

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK

DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF

UG Degree / PG Degree) AS ON :- / /20

Faculty. : **Ayurveda**

Subject:- Kriya Sharir

Whether UG/ UG+PG.....

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

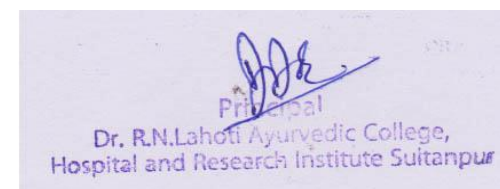
College Code:- 125119

Intake Capacity:- 60

S. N.	Name of Teaching Staff	Designation	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category (if so specify category)	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment	Type of approval by University	
											UG Yrs	PG Yrs			Temp./Regular/Contractual	Temp/Regular	Letter No. & date
1	Dr.V.V.Dasare	Professor	9970640862	vivekdasare@yahoo.com	4/1/1980	642368132597	AJXVD4066D	B.A.M. S. M.D.	17-03-2021	Open	13 Y		13 Y	-	Regular	Temp	MUHS/E-3/UG&PG/125119/2906/2021 Dt. 27/10/202

Date:

Signature of College Co-ordinator



Principal
Dr. R.N.Lahoti Ayurvedic College,
Hospital and Research Institute Sultanpur

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK

DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF AS ON :- / /20

Name of the dept. : **Rachna Sharir**

College Phone No. :

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

College E-mail ID : **drnlayur@gmail.com**


Name of the Dean / Principal : **Dr. D.D.Ovar**

College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment	Type of a Univ
												UG Yrs	PG Yrs			Temp./Regular/Contractual	Temp/Regular
1	Dr Darasing Govind Rathod	Lecturer	-	9623283407	darasingrathod23@gmail.com	12/23/1988	526766045097	AZFP R9065 C	BAMS, MD	11/1/2017	Open	3 Y	-	1 Y	-	Regular	Temp

Date:

Signature of College Co-ordinator


Principal
Dr. R.N.Lahoti Ayurvedic College
Hospital and Research Institute
Signature of Dean

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK

DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF AS ON :- / /20

Name of the dept. : **Samhita Siddhant**

College Phone No. :

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

College E-mail ID : **drnlayur@gmail.com**

Name of the Dean / Principal : **Dr. D.D.Ovar**


College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment	Type of a Univ
												UG Yrs	PG Yrs			Temp./Regular/Contractual	Temp/Regular

1	Dr.Sonal M.Rathi	Professor	-	9423156907	drnlayur@gmail.com	12/9/1979	885713304344	ACGPL8209A	B.A.M.S. M.D.	10/1/2018	Open	10 Y	-	10 Y	-	Regular	Temp
2	Dr.O.N.Shinde	Asst. Professor	-	9970463890	dr.ovishinde1@gmail.com	20/05/1985	988385656830	HCZPS7674R	B.A.M.S. M.D.	1/2/2021	Open	2.11 Y	-	2.11 Y	-	Regular	Temp

Date:

Signature of College Co-ordinator


Principal
Dr. R.N.Lahoti Ayurvedic
Hospital and Research Institute

Annexure -VIII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Rasshastra & B.K.

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**

College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

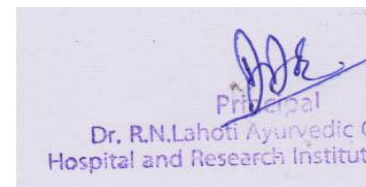
College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				

1	Dr. Dayanand D. Ovar	Professor		9822619844	drdovar@rediffmail.com	3/7/1977	669125444114	AAJP O5656 P	B.A.M.S. M.D.	27/12/2019	Open	16 Y	-	16 Y	-	Regular	Temp
2	Dr. Megha A. Gaurkhede	Lecturer		9422541687	gaurkhede.megha4@gmail.com	9/14/1990	436562563321	BRLP G8599 M	B.A.M.S. M.D.	8/1/2018	Open	3 Y	-	3 Y	-	Regular	Temp

Date:

Signature of College Co-ordinator



Principal
Dr. R.N. Lahoti Ayurvedic College,
Hospital and Research Institute

Annexure-V

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Rognidan & V.V.

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**

College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

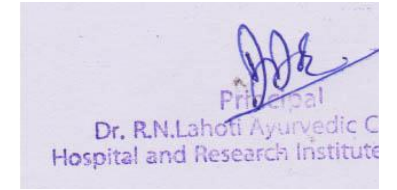
College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				

1	Dr. Shrikant H. Kate	Professor		9822631527	Vd.shkate76@gmail.com	1/23/1976	633984155340	APCP K3167 K	B.A.M.S. M.D.	#####	Open	12 Y	-	12 Y	-	Regular	Temp
2	Dr. Deepali S. Deshmukh	Lecturer		9673428375	Deepalideshmukh1990@gmail.com	1/18/1990	403157775918	CHZP D2820 B	B.A.M.S. M.D.	#####	Open	1 Y	-	1 Y	-	Regular	Temp

Date:

Signature of College Co-ordinator



Annexure -VIII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree/PG Degree) AS ON :- / /20

Name of the dept. : Agadtantra &V.V.

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**


College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				

1	Dr.Bhavna A. Aatram	Asso. Professor		9405164600	atrambhavna110@gmail.com	1/10/1976	272419160204	AKGP A5094 A	BAMS, MD	19/05/2021	Open	9 Y		9 Y	-	Regular	Temp
2	Dr.Kacharu D. Solanke	Asst. Professor		8668209522	kacharusolank e89@gmail.com	28/03/1989	675020249463	GAEP S1939 C	BAMS, MD	1/7/2019	Open	1 Y		1 Y	-	Regular	Temp


 Principal
 Dr. R.N.Lahoti Ayurvedic College
 Hospital and Research Institute

Date:

Signature of College Co-ordinator

Annexure -1

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Kaumarbhritya

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**

College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

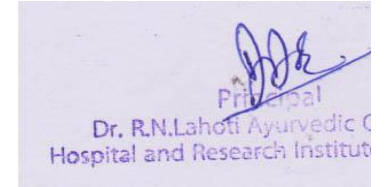
College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				

1	Dr.Arun P. Kute	Reader	-	7276561791	drarunpatil@yahoo.co.in	8/13/1983	414573929480	BADP K4391 L	BAMS, MD	8/1/2018	Open	6 Y	-	6 Y	-	Regular	Temp
2	Dr.Dattatray G. Parde	Asst.Professor	-	7057004411	drdgp7@gmail.com	6/5/1990	936312299304	DGCP P9353 J	BAMS, MD	21/01/2021	Open	-	-	-	-	Regular	Temp

Date:

Signature of College Co-ordinator



Annexure -VIII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Prasutitantra

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**


College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				

1	Dr. Ujwala M. Katole	Reader	-	9730188922	ujwalakatole@gmail.com	2/23/1982	268882200114	BGFP K9920 D	BAMS, MD	#####	Open	8 Y	-	8 Y	-	Regular	Temp
2	Dr.Sadhna D. Avhale	Asst.Prof	.	9960334263	drsadhna.avhale@gmail.com	25/05/1991	566632487429	BTFP A6064 H	BAMS, MD	20/05/2019	Open	1 Y		1 Y		Regular	Temp


 Dr. R.N.Lahoti Ayurvedic College
 Hospital and Research Institute

Date:

Signature of College Co-ordinator

Signature of Dean

Annexure - 1

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK

DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF (Approved +Not Approved)

UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Swasthwritta & Yoga

College Phone No. :

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

College E-mail ID : **drnlayur@gmail.com**

Name of the Dean / Principal : **Dr. D.D.Ovar**

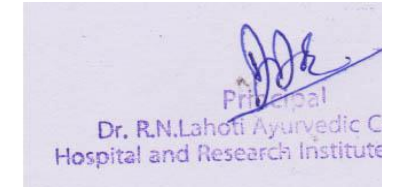
College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				

1	Dr.Sunil D. Tagalpallewar	Professor		9819149515	drsunitagalpallewar@gmail.com	13/05/1970	760871796601	ABSP T7551 J	BAMS, MD	13/08/2019	Open	12 Y		12Y		Regular	Temp
2	Dr.Manish M. Kanhed	Asso. Professor		9423024207	kanhedmanish@gmail.com	15/04/1983	343771971473	BUYP K6440 F	BAMS, MD	19/11/2019	Open	7 Y		7 Y		Regular	Temp
3	Dr. Sonali S. Kasarikar	Asst. Professor		9604840774		20/07/1988	759007044245	CXOP K8114 Q	BAMS, MD	26/06/2019	Open	1 Y		1 Y		Regular	Temp

Date:

Signature of College Co-ordinator



Annexure-V

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Panchkarma

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**


College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

College Website: **www.lahotiayur.in**

S	Full Name of the Teaching Staff	Designat				Adhar	Pan		Date of	Whet her belon	Teach exp.	Total Teachi	Total No. of	Type of Appoint ment	Type of a Univ
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1	Dr.Kawdu Sakharam Umare	Professor		9823786898	dr.umare@gmail.com	4/1/1958	461230629745		B.A.M.S. M.D.	7/16/2018	Open	33 Y -	33 Y -	Regular	Temp
2	Dr.Sanjay P. Thokare	Asst.Prof.		8177975944	drsanjaythokare@gmail.com	1/12/1988	999091185481	aorpt5516k	B.A.M.S. M.S.	29/07/2019	Open	04 Y -	04 Y	Regular	Temp


 Principal
 Dr. R.N.Lahoti Ayurvedic College
 Hospital and Research Institute
 Signature of Dean

Date:

Signature of College Co-ordinator

Annexure- 1

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCE, NASHIK
DETAIL INFORMATION OF UG APPROVED & PG RECOGNISED TEACHING STAFF
 UG Degree / PG Degree) AS ON :- / /20

Name of the dept. : Shalyatantra

Name of the College : **Dr.R.N.Lahoti Ayurvedic College, Hospital and Research Institute, Sultanpur.**

Name of the Dean / Principal : **Dr. D.D.Ovar**

College Phone No. :

College E-mail ID : **drnlayur@gmail.com**

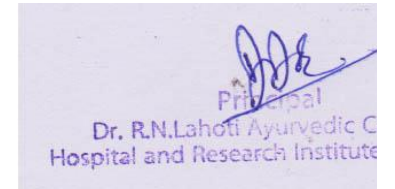
College Website: **www.lahotiayur.in**

S. N.	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Ph.No. (Resi)	Mob. No.	Email ID	Date of Birth	Adhar Card No.	Pan Card No.	Edu. Qua.	Date of Appointment	Whether belongs to reserved category	Teach exp.		Total Teaching Exp. In years	Total No. of Publication	Type of Appointment Temp./Regular/Contractual	Type of a Univ Temp/Regular
												UG Yrs	PG Yrs				
1	Dr.P.R.Dane	Professor		9423814549	drpdane@gmail.com				BAMS, MS	8/30/2021	Open	12	-	12	-	Regular	Temp

2	Dr.Swati S.Kendre	Asst.Pr of.		9422166392	sanapswati77@gmail.com	15/05/1985	1E+12	SVIPS 3555J	BAMS, MS	3/5/2021	Ope n	-		-		Regular	Temp
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Date:

Signature of College Co-ordinator



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Letter No.
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125119/284
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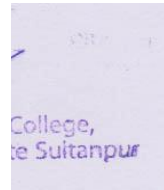
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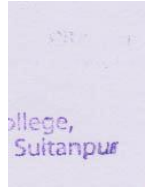


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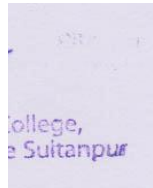
college,
Sultanpur

Approval by
University

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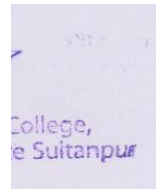
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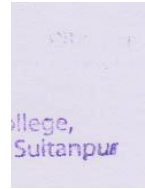


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University

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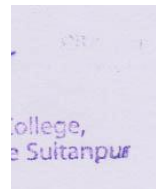
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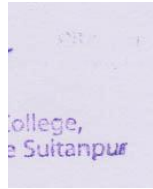
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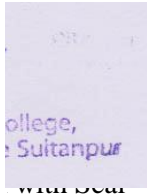
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VIII

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ersity

Letter No. & date
Awaited
MUHS/E- 3/UG&PG/ 125119/290 6/2021 Dt. 27/10/2021



VIII

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MUHS/E-
3/UG&PG/
125119/284
/2020 Dt.
01/02/2020

MUHS/E-
3/UG&PG/
125119/284
/2020 Dt.
01/02/2020

ollege,
Sultanpur
with seat

VIII

approval by
University

Letter No.
& date

Awaited

MUHS/E-
3/UG&PG/
125119/290
6/2021 Dt.
27/10/2021

college,
Sultanpur