


ANNEXURE - VI (a)

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON : / /

Faculty : Homoeopathy
 Name of College : KEM's Vihar Homoeopathic Medical College & Hospital

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity (UG) : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp./Regular			Letter No. & date
									Asst. Prof.	Asoc. Prof.	Prof.	Total								
1		Dr. Maneesha Soni	Principal	9326077405	maneesha.soni@gmail.com	25-04-1972	N	01-04-2024	15 Yrs.	10 Yrs.	-	25 Yrs.	Regular	No						

(Signature)
Secretary
 Kakan Education & Medical Trust's
 Vihar (S.D.) Dist: Raigad.




MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree(PG Degree/Ph.D) AS ON : / /

Faculty: Homoeopathy

Name of College: KEM's Virar Homoeopathic Medical College & Hospital

Whether UG/UG+PG : UG

College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			Letter No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Anatomy	Dr. Anuradha Satish Kamath	Professor	9620309752	anuradhasatish1410@gmail.com	14-10-1965	N	02.01.1996	5 yrs.	-	20Yrs	35 Yrs.	Regular	Yes MUHS/E4(UG) A103/A149/20 11 dt 08/10/2011						
2	Anatomy	Dr. Rohit Madhav Sane	Asst. Prof.	9867681215	rohitrane@sanet.com	01-09-1977	N	03.04.2000	24 Yrs.	-	-	24 Yrs.	Regular	Yes MUHS/E4(UG) A103/A149/20 11 dt 08/10/2011						
3	Anatomy	Dr. Karishma Sushil Satoskar	Asst. Prof.	8779434291	ksatoskar@igmail.com	04-03-1983	N	11-11-2024	2 mths	-	-	2 mths	Regular	No						

Signature of Principal with Seal

PRINCIPAL

KONKAN EDUCATION & MEDICAL TRUST'S
 VIRAR HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL

NARANGI BYPASS ROAD, VIRAR (EAST),




TAL: VASAL DIST: PALGHAR, PIN: 401305.

Faculty : Homoeopathy

Name of College : KEMT's Vihar Homoeopathic Medical College & Hospital

Whether UG/UG+PG : UG

College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Physiology	Dr. Manisha Peshant Sori	Asst. Prof.	8528073405	manishasori@atriil.com	25-04-1972	No	25-02-2014	15 Yrs.	10 Yrs.	-	25 Yrs.	Regular	Yes MUHS/UG/E 4/4205/804/20 20 dt. 31/07/2020		Yes 8708/2023 to 09/08/2023				
2	Physiology	Dr. Neeman Ansari	Asst. Prof.	9683446431	naumanbestn theworld7@vivo hoo.com	02-08-1994	No	05-12-2023	1 Yr	-	-	1 Yr.	Regular	Yes MUHS-E- 4/UG/ 141103/175/20 23 dt. 23/01/2024						
3	Physiology	Dr. Bestina Denny	Asst. Prof.	7507300490	dr.bestina897 @gmail.com	08-01-1997	No	11-11-2024	2 mths	-	-	2 mths	Regular	No						

Signature of Principal with Seal



PRINCIPAL

KEMTAN EDUCATION & MEDICAL TRUST'S
 HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 NARANGI BYPASS ROAD, VIKAR WADI,
 TAL: VASHI, DIST: PRAKASH, MH-401305.

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON: / /

Faculty: Homeopathy
 Name of College: KEMT's Vira Homeopathic Medical College & Hospital

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature
									UG (yrs.)							Temp./Regular	Letter No. & date		
									Asst. Prof.	Asso. Prof.	Prof.	Total							
1	Pharmacy	Dr. Atul Suresh Umaye	Asst. Prof.	9860775307	limaye16@vira-hoo.com	28-10-1979	NO	01-04-2021	5 Yrs.	2 Yrs.	5 Yrs.	Regular	MUHS/E-4/LH/141103/175/2023 & 23/01/2024			Yes 07/08/2023 to 08/08/2023	 <i>Atul Umaye</i>		
2	Pharmacy	Dr. Deepali Devshi Bhanushali	Asst. Prof.	7977958193	deepalibhanushali40@gmail.com	05-11-1995	NO	02-08-2021	2 Yrs.		2 Yrs.	Regular	MUHS/E-4/LH/141103/175/2023 & 23/01/2024			Yes 27/02/2019 to 01/03/2019 & 07/08/2023 to 09/08/2023	 <i>Deepali</i>		

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PRINCIPAL
 KONKAN EDUCATION & WELFARE TRUST'S
 VIRAR HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 NARANGI STRAY, VIRAR, DIST. PALGHAR, PIN-401305.
 TEL: VIRAR DIST. PALGHAR, PIN-401305.

ANNEXURE - VI (a)

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON : / /

Faculty : Homoeopathy
 Name of College : KEMT's Vira Homoeopathic Medical College & Hospital

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature
									UG (Yrs.)							Temp./Regular/Contractual	Letter No. & date		
									Asst. Prof.	Asso. Prof.	Prof.	Total							
1	HMM	Dr. Chandrakala Karpooiah Thevar	Asso. Prof.	9823606343	dr.chandrakala@vra.hop.com	24-11-1981	N	01-02-2016	7 Yrs.	7 Yrs.	-	14 Yrs.	-	Regular	Yes MUHS/UG/VE 4/4206/80450 20 dt. 31/07/2020	Yes 07/08/2023 to 09/08/2023	 <i>Chandrakala</i>		
2	HMM	Dr. Shruti Mohi Thakkar	Asst. Prof.	9004132112	dr.shruti.p85@gmail.com	03-08-1985	N	05-03-2024	10 Mths	-	-	10 mths	-	Regular	No		 <i>Shruti</i>		
3	HMM	Dr. Pallavi Nitesh Aher	Asst. Prof.	9887541613	aher.pallavi06@gmail.com	06-09-1979	N	18-09-2024	4 mths.	-	-	4 mths.	-	Regular	No		 <i>ah</i>		



Signature of Principal with Seal

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PRINCIPAL
 KONKAN EDUCATION & MEDICAL TRUST'S
 VIRAR HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D. AS ON: / /

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity : 75

Faculty : Homoeopathy
 Name of College : KEMT's Vihar Homoeopathic Medical College & Hospital

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (if Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			Letter No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Medicine	Dr. Himangi Anil Resai	Asst. Prof.	9822932640	himangi@kemt.edu.in	15-04-1978	N	08-10-2020	9 Yrs.	4 Yrs.	13 Yrs.	Regular	Yes MUHS(UG)/E 414206/804/20 20 dt. 31/07/2020		Yes 07/04/2023 to 09/06/2023					
2	Medicine	Dr. Pramal Rajesh Sewart	Asst. Prof.	9022288062	pramal@kemt.edu.in	02-11-1991	N	12-04-2021	2 Yrs.		2 Yrs.	Regular	Yes MUHS(E-4/ UG/ 4103/141103/1 061/2023 dt. 13/06/2023							

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PRINCIPAL
 KONKAN EDUCATION & MEDICAL TRUST'S
 VIHAR HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 NARANGI, TAL: VASAL, DIST: PALGHAR, PIN: 401305

ANNEXURE - VI (a)



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON :

Faculty: Homoeopathy

Whether UG/UG+PG : UG

Name of College : KEMT's Virar Homoeopathic Medical College & Hospital

College Code : 4103 Intake Capacity : 75





Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			Letter No. & Date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Pathology	Dr. Samir Ashok Joshi	Asso. Prof.	9224325175	samir03@gmail.com	09-06-1975	N	02-06-2011	11 Yrs.	13 Yrs.	-	24 Yrs.	-	Regular	Yes MUHS/E4(UG) K1034148/20 11 dt. 08/10/2011		Yes 07/08/2023 to 09/08/2023	 SA-Joshi		
2	Pathology	Dr. Pooja Mukund Daphal	Asst. Prof.	9619039197	pooking_grB@rediffmail.com	09-05-1967	N	01-09-2014	8 Yrs.	-	-	8 Yrs.	-	Regular	Yes MUHS(UG)E 44208/804/20 20 dt. 31/07/2020		Yes 07/08/2023 to 09/08/2023	 Pooja Daphal		

Signature of Principal with Seal

PRINCIPAL
 KONKAN EDUCATIONAL MEDICAL TRUST'S
 VIRAR HOMOEOPATHIC COLLEGE & HOSPITAL
 HARANGI, VIRAR (E-457),
 TAL: VASAI, DIST: PALGHAR, PIN: 401305.

Faculty : Homeopathy
 Name of College : KEMT's Vihar Homeopathic Medical College & Hospital

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp./Regular			Letter No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Organon	Dr. Gautam Panchand Arora	Professor	802079665	g.arora@hotmail.com	06-09-1968	No	16-04-2023	0 Yrs.	38 Yrs.	3 Yrs.	27 Yrs.	-	Regular	Yes MUHS/E-4/UG/141103/175/2023 dt. 23/01/2024		No	 Gautam Arora		
2	Organon	Dr. Kavita Pradep Manjrekar	Asst. Prof.	9664731125	kavitadr82@yahoo.com	25-09-1982	No	20-01-2014	5 Yrs.	8 Yrs.	-	14 Yrs.	-	Regular	Yes MUHS/E-4/UG/141103/175/2023 dt. 23/01/2024		No	 Kavita Manjrekar		
3	Organon	Dr. Tejas Ramesh Trivedi	Asst. Prof.	855067181	drtejasrivedi@gmail.com	26-12-1978	No	20-05-2007	17 Yrs.	-	-	17 Yrs.	-	Regular	Yes MUHS/E/UG/4103/4146/2011 dt. 06/10/2011		No	 Tejas Trivedi		
4	Organon	Dr. Snehl Tushar Patel	Asst. Prof.	9869030278	snehlswai@hotmail.com	28-12-1975	No	01-06-2024	8 mths	-	-	8 mths	-	Regular	No		Yes	 Snehl Patel		

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 Signature of Principal with Seal




MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON: / /

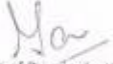
Faculty: Homeopathy

Name of College: KEMT's Virar Homeopathic Medical College & Hospital

Whether UG/UG+PG : UG

College Code : 4103 Initial Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp./Regular			Letter No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Repertory	Dr. Geshi Surendra Agrawal	Asso. Prof.	9903056734	dr.geshi123@gmail.com	08-12-1975	N	02-03-2009	5 Yrs.	3 Yrs.	2 Yrs.	-	Regular	Yes MUHS/UG/VE 44206/004/20 20 dt. 31/07/2020				 Geshi		
2	Repertory	Dr. Sushil Anandkumar Jain	Asst. Prof.	9821409188	jain_sushil8@gmail.com	08-04-1990	N	18-03-2020	3 Yrs.		3 Yrs.	-	Regular	Yes MUHS/UG/VE 44206/004/20 20 dt. 31/07/2020				 Sushil		
3	Repertory	Dr. Mansha Devendra Yadav	Asst. Prof.	8451022747	manshayadav1255@gmail.com	09-03-1995	N	02-12-2024	2 Yrs.		2 Yrs.	-	Regular	No				 Mansha		


 Signature of Principal with Seal

PRINCIPAL
 HAN EDUCATION & MEDICAL TRUST'S
 HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 NARANGI BYPASS ROAD, VIRAR
 TAL: VASAL, DIST: PALGHAR, PIN: 401305



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree(Ph.D) AS ON :


Faculty: Homoeopathy

Whether UG/UG+PG : UG

Name of College : KEMT's Vihar Homoeopathic Medical College & Hospital

College Code : 4103 Intake Capacity : 70

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			Letter No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	FMT	Dr. Ravl Mahesh Doctor	Asso.Prof.	9820167645	ravidocotr55@gmail.com	18-10-1974	No	15-02-2017	19 Yrs.	7 Yrs.	-	26 Yrs.	Regular	Yes MUHS/UGVE 4/4205/80420 29 dt. 31/07/2020						
2	FMT	Dr. Uday Ramesh Thombare	Asst. Prof.	9226197351	udaythombare3065@gmail.com	27-09-1975	No	34-02-2012	12 Yrs.	-	-	12 Yrs.	Regular	Yes MUHS/E- 4/UG/ 141103/1061/2 023 dt. 13/06/2023						


 Signature of Principal with Seal

PRINCIPAL
 KRAN EDUCATION & MEDICAL TRUST'S
 HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 NANANGI BYPASS ROAD, NANANGI
 TAL: VASAL, DIST: PALGHAR, PIN: 401305.

ANNEXURE - VI (a)

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON : / /

Faculty : Homoeopathy
 Name of College : KEMT's Vihar Homoeopathic Medical College & Hospital

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature
									UG (yrs.)							Regular	Letter No. & date		
									Asst. Prof.	Assoc. Prof.	Prof.	Total							
1	Surgery	Dr. Jayanti Aji Chikani	Professor	9022133755	driyantiakulkarni@gmail.com	07-12-1975	N	15-10-2021	7 Yrs.	4 Yrs.	2 Yrs.	14 Yrs.	Regular	Yes MUHS/E-4/UG/ 141103/175/20 23 dt 23/01/2024		Yes 07/08/2023 to 08/08/2023			
2	Surgery	Dr. Abbas Bekir Engineer	Asst. Prof.	7208420471	abseng3891@gmail.com	28-04-1985	N	04-04-2022	1 Yr.			2 Yrs.	Regular	Yes MUHS/E-4/ UG/ 4103/141103/1 06/1/2023 dt 13/06/2023		Yes 07/08/2023 to 08/08/2023			

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 Signature of Principal with Seal

PRINCIPAL
 KAN EDUCATION & MEDICAL TRUST'S
 HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 NARANJI BYPASS ROAD, VILAS (EAST),
 TAL: VASAL, DIST: PALGHAR, PIN: 401305.

ANNEXURE - VI (A)




MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON : / /

Faculty : Homoeopathy

Name of College : KEMT's Vihar Homoeopathic Medical College & Hospital

Whether UG/UG+PG : UG

College Code : 4103 Intake Capacity : 75

Sr. No	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			Letter No. & date
									Asst. Prof.	Asso. Prof.	Prof.	Total								
1	Gyn/Obst.	Dr. Shilpa Kahu Mahajan	Asst. Prof.	9323719871	shlpmahajan@gmail.com	07-01-1975	N	25-02-2014	13 yrs.	9 yrs.	22 yrs.	-	Regular	Yes MUHS/UG/PG 44206/804/20 20 th 21/07/2020				 Shilpa Mahajan		
2	Gyn/Obst.	Dr. Satish Rampravesh Dubey	Asst. Prof.	8923879186	satish24061982@gmail.com	07-03-1982	N	25-02-2014	9 yrs.		9 yrs.	-	Regular	Yes MUHS/UG/PG 4103/141103/1 09/1/2023 dt. 13/08/2023				 Satish Dubey		
3	Gyn/Obst.	Dr. Veishnavi Sawant	Asst. Prof.	8980528842	dr.sawantvaishnavi@gmail.com	06-05-1995	N	19-06-2024	7 mths		7 mths	-	Regular	No				 Sawant		




Signature of Principal with Seal

PRINCIPAL
 KEMT'S VIHAR EDUCATION & MEDICAL TRUST'S
 HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)
 UG Degree/PG Degree/Ph.D) AS ON :

Faculty: Homeopathy
 Name of College: KEMT's Virar Homeopathic Medical College & Hospital

Whether UG/UG+PG : UG
 College Code : 4103 Intake Capacity : 75

Sr. No.	Subject Name	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to reserved category (If Yes, specify category)	Date of appointment	Teaching Experience				Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of PG Teacher Recognition by MUHS (Yes/No)		MET Workshop done in last five years Yes/No Give details	Photograph with Signature	
									UG (yrs.)							Temp./Regular/Contractual	Temp/Regular			Letter No. & date
									Assl. Prof.	Asst. Prof.	Prof.	Total								
1	PSM	Dr. Dinesh Manikrao Shinde	Professor	9328187334	droideshbhasme@gmail.com	28-09-1966	N	09-06-2004	-	-	20 Yrs.	20 Yrs.	-	Regular	Yes MUHS(E4/UG) 44103/148/2011 dt. 08/10/2011					
2	PSM	Dr. Rupali Sankesh Gotha	Asst. Prof.	9619291281	rupaligesha.dr@gmail.com	30-07-1982	N	14-11-2018	5 Yrs.	-	-	5 Yrs.	-	Regular	Yes MUHS(UG/E 44206/804/2020 dt. 31/07/2020		Yes 07/08/2023 to 09/08/2023			
3	PSM	Dr. Varada Vishal Phule	Asst. Prof.	8978188880	drvaradephule@gmail.com	01-01-1983	N	01-07-2024	6 mths	-	-	6 mths	-	Regular	No					

Signature of Principal with Seal

PRINCIPAL
 KONKAN EDUCATION & MEDICAL TRUST'S
 VIRAR HOMOEOPATHIC MEDICAL COLLEGE & HOSPITAL
 HARANGI BYPASS ROAD, VIRAR (EAST),
 THANE DIST. RAJGAD