



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI
Phone/ Mobile No. :- (02328)224146, 90119900
Name of the Subject :- Sanskrit

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teaching Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Sanskrit	Dr. Sunil Murlidhar Kolekar	Lecturer	02.08.2010	B.A.M.S 1994	M.A. Sanskrit 2008	15 Y 05 M	Yes	MUHS/E.3/UG/32 10/4001 date.22.12.2010	551578808264	AHNPK0056A	02.06.1973	dr.sunilkolekar@gmail.com	9423285328	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Sharir Rachana

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No.
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Sharir Rachana	Dr. Chaya Vinod Patil	Professor	07.04.2011	B.A.M.S. 1989	M.D. 1996	27 Y 10 M	Yes	MUHS/E.3/UG /3210/4383 date.19.10.2011	452184896522	AGJPP7163Q	27.10.1967	dr.chhaya.patil 27@gmail.com	9730694469	No
2	Yashwant Ayurvedic College Kodoli	Sharir Rachana	Dr. Avinash Tukaram Vipra	Reader	10.04.07	B.A.M.S 1999	M.D. Rachana Sharir 2005	18 Y 11 M	Yes	MUHS/E-3/UG/ 3210/46 date.04.01.2014	309653475570	ADRPV0557H	09.06.1978	dravinashvipra @rediffmail.co m	9422185895	No
3	Yashwant Ayurvedic College Kodoli	Sharir Rachana	Dr. Swarupa Shyam Mane	Reader	12.10.2023	B.A.M.S 2011	M.D. Rachana Sharir 2017	06 Y 11 M	No	MUHS/Acad/UG/E-3/122109/217/ 2024 Dt. 29/01/2024	730437901970	BMWPM8112Q	18.11.1988	dr.swaryoama ne@gmail.com	9421358723	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECT WISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Sharir Kriya

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Sharir Kriya	Dr Uttam Kashinath Bande	Professor	05.03.2004	BAMS 1995	MD 2001	23 Y 06 M	Yes	MUHS/E-3/UG/3210/46 date.04.01.2014	998766348883	AJGPB6106K	05.02.1971	ukbande@gmail.com	9011090327	No
2	Yashwant Ayurvedic College Kodoli	Sharir Kriya	Dr. Satish Balaso Patil	Reader	24.10.2016	BAMS 2010	MD Sharir Kriya 2016	08 Y 03 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	650405364196	BXMPP9615E	21.05.1988	anusatish37@gmail.com	9765754037	No
3	Yashwant Ayurvedic College Kodoli	Sharir Kriya	Dr. Sampada Nilesh Karpe	Reader	14.03.2023	BAMS 2008	MD Sharir Kriya 2013	10 Y 04 M	No	MUHS/Acad/UG/E-3/122109/217/ 2024 Dt. 29/01/2024	654348599831	ASCPG6504F	14.01.1986	gate.sampada@gmail.com	9423573566	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Samhita Siddhant

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teaching Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Samhita Sidhant	Dr Sachin Sadashiv Waghmare	Professor	12.08.2011	B.A.M.S 1999	M.D. 2005	18Y 07M	Yes	MUHS/UG/E-3/ 1 22109/2220/2023 Dt. 24/08/2023	818988813914	AASPW8787E	25.09.1977	swvaghmare.sachin@gmail.com	9822472010	No
2	Yashwant Ayurvedic College Kodoli	Samhita Sidhant	Dr. Asmita Maheshkumar Sutar	Reader	04.08.2008	B.A.M.S 2003	M.D. 2008	12 Y 02 M	Yes	MUHS/PG/E-3/ UG/3210/46 dt.04.01.2014	596619372226	CDAPS4057C	20.03.1982	getasmita1@rediffmail.com	9960467200	No
3	Yashwant Ayurvedic College Kodoli	Samhita Sidhant	Dr. Harshal Sampatrao Sabale	Reader	22.10.2013	B.A.M.S 2008	M.D. 2013	04 Y 06 M	Yes	MUHS/UG/E-3 / 122109/671/2024 Date 11/2024	868418106544	FFVPS0612K	03.07.1986	drharshal1819s@gmail.com	9960446171	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Rognidan

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Rognidan	Dr. Ashok Sadashiv Patil	Professor	28.01.2010	BAMS 2004	MD Rognidan 2009	15 Y 00 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	787389178120	BFEP4275G	04.03.1981	drashok.rognidan@gmail.com	9423802308	No
2	Yashwant Ayurvedic College Kodoli	Rognidan	Dr. Suraj Mohan Patil	Reader	11.01.2019	BAMS 2015	MD Rognidan 2018	06 Y 01 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	984312272048	CJUPP5394P	21.03.1992	surajpatil4306@gmail.com	9765135657	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Swasthvritta

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Agae in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Swastha Vritta	Dr. Milind Mohan Godbole	Professor	12.03.2004	B.A.M.S 1989	P.G.Dip. 1996 M.D. 2003	33 Y 05 M	Yes	MUHS/E.3/ 3210 /3489 date.17.07.2007	379526306222	ACFPG1122J	07.12.1964	drmilindgodbole@gmail.com	9850119900	No
2	Yashwant Ayurvedic College Kodoli	Swastha Vritta	Dr. Kalpana Krishnarao Jadhav	Reader	22.03.2004	B.A.M.S 1989	M.D Swasthvitta 2003 Ph D Swasthvitta 2017	20 Y 10 M	Yes	MUHS/E.3/UG/ 3210/212 date.19.01.2010	761190324704	AFIPJ9150F	18.06.1967	kalpanajadhav70@yahoo.com	9423871049	No
3	Yashwant Ayurvedic College Kodoli	Swastha Vritta	Dr Mane Patil Abhijeet Anandrao	Reader	07.04.2021	B.A.M.S 2012	M.D Swasthvitta 2015	08 Y 04 M	Yes	MUHS/UG/E-3/ 122109/671/2024 Date 19/11/2024	440171236968	BGWPM4067L	18.04.1988	manepatilabhijeet@gmail.com	9657864908	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Dravyagun

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Agae in Year	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	Yashwant Ayurvedic College Kodoli	Dravyaguna	Dr. Laxmikant Balasaheb Patil	Professor	11.06.2011	BAMS 1996	M.D. 2003	21 Y 01 M	Yes	MUHS/UG/E-3/ 122109/671/2024 Date 19/11/2024	490263395192	AMHPP4122D	16.02.1975	laxmiayurved@gmail.com	9422050209	No
2	Yashwant Ayurvedic College Kodoli	Dravyaguna	Dr. Ranjeet Zunzarrao Patil	Reader	13.01.2017	BAMS 2007	M.D. 2011	13 Y 06 M	Yes	MUHS/UG/E-3/ 122109/671/2024 Date 19/11/2024	852792754716	AQHPP4868Q	06.06.1983	ranjeet48@hotmail.com	9921556767	No
3	Yashwant Ayurvedic College Kodoli	Dravyaguna	Dr. Abhijeet Hindurao More	Lecturer	13.01.2017	BAMS 2010	M.D. 2016	08 Y 00 M	Yes	MUHS/Acad/UG/E-3/122109/3112/2023 Date 09/11/2023	975996601425	BDEPK2630I	06.06.1983	moreabhijeet93@gmail.com	9421462797	No

Signature of Member

Signature of Member

Signature of Chairman


PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI
Phone/ Mobile No. :- (02328)224146, 90119900
Name of the Subject :- Agadtantra

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Agad Tantra	Dr. Vijay Vasantrao Patil	Professor	01.10.10	B.A.M.S 2003	M.D. Agad 2010	14 Y 03 M	Yes	MUHS/Acad/UG/E-3/122109/3112/2023 Date 09/11/2023	571530174199	BJGPP5069I	24.02.1982	drvijay.patilayu@gmail.com	7507313566	No
2	Yashwant Ayurvedic College Kodoli	Agad Tantra	Dr. Akshara Akash Patil	Reader	01.10.2015	B.A.M.S 2003	M.D. Agad 2012	09 Y 03 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	913394067627	AYNPS3594I	25.10.1985	dr.akashpatil04@gmail.com	9970040451	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI
Phone/ Mobile No. :- (02328)224146, 90119900
Name of the Subject :- Rasashastra & BK

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teaching Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Rasa shastra & BK	Dr. Sunil Chandrakant Bakare	Professor	01.09.1991	B.A.M.S. 1989	M. D. Rasa B.K. 1997	33 Y 03 M	Yes	MUHS/E.3/UG / 3210/3202 date.21.11.2009	306766458173	AAPPB2252C	20.07.1967	drbakare@rediffmail.com	9822257304	No
2	Yashwant Ayurvedic College Kodoli	Rasa shastra	Dr. Swati Vishwas Patil	Reader	01.10.2010	B.A.M.S. 1995	M. D. Rasa. 2010	14 Y 04 M	Yes	MUHS/UG/E-3/ 122109/671/2024 Date 19/11/2024	350738247081	AVCPP2606A	01.06.1973	swati.2908@gmail.com	9503628150	No
3	Yashwant Ayurvedic College Kodoli	Rasa shastra & BK	Dr. Ranjit Dattatray Patil	Reader	04.10.2016	B.A.M.S. 2008	M. D. Rasa. 2016	08 Y 03 M	Yes	MUHS/UG/E-3/ 122109/671/2024 Date 19/11/2024	681323044245	AWVPP0448G	14.12.1984	sarthipatil1234@rediffmail.com	9665160284	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI.
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI
Phone/Mobile No. :- (02328)224146, 90119900
Name of the Subject :-Kayachikitsa

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teaching Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Kaya Chikitsa	Dr. Suryakiran Parashuram Wagh	Professor	15.04.2002	BAMS 1987	M.D Kayachikitsa 1993	25 Y 11 M	Yes	MUHS/E.3/UG/ 3210/5007 date.13.12.2012	453560919654	AAKPW2700P	19.09.1964	suryakiran_wagh@rediffmail.com	9822846910	No
2	Yashwant Ayurvedic College Kodoli	Kaya Chikitsa	Dr. Vasundhara Ramdasrao Borakhade	Reader	01.01.2005	BAMS 2000	M.D Kayachikitsa 2004	20 Y 00 M	Yes	MUHS/E.3/UG/ 3210/5007 date.13.12.2012	763524055775	AKLPB3822C	08.06.1978	vasudha.borakhade@gmail.com	9822885710	No
3	Yashwant Ayurvedic College Kodoli	Kaya Chikitsa	Dr. Dipali Shekhar Swami	Reader	01.12.2008	BAMS 1997	M.D Kayachikitsa 2005	19 Y 06 M	Yes	MUHS/E.3/UG/ 3210/57 date.04.01.2013	411138170398	BJPPS0535J	06.11.1972	dr.dipaliswami06@gmail.com	9960003947	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI
Phone/ Mobile No. :- (02328)224146, 90119900
Name of the Subject :- Shalya Tantra

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Shalya Tantra	Dr. Srinivas Narsimha Turlapati	Professor	25.06.08	BAMS 1988	M.D(Ayu) 1994	30 Y 05 M	Yes	MUHS/E.3/UG/3210/3375 date.08.10.2008	462098234856	APVPS5223F	01.07.1965	drsrinivast@gmail.com	9503147698	No
2	Yashwant Ayurvedic College Kodoli	Shalya Tantra	Dr. Laxmi Maroti Narhare	Professor	01.04.2000	B.A.M.S. 1990	M.D. Shalya Tantra 1995	24 Y 08 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	945340448883	ACLPN1736D	10.06.1968	dr.laxminarhare@gmail.com	9822189226	No
3	Yashwant Ayurvedic College Kodoli	Shalya Tantra	Dr. Sayaji Bapu Desai	Reader	15.09.2012	B.A.M.S. 2001	M.S. Shalya Tantra 2004	19 Y 10 M	Yes	MUHS/E-3/UG/3210/46 date.04.01.2014	471189826802	AIOPD3536G	02.06.1977	drsayaji@yahoo.com	9423282354	No
4	Yashwant Ayurvedic College Kodoli	Shalya Tantra	Dr. Ardra Bhagawanrao Thorat	Reader	02.06.2014	BAMS 2006	M.S. Shalya Tantra 2014	10 Y 07 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	845621566900	AHTPT9870F	20.08.1984	dr.ardrathorat@gmail.com	9970223088	No
5	Yashwant Ayurvedic College Kodoli	Shalya Tantra	Dr. Vaibhav Sadashiv Magar	Reader	11.05.2018	BAMS 2007	M.S. Shalya Tantra 2017	06 Y 07 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	905311339315	BBGPM0755E	07.07.1983	dr.vaibhav83magar@gmail.com	8600667796	No

Signature of Member

Signature of Member

Signature of Chairman


PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECT WISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :-Shalakya Tantra

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teaching Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Shalakya Tantra	Dr. Chandrashekhar Namdevrao Mule	Professor	06.12.2003	BAMS 1988	M.D. Shalakya 1996	23 Y 02 M	Yes	MUHS/E-3/UG/3210/46 date.04.01.2014	746829763966	AMVPM763IR	05.10.1965	drcnm05@gmail.com	8830319394 9175800710	No
2	Yashwant Ayurvedic College Kodoli	Shalakya Tantra	Dr. Kiran Balasaheb Patil	Reader	01.10.2010	BAMS 1998	M.S. Shalakya 2010 Ph.D. 2018	14 Y 03 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	436115288737	AJIPP1236G	23.10.1976	dr.kp1976@gmail.com	9823421568 7020519271	No

Signature of Member

Signature of Member

Signature of Chairman


PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI
Phone/ Mobile No. :- (02328)224146, 90119900
Name of the Subject :-Kaumar Bhritya

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Agae in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Kaumar Bhritya	Vd.Pravat Kumar Dash	Professor	02.12.1996	BAMS 1993	M.D.(Ayu) Balrog 1996 Ph.D 2006	28 Y 01 M	Yes	MUHS/E.3/UG/3210/3202 date.21.11.2009	863776296157	ABAPD5037D	11.04.1968	drpkdash25@gmail.com	9423277590	No
2	Yashwant Ayurvedic College Kodoli	Kaumar Bhritya	Dr. Shailesh Raghunath Rajgolkar	Reader	04.10.2014	BAMS 2007	M.D.(Ayu) Balrog 2014	11 Y 01 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	786065899452	BDRPR1712F	15.07.1986	shaileshrajgolkar@gmail.com	8308410222	No
3	Yashwant Ayurvedic College Kodoli	Kaumar Bhritya	Dr. Kirti Sadashivrao Navane	Reader	10.10.2016	BAMS 2011	M.D.(Ayu) Balrog 2016	08 Y 03 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	291244488174	AJVPN6846P	21.04.1989	kirtinavane96@gmail.com	9482742515	No

Signature of Member

Signature of Member

Signature of Chairman


PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECT WISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :-Strirot Prasuti Tantra

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teaching Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	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	Yashwant Ayurvedic College Kodoli	Strirot Prasuti Tantra	Dr. Vishala Srinivas Turlapati	Professor	18.07.2008	BAMS 1991	MD Streerog Prasuti 1997	27 Y 02 M	Yes	MUHS/E-3/UG/ 3210/3375 date.08.10.2008	359787013438	ACJVPV01487	16.11.1967	vishalaturlapati@gmail.com	9960217429	No
2	Yashwant Ayurvedic College Kodoli	Strirot Prasuti Tantra	Dr. Kavita Chandrashekhar Mule	Reader	03.03.2014	BAMS 1993	MD Streerog Prasuti 2002	20 Y 05 M	Yes	MUHS/E-3/UG/ 3210/1277 date.13.03.2014	565820189460	ADYPN6940K	12.06.1972	kvt126@gmail.com	9423277612	No
3	Yashwant Ayurvedic College Kodoli	Strirot Prasuti Tantra	Dr. Manoj Anandrao Naik	Lecturer	25.01.2019	BAMS 2009	MS Streerog Prasuti 2016	08 Y 07 M	Yes	MUHS/ACAD/UG/ E-3/122109/3111/ 2023 Dt. 9.11.23	643099292397	ARUPN9218N	16.11.1982	drdeepali5119@gmail.com	8975953456	No

Signature of Member

Signature of Member

Signature of Chairman


PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Panchakarma

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarred Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Pancha Karma	Dr. Ravikumar Bhagwan Patil	Reader	19.03.2019	B.A.M.S 2007	M.D. Panchkarma 2011	13 Y 05 M	Yes	MUHS/UG/E-3/122109/671/2024 Date 19/11/2024	606447644802	BTQPP8683N	01.06.1985	vaidyaravipatil@gmail.com	9822010316	No
2	Yashwant Ayurvedic College Kodoli	Pancha Karma	Dr. Abhijeet Subhashrao Ingavale	Reader	12.11.2016	B.A.M.S 2009	M.D. Panchkarma 2016	08 Y 02 M	Yes	MUHS/UG/E-3/122109/2220/2023 Date 24/08/2023	924446724868	ABPPI9387L	11.06.1988	abhijeetingavale@gmail.com	9822919000	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur



ANNEXURE - VIII-A

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

Name of the College :- YASHAWANT AYURVEDIC COLLEGE, KODOLI

Phone/ Mobile No. :- (02328)224146, 90119900

Name of the Subject :- Research Methodology and Medical Statistics

Sr. No.	College Name	Subject	Full Name of the Teacher (First Name Middle Name Last Name)	Designation	Date of joining	UG Qual. & Passing Year	PG Qual. & Passing Year	Teachin Experience After PG Passing	Muhs Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	PAN No.	Date of Birth Age in Year	Latest Email Address	Contact No (Mob.)	Debarre Yes/ No
1	2	3	4	5	6	7	8	9	13	14	15	16	17	18	19	20
1	Yashwant Ayurvedic College Kodoli	Swastha Vritta	Dr. Milind Mohan Godbole	Professor	12.03.2004	B.A.M.S 1989	P.G.Dip. 1996 M.D. 2003	33 Y 05 M	Yes	MUHS/E.3/3210 /3489 date.17.07.2007	379526306222	ACFPG1122J	07.12.1964	drmilindgodbole@gmail.com	9850119900	No
2	Yashwant Ayurvedic College Kodoli	Swastha Vritta	Dr. Kalpana Krishnarao Jadhav	Reader	22.03.2004	B.A.M.S 1989	M.D Swasthivitta 2003 Ph.D Swasthivitta 2017	20 Y 10 M	Yes	MUHS/E.3/UG/3210/212 date.19.01.2010	761190324704	AFIPJ9150F	18.06.1967	kalpanajadhav70@yahoo.com	9423871049	No

Signature of Member

Signature of Member

Signature of Chairman

PRINCIPAL
YASHWANT AYURVEDIC COLLEGE, KODOLI,
TAL. Panhala, Dist. Kolhapur.