

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG COURSES)**

ANNEXURE-VIII-A

**Name of the College :- Mauli Ayurvedic College & Hospital Markhel
Name of the Subject :- Sambhita Sidhanta & Sanskrit**

Sr.No	College Name	Subject	Full name of the Teacher(Firs t/Middle/Last)	Designatio n	Date of Joining	UG Quali fication & Year of Passing	PG Qualificati on & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Qualif ication No	Pan No	Date of Birth (Age in years)	Latest Email Address	Contact No (Mob)	Debutte d Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Mauli Ayurvedic College & Hospital Markhel	Sambhita Sidhanta	Dr.Dinesh Mayaji Shingade	Associate Profess/R eade	14/05/2024	2007	2017	7Year	No	-	49543270 2673	HPXP02 61A	05/09/198 4	dr.dineshshi ngade@gm ail.com	8320875134	No
2	Mauli Ayurvedic College & Hospital Markhel	Sambhita Sidhanta	Dr.Mayur Sanjay Dhepe	Assistant Profess/L ecture	09/05/2024	2016	2022	9Month	No	-	22646117 1982	EWTPD9 640A	10/12/199 4	Mayurdhep el@gmail.c om	7821085634	No
3	Mauli Ayurvedic College & Hospital Markhel	Sambhita Sidhanta	Dr.Mayuri Sureshtrao Arya	Assistant Professor /Lecturer	14/05/2024	2009	2019	3.7Year	No	-	34256312 7793	AWHPA 7504Q	15/05/198 7	Mayuriarya 15@gmail.c om	8356051956	No
4	Mauli Ayurvedic College & Hospital Markhel	Sanskrit	Dr.Urmila Babaurreddy Gurude	Assistant Professor /Lecturer	09/05/2024	2003	2009	9Month	No	-	85677513 0320	APYPG1 147H	18/04/198 1	drbalajiguj e@gmail.co m	9423438935	No



Principal

**Mauli Ayurvedic College & Hospital
Markhel, Tq. Degloor Dist. Nanded.**

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ANNEXURE-VIII-A

Name of the College :- Mauli Ayurvedic College & Hospital Markhel
Name of the Subject :- Kriya Sharir

Sr.No	College Name	Subject	Full name of the Teachers (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	Aadhar 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	Mauli Ayurvedic College & Hospital Markhel	Kriya Sharir	Dr. Lakade Mohini Balaji	Assistant Professor/Reader	09-05-2024	2000	2011	9 Year	No	-	262650712468	AEZPL9761N	30/07/1979	mohiniblakade@gmail.com	7410180666	No
2	Mauli Ayurvedic College & Hospital Markhel	Kriya Sharir	Dr. Narwad Bhagyashri Vajinath	Assistant Professor/Reader	09/05/2024	2017	2022	9 Month	No	-	419955741329	AXXWPN6460E	29/06/1992	vaidyashrinarwade@gmail.com	7709847967	No



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ANNEXURE-VIII-A

Name of the College :- Mauli Ayurvedic College & Hospital Markhel
Name of the Subject :- Rachna Sharir

Sr.No	College Name	Subject	Full name of the Teachers(Firs t/Middle/Last)	Designatio n	Date of Joining	UG Qualifi cation & Year of Passing	PG Qualificati on & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Aadhar No	Pan No	Date of Birth (Age in years)	Latest Email Address	Contact No (Mob)	Debarre d Yes/No
1	Mauli Ayurvedic College & Hospital Markhel	Rachna Sharir	Dr.Chate Chandrakant Maruti	Associate Profess/R eade	16/06/2024	1997	2007	16Year	No	-	505598573472	AMFC0098P	27/06/1975	Drchatecm@gmail.com	9421984744	No
2	Mauli Ayurvedic College & Hospital Markhel	Rachna Sharir	Dr. Pathan Rubina Jamshid	Assistant Profess/L ecture	09/05/2024	2013	2018	9Month	No	-	280361086411	CYBPP3489B	21/02/1991	Rubinapath and12@gmail.com	7972093709	No



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