

MAHARASHITRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved
+ Not Approved)

UG Degree/ PG Degree) AS ON: /..... /.....

Faculty: Physiotherapy




Subject : Electrotherapy & Electrodiagnosis

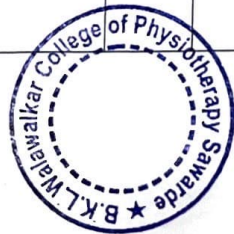
Whether UG :Yes

Name of College: **B.K.L.Walawalkar College of Physiotherapy** College Code:161115 Intake Capacity 40

- Note: The College shall submit one hard copy & soft copy (in Excel Format) of the list from Academic Online Teacher Database (OTD).

Electrotherapy & Electrodiagnosis:

S. N.	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)		Photograph with Signature	
								UG (yrs)							Temp./Regular Contractual	Temp/Regular		Letter No. & date
								Asst. prof.	Asso. Prof.	Prof.	Total							
1	Dr.Chandrasekar L	Principle	9597950443	principalbklcopt@gmail.com	28-04-1976	Open	23/08/2023	16	-	8.7	24.7	4.5	Regular	Yes	MUHS/UG/E-6/2214/2023 Dated-16/10/2023	N.A.		
2	Dr.Satyajit K	Assistant Professor	7414994524	www.satyajit.kumbhar@gmail.com	14-08-1987	OBC	27-08-2021	2.5	-	-	2.5	-	Regular	MUHS/UG/E-6/2592/2022 Dated-05/12/2022	N.A.			
3	Dr.Rashmi S	Assistant Professor	8586085427	dr.rashmi0405@gmail.com		Open	16-10-2023	0.3	-	-	0.3	-	Regular	In process	N.A.			



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Signature of Dean / Principal
Principal
B.K.L. Walawalkar
College of Physiotherapy

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UG Degree/ PG Degree) AS ON: /..... /.....

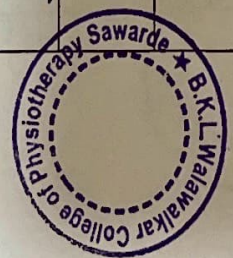
Faculty: Physiotherapy Subject : Physiotherapy in Musculoskeletal Sciences Whether UG : Yes

Name of College: B.K.L.Walawalkar College of Physiotherapy College Code:161115 Intake Capacity 40

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Physiotherapy in Musculoskeletal Sciences:

S N	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)		Photograph with Signature		
								U G (yr s)	Asst prof	Asso Prof	Prof.				Total	Temp./Regular Contractual		Temp/ Regular	Letter No. & date
1	Dr.Sedhuraja M	Professor	9994023549	mstedhu2010@gmail.com	29-11-1980	Open	03-12-2021	3.7	2.4	4.2	12.3	10.1	Regular	In process	N.A.		 <i>M. Sedhuraja M.</i>		
2	Dr.Meghana P	Associate Professor	8999098176	drmeghana4280@gmail.com	04-02-1980	Open	01/03/2019	5	3.2	-	8.3	2	Regular	MUHS/UG/E-6/2592/2022 Dated-05/12/2022	N.A.		 <i>Meghana P.</i>		
3	Dr.Roopa Rao	Assistant Professor	9987228799	rp1234ram@gmail.com	19-11-1984	Open	31-08-2023	3.4	-	-	3.4	-	Regular	In process	N.A.		 <i>Roopa Rao</i>		



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 Signature of Dean / Principal
 Principal

B.K.L. Walawalkar
 College of Physiotherapy
 Kasarwadi, Sawarde




MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
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UG Degree/ PG Degree) AS ON: /..... /.....

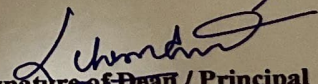
Faculty: Physiotherapy **Subject : Physiotherapy in Neuro Sciences** **Whether UG :Yes**
Name of College: B.K.L.Walawalkar College of Physiotherapy **College Code:161115** **Intake Capacity 40**

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Physiotherapy in NeuroSciences:

S. N.	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)		Photograph with Signature
								UG (yrs)							Temp./Regular Contractual	Temp/Regular	
								Asst. prof.	Asso. Prof.	Prof.	Total						
1	Dr.Divya J	Professor	9426784527	drdivya.2710@gmail.com	27-10-1985	Open	01-04-2022	5.4	4.1	1.9	11.2	4.1	Regular	MUHS/UG/E-6/2592/2022 Dated-05/12/2022	N.A.		
2	Dr.Nishu Sharma	Associate Professor	9557564154	nishu1919@gmail.com	19-10-1987	Open	03-11-2022	8.2	1.1	0.3	9.3	8.2	Regular	In process	N.A.		
3	Dr.Shunmugapriya	Associate Professor	9677423937	kpspphysio@gmail.com	14-11-1975	Open	15-02-2024	6	9	5	17	-	Regular	In process	N.A.		




Signature of Dean / Principal
B.K.L. Walawalkar
College of Physiotherapy
Kasarwadi - Sawarde

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UG Degree/ PG Degree) AS ON:/...../.....

Faculty: Physiotherapy Subject : Cardiovascular and Respiratory Physiotherapy Whether UG :Yes

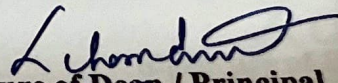
Name of College: B.K.L.Walawalkar College of Physiotherapy College Code:161115 Intake Capacity 40

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Cardiovascular and Respiratory Physiotherapy:

S. N.	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)		Photograph with Signature	
								UG (yrs)							Temp/Regular Contractual	Temp/Regular		Letter No. & date
								Asst. prof.	Asso. Prof.	Prof.	Total							
1	Dr.Asma Sharma	Associate Professor	8006246478	aasma.sharma@gmail.com	10-04-1983	Open	21-04-2023	5	2.2	-	7.2	-	Regular	MUHS/UG/E-6/2214/2023 Dated-16/10/2023	N.A.			
2	Dr.Sarita	Assistant Professor	9407514784	sarita.bklp@gmail.com	31-08-1988	Open	18-12-2023	4	-	-	4	-	Regular	In process	N.A.			




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 Principal
 B.K.L. Walawalkar
 College of Physiotherapy
 Sawarde - Sawarde

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UG Degree/ PG Degree) AS ON: /..... /.....

Faculty: Physiotherapy



Subject : Community Physiotherapy

Whether UG :Yes

Name of College: B.K.L.Walawalkar College of Physiotherapy College Code:161115 Intake Capacity 40

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Community Physiotherapy:

S. N.	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)		Photograph with Signature	
								UG (yrs)							Temp./Regular Contractual	Temp/Regular		Letter No. & date
								Asst. prof.	Asso. Prof.	Prof.	Total							
1	Dr. Shanthi L	Associate Professor	9597597422	shantippcop21@gmail.com	28-01-1976	Open	23-08-2023	3.7	6.10	-	10.5	-	Regular	MUHS/UG/E-6/2215/2023 Dated-16/10/2023	N.A.			
2	Dr. Devika	Assistant Professor	8999093947	devikashah96@gmail.com	03-08-1996	Open	30-09-2023	0.4	-	-	0.4	-	Regular	In process	N.A			



Signature of Dean / Principal
Signature of Dean / Principal

Principal
B.K.L. Walawalkar
College of Physiotherapy
Kasarwadi - Sawarde

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 + Not Approved)

UG Degree/ PG Degree) AS ON: /..... /.....

Whether UG :Yes


Faculty: Physiotherapy

Subject : Kinesiotherapy & Physical Diagnosis

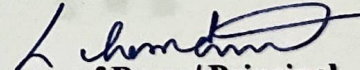
Name of College: B.K.L.Walawalkar College of Physiotherapy College Code:161115 Intake Capacity 40

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Kinesiotherapy & Physical Diagnosis:

S. N.	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)		Photograph with Signature
								UG (yrs)							Temp./Regular Contractual	Temp/Regular	
								Asst. prof.	Asso. Prof.	Prof.	Total						
1	Dr.Rutuja Avaghade	Assistant Professor	7972910882	rutuavaghade@gmail.com	15-03-1998	SC	01-10-2023	0.3			0.3	Regular	MUHS/UG/E-6/2214/2023 Dated-16/10/2023	N.A			




 Signature of Dean / Principal
 Principal
 B.K.L. Walawalkar
 College of Physiotherapy
 Kasarwadi - Sawarde