ANNEXURE-I

PROFORMA TO FURNISH THE DETAILS OF TEACHING STAFF

Sr. No.	Teacher Code	Full Name of the Teaching Staff	Fathers Name	Date of Birth	Mob. No.	E-mail ID	Designation	Date of Appointment	UG Qualification & Year	PG Qualification & Year	Teacher Experience					Total Teaching Exp. in years of PG	Nature of Temp./ Regular/ Contractual	Local Address	Permanat Addrerss	Photograph of teacher	Signature of teacher	Verification by visitors
											UG											
											Duration	Designation	Name of the college	Dept	Total							
2	AYPK00388	Dr. DNYANESHWAR MACCHINDRANATH MITKE	MACCHINDRANATH MITKE	05/Apr/1982	9423814843	dnyaneshayurvedmandir@gmail.com	READER	17/Nov/2022	BAMS (RGUHS 2007)	MD(PANCHAKARMA) (RGUHS 2016)	17/Nov/2017 TO 16/11/2022	ASST PROF	JES MADAC YEOLA	PANCHA KARMA	07 Yrs 04 Month 03 days		Regular	near sonawane hospital ayurved mandir mahatma phul yeola	near sonawane hospital ayurved mandir mahatma phul yeola			
											17/Nov/2022 TO Till Date	ASSO PROF	JES MADAC YEOLA	PANCHA KARMA								

Signature of Principal with date