

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 Address	Photograph of teacher	Signature of teacher	Verification by visitors
											UG											
											Duration	Designation	Name of the college	Dept	Total							
2	AYRS00642	Dr.Sujata Sampatrnno Ghuge	SAMPATRAO GHUGE	03.11.1990	9579373762	dr.sujataghuge2015@gmail.com	Reader	01.04.2023	BAMS (MUHS NASHIK 2014)	MD(RACHANA SHARIR) (MUHS NASHIK 2019)	04.06.2019 to 31.03.2023	ASST PROF	AAC BEED	RACHANA	5 Yrs 9 Month 06 days	Regular	MS QUARTER, LAXMI NAGAR KOPARGAON	AT POST KEHAL TAQ JINTOOR JINTUR PARBHANI				
01.04.2023 to 04.06.2024	ASST PROF	MADAC YEOLA	RACHANA																			
05.06.2024 to Till DATE	ASSO PROF	MADAC YEOLA	RACHANA																			

Signature of Principal with date