

ANNEXURE - VIII-A

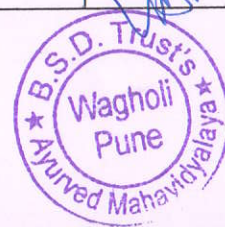
MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Samhita Siddhanta and Sanskrit

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	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	date of Birth (Age in years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Samhita Siddhanta and Sanskrit	DR. VINEETA VASANT DESHMUKH	Professor	7/1/2000	BAMS Mumbai 1993	MD Samhita Mumbai 1997 Ph.D 2007	25 Y - 11 M - 09 D	Yes	Yes MUHS/E-3/UG/3205/1554 Dt. 25/04/2012	444215965958	AGXPD0439R	09/06/1971 (52)	vineeta_deshmukh@yahoo.co.in	9820648058	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Samhita Siddhanta and Sanskrit	DR. RANIBALA MOTIRAM NEMADE	Reader / Associate Professor	2/1/2005	BAMS Pune 1996	MD Siddhant evam Darshan B.V.D University Pune 2004 Ph.D 2022	19 Y - 11 M - 28 D	Yes	Yes MUHS/E-3/UG/3205/1660 Dt. 02/04/2014	409677952520	ABYPN6257F	18/06/1975 (48)	dr.pushpanemade@gmail.com	9766607380	No



MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Rachana Sharir	VD. SUVARNA MADHAVRAO DHAWALE	Professor	9/17/2007	BAMS MUHS Nashik 2002	MD Rachana Sharir SRTMU Nanded 2007	17 Y - 05 M - 02 D	Yes	Yes MUHS/Acad/UG/E-3/122104/2860/2023 Dt. 16/10/2023	703939 162831	AQLPD5262G	01/04/1981 (42)	drsuvarna dhawale@yahoo.com	99605 68961	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Rachana Sharir	VD. PRIYANKA ASHOK SHINDE	Reader / Associate Professor	3/7/2017	BAMS MUHS Nashik 2007	MD Rachana Sharir MUHS Nashik 2012	11 Y - 10 M - 22 D	Yes	Yes MUHS/Acad/UG/E-3/122104/2860/2023 Dt. 16/10/2023	987904 483345	ATTPB5340C	16/09/1985 (38)	dr.priyanka.burde@gmail.com	98236 29026	No



ANNEXURE - VIII-A

MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Sanskrit

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Sanskrit	DR. RADHESH RANGNATH RAO KULKARNI	Lecturer / Assistant Professor	1/11/2018	B.A Sanskrit Pune 2007	M.A Sanskrit Pune 2009 M.Phil 2014 Ph.D Sanskrit & Lexicography 2019	06 Y - 00 M - 16 D	Yes	Yes MUHS/Acad /UG/E-3/ 122104/286 0/2023 Dt. 16/10/2023	265084 489866	BLQPK53 57G	11/11/1986 (37)	radheshkulkarni@gmail.com	94213 45786	No



MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

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	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	date of Birth (Age in years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Kriya Sharir	VD. SUPRIYA SHAIENDRA MANE	Reader / Associate Professor	9/1/2007	BAMS Pune 1999	MD Kriya Sharir Pune 2006	17 Y - 04 M - 18 D	Yes	Yes MUHS/Acad/UG/E-3/122104/2860/2023 Dt. 16/10/2023	457239831773	AJAPM8136C	08/02/1978 (45)	supriama ne@yahoo.com	9657142823	No



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MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Dravyaguna	VD. SHARAVATI GOROBA KAMBLE	Reader / Associate Professor	22-11-2013	BAMS Pune 1998	MD Dravya Guna GAU Jamnagar 2003	11 Y - 02 M - 06 D	Yes	Yes MUHS/Acad/UG/E-3/122104/2860/2023 Dt. 16/10/2023	630206 513553	AVMPK6137H	23/06/1977 (46)	sharavatik2003@gmail.com	86984 34667	No



MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
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Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Rasashastra and Bhaisajya Kalpana

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Rasashastra and Bhaisajya Kalpana	VD. SHARADINI ANIKET KARAMBELKAR	Reader / Associate Professor	30-06-2012	BAMS Nagpur University 2001	MD Rasa Shastra Nanded 2005	18 Y - 08 M - 26 D	Yes	Yes MUHS/E-3/UG /3205/1660 Dt. 02/04/2014	334976 667714	AVFPK7696C	12/10/1979 (44)	ketkar.sharadini@rediffmail.com	97661 34220	No



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MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Swasthavritta and Yoga

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Swasthavritta and Yoga	VD. ANKITA GOPAL SHARMA	Reader / Associate Professor	21-05-2022	BAMS MUHS 2010	MD Swasthavritta 2016	07 Y - 10 M - 23 D	Yes	Yes MUHS/Acad/UG/E-3/ 122104/ 2860/ 2023 Dt. 16/10/2023	406665 712854	IGEPS0376H	14/07/1989 (34)	dr.ankita3672@gmail.com	88888 24460	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Swasthavritta and Yoga	Vd. SUMEDHA ANAY KARAMBELKAR	Lecturer / Assistant Professor	01-08-2019	BAMS Goa University 2008	MD Swasthavritta MUHS 2014	05 Y - 05 M - 28 D	Yes	Yes MUHS/Acad/UG/E-3/ 122104/2860 / 2023 Dt. 16/10/2023	946498 849942	DCSP55126J	19/09/1986 (37)	sumedha.sapre@gmail.com	77449 47366	No



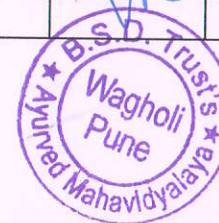
MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Roga Nidan and Vikriti Vigyana

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Roga Nidan and Vikriti Vigyana	VD. ARCHANA ARUN KULKARNI	Professor	03/07/2010	BAMS Amravati 1998	M.D. Rog Nidan Evam Vikruti Vigyan S.R.T.M.U. Nanded 2004	20 Y - 05 M - 14 D	Yes	Yes MUHS/Acad/UG/E-3/ 122104/ 2860/ 2023 Dt. 16/10/2023	604682 551993	ANEPK7626D	03/06/1977 (46)	archana.arukulkarni@gmail.com	94221 64367	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Roga Nidan and Vikriti Vigyana	VD. VIVEK VILAS NEMADE	Reader / Associate Professor	01-06-2022	BAMS MUHS 2010	M.D. Rog Nidan Evam Vikruti Vigyan 2014	10 Y - 09 M - 22 D	Yes	Yes MUHS/Acad/UG/E-3/ 122104/ 2860/2023 Dt. 16/10/2023	207904 416921	ALGPN8131Q	26/12/1985 (38)	drvivek.nemade@gmail.com	95455 95095	No



MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Agad Tantra

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Agad Tantra	DR. ANAND BALWANT KULKARNI	Professor	01-02-2000	BAMS Pune 1993	PGDTFM Pune 1996 Ph.D. Pune 2006	24 Y - 11 M - 23 D	Yes	Yes MUHS/E-3/UG/3205/ 1660 Dt 02/04/2014	951398 650004	AHRPK1549A	19/09/1970 (53)	drabk70@gmail.com	98900 66749	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Agad Tantra	VD. PALLAVI ADWAIT MOGHE	Professor	21-10-2009	BAMS MUHS 2004	MD Kaya Chikitsa MUHS 2009	15 Y - 03 M - 05 D	Yes	Yes MUHS/Acad/UG/E-3/ 122104/2860/2023 Dt. 16/10/2023	548658 907953	BGJPK7994R	25/03/1983 (40)	pallavi.khese@yahoo.com	98508 86071	No



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MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Prasuti-Streeroga

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Prasuti-Streeroga	VD. ARATI ANIL KALE	Reader / Associate Professor	30-08-2019	BAMS University Of Pune 1999	MS Stree Rog Prasuti Tantra University Of Pune 2006	17 Y - 05 M - 16 D	Yes	Yes MUHS/Acad/UG/E-3/122104/2860/2023 Dt. 16/10/2023	621228972271	BEXPK4179J	05/05/1978 (45)	aratiakale@gmail.com	9850976638	No



MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

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 passin	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	date of Birth (Age in years)	Lates Email Address	Contact No. (Mob)	Debarr ed Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Kayachikitsa	DR. ANJALI ANIRUDDHA DESHPANDE	Professor	01-02-2004	BAMS Pune 1993	MD Kaya Chikitsa Pune 1998 Ph.d TMV Pune 2017	20 Y - 11 M - 18 D	Yes	Yes MUHS/Acad/UG/E-3/ 122104/2860/ 2023 Dt. 16/10/2023	9707400 88343	AFSPD8802J	16/10/1970 (53)	leena1610@yahoo.in	97300 69747	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Kayachikitsa	DR. SUSHRUT SADANAND SARDESHMUKH	Reader / Associate Professor	21-03-2014	BAMS MUHS 2008	MD Kayachikitsa MUHS 2014 Ph.d TMV Pune 2020	10,Y - 10 M - 03 D	Yes	Yes MUHS/Acad/E-3/ UG /122104/2177/ 2023 Dt. 22/08/2023	403191 376022	BIOPS0062D	29/09/1982 (41)	ayuharmoney@gmail.com	90110 74077	No



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 years)	Lates 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
3	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Kayachikitsa	VD. PRITAM RAMESH MEHER	Reader / Associate Professor	6/14/2022	BAMS MUHS Nashik 2005	MD Kayachikitsa MUHS Nashik, 2011	11 Y - 09 M - 22 D	Yes	Yes MUHS/Acad/UG/E-3/122104/2861/2023 Dt. 16/10/2023	515742 123777	ATUPM0251E	26/07/1984 (39)	dr.pritam meher26@gmail.com	98607 85177	No



MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Shalya Tantra

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Shalya Tantra	VD. PRAVIN SURYAKANT KAKDE	Reader / Associate Professor	03-09-2019	BAMS University of Mumbai 2001	MS. Shalya Tantra SRT Marathwad University. Nanded 2005	18 Y - 03 M - 08 D	Yes	Yes MUHS/Acad/UG/ E-3/ 122104/ 2860/2023 Dt. 16/10/2023	732236 917832	ATVPK0134H	22/02/1979 (44)	pravin.kakde@rediffmail.com	9975605295	No



ANNEXURE - VIII-A

MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)

Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

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 years)	Lates 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	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Panchakarma	VD. PRASHANT PANDURANG AMRUTKAR	Professor	25-11-2013	BAMS MUHS 2008	MD Panchakarma MUHS 2013	11 Y - 02 M - 05 D	Yes	Yes MUHS/UG/E-3/122106/422/2024	303401707095	BCZPA6300H	22-04-1985 39	drprashantamrutkar@gmail.com	8698282507	No
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Panchakarma	VD. NITA SATYANARAYAN SINGH	Associate Professor	19-12-2023	BAMS MUHS 2010	MD Panchakarma MUHS 2015	06 Y - 02 M - 25 D	Yes	MUHS/UG/E-3/122106/422/2024 Dt. 20/02/2024	284753059241	ELGPS1469Q	05-03-1987	dr.nitasinigh@gmail.com	9860357926	No



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MAHARSHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
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Name of the College :- B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune

Phone/ Mobile No. :- (020)67346152

Name of the Subject :- Kaumarbhritya (Balaroga)

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 years)	Lates 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
2	B.S.D.Trust, Ayurved Mahavidyalaya, Wagholi, Pune	Kaumarbhritya (Balaroga)	VD. NARAYAN SOPAN TATHE	Reader / Associate Professor	01-05-2008	BAMS Pune 1999	MD Prasutitantra 2006	16 Y - 06 M - 27 D	Yes	Yes MUHS/Acad/E-3/UG/122104/2177/2023 Dt. 22/08/2023	7101625 89392	AFGPT7273K	28-05-1978 46	naravantathe2	94223 15653	No



PRINCIPAL
Dr. Anand. B. Kulkarni
 B.S.D.T'S Ayurved Mahavidyalaya
 At Post-Wagholi, Tal-Haveli, Dist-Pune.