

Maharashtra University of Health Sciences, Nashik

SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Course)

Name of College / Institute: Smt. Chandaben Mohanbhai Patel Homeopathic Medical College

Phone/Mobile No:

Name of the Subject:

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp./ Honorary)	Qualification	University Approx at (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	Email 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
Not Applicable																

P. F. Damania

Signature of Principal With Seal

DR. P. F. DAMANIA

Principal

Smt. C.M.P. Hom. Med.

College, Mumbai - 56.

