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 UG: Duration	Designation	Name of the college	Dept	Total	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
5	AYST02418	Dr. SAGAR RAVINDRA KOLHE	RAVINDRA KOLHE	07/Oct/1982	9226890587	drsagarkolhe1982@gmail.com	READER	23/Oct/2023	BAMS MUHS 2005	MS (SHALYA) MUHS 2010	23/Jan/2012 TO 14/Jun/2014	ASST PROF	DAMC BELGAVI	SHALAKYA	07 Yrs 00 Month 03 days		Regular	HANUMAN NAGAR, MALEGAON ROAD, MANMAD TAL. NANDGAON, DIST. NASHIK	HANUMAN NAGAR, MALEGAON ROAD, MANMAD TAL. NANDGAON, DIST. NASHIK			
											23/Jun/2014 TO 30/Nov/2016	ASST PROF	MADAC YEOLA	SHALAKYA								
											02/May/2021 TO 02/Feb/2022	ASST PROF	SCAR KOPARGAON	SHALAKYA								
											21/Oct/2023 TO 22/Oct/2023	ASST PROF	MADAC YEOLA	SHALYA								
											23/Oct/2023 TO Till Date	ASSO PROF	MADAC YEOLA	SHALYA								

Signature of Principal with date