013	08 Yrs 04 months	Yes	MUHS/E-3/ PG /3503/3157/2014 Date:- 24/11/2014	---	29/06/1982	dr.preetikjadhav@gmail.com	9422210229	559470664532	No	<i>Pawar</i>

Ambesale

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प्रासुतिक/विभाग प्रमुख

प्रासुतिक विभाग

नासिकीय आयुर्वेद महाविद्यालय

नागपूर ४०० ००६

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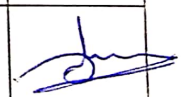


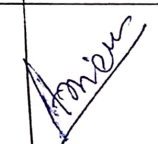
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Nagpur.

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

Name of the College :- Government Ayurved College, Nagpur

Phone/Mobile No:- 0712-2749198

Name of the Subject:

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No.	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr Jayant Devidas Gulhane	Associate Professor	Kayachikitsa	Regular	M.D.	Yes	16 years	Yes	MUHS/PG/E.3/3503/40 DATED 04/06/2007	10	31-07-1962	jayant.gulhane.62.6@gmail.com	9822922399	907653953681	No	
2	Dr Sushil Vilas Chawre	Assistant Professor	Kayachikitsa	Regular	M.D.	Yes	8 Years	Yes	MUHS/PG/E.3/31/05/3265/2015 Date 27/08/2015	6	20-08-1981	sushilvilasc hawre@gmail.com	9834625938	819781504870	No	
3	Dr Ashish Arunkumar Tahtere	Assistant Professor	Kayachikitsa	Regular	M.D.	Yes	7years	Yes	MUHS/PG/E3/31/01/284/31/01/2017	5	08-06-1977	ashish.thatare@gmail.com	9423406821	405046407488	No	
4	Dr Amit Viswas Nakanekar	Assistant Professor	Kayachikitsa	Regular	MD, PHD, POST DOCT. FELL.	Yes	5 Years	Yes	MUHS/E.3/PG/31/09/3220, dated 03/09/2018	3	01-08-1982	amitnakanekar@gmail.com	9850233016	598780850569	No	

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डॉ. जयंत गुल्हाने
सहयोगी प्राध्यापक
कायचिकित्सा विभाग प्रमुख
शासकिय आयुर्वेद महाविद्यालय
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Nagpur.

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

Name of the College : -Government Ayurved College, Nagpur
Phone/Mobile No:- 0712-2749198
Name of the Subject: Shalyatantra

Sr. No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Vd. Nita Mahadev Kedar	Professor	Shalya Tantra	Regular	M.S.	MUHS/E.3/UG/3503/1000 DATED:15/3/2013	10 yrs 3 month	Yes	PG-MUHS/E-3/PG/3503/31/07/2090/2021 6/8/2021	14	11-02-1977	drnita6@gmail.com	9422117613	340856432544	No	<i>Kedar</i>
2	Vd. Sushilkumar Pramod Wairagade	Assist. Professor	Shalya Tantra	Regular	M.S.	MUHS/E-3/UG/3503/3489DA TED:28/9/2017	6 yrs 10 month	Yes	MUHS/E-3PG/31/15/2618 DATED 10/11/2017	7	12-11-1978	sushilwairagade001@gmail.com	9766918640	834352727794	No	<i>Sushilkumar Wairagade</i>

Hod Stamp & Signature


Kedar
विभागा प्रमुख
शल्य तंत्र
शास. आयुर्वेद महाविद्यालय
रुग्णालय, नागपूर.


Dean Stamp & Signature

R. Rawal
Dean
Government Ayurved College
Nagpur.

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

Name of the College : -Government Ayurved College, Nagpur
Phone/Mobile No:- 0712-2749198
Name of the Subject: Shalakyata-Tantra

Sr.No.	Name of the Teacher (First/Middle/Last)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No.	Adhar Card No.	If Debarred (Yes/No)	Sign.of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Vd. Ashok Prabhakar Vaijwade	Associate Professor	Shalakyatantra	Regular	BAMS,MD	MUHS/E-3/UG /3403/2021 Date:- 08/10/2015	15 Yrs 08 months	Yes	MUHS/E-3/ PG /31/11/3961/2015 Date:- 20/10/2015	7	15/04/1963	drapvaijwade@gmail.com	9421756462	257721268694	No	


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प्राध्यापक/विभाग प्रमुख
शालाक्यतंत्र विभाग
शासकीय आयुर्वेद महाविद्यालय
नागपूर-४०० ०२४


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