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	Local Address	Permanat Addrerss	Photograph of teacher	Signature of teacher	Verification by visitors
											UG						Temp./ Regular/ Contractual					
											Duration	Designation	Name of the college	Dept	Total							
4	AYST01070	Dr. Kiran Madhukar Sadgir	Madhukar Sadgir	21/Dec/1991	7276103828	kiransadgir22@gmail.com	READER	02/Dec/2024	BAMS MUHS 2014	MS (SHALYA) MUHS 2018	04/Nov/2019 TO 01/Dec/2024	ASST PROF	MADAC YEOLA	SHALYA	05 Yrs 04 Month 03 days		Regular	Shikshak colony Chandwad Road Behind Sagale Lawns Ganesh Nagar Manmad	Shikshak colony Chandwad Road Behind Sagale Lawns Ganesh Nagar Manmad			
											02/Dec/2024 TO Till Date	ASSO PROF	MADAC YEOLA	SHALYA								

Signature of Principal with date