

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK  
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

" NOT APPLICABLE "

Name of the 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	E-mail ID	Mobile No.	Aadhar Card No.	If Debarred (Yes/No)	Sign. of Teacher
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*B.K.L. Walawalkar*  
Principal  
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College of Physiotherapy  
Kasarwadi - Sawarde