

व्यक्तसचित

## महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

## Maharashtra University of Health Sciences, Nashik

दिहोरी चेंड, म्ह्मरुळ, नाशिक - ४२२००४, Dindon Road, Mhasrul, Nashik-422 004 Tel : (0253) 2539325/6659325, 268 Student Helpline : (0253) 2539111/6659111

Website: www.muhs.ac.in, E-mail: academicallied@muhs.ac.in

डॉ. राजेंद्र शिवाजी बंगाळ

एम औ. थी. एम, एम. डी.(न्यायर्वेटक्सास्य),डी. एन. थी., एल. एल औ

M.B.B.S. M.Ď.(Forensic Medicine), D.N.B. L.L.B. Registrar

Out No.: MUHS/UG/E-6/ 1047 /2023

Date: 07/06/2023

Dr. Rajendra Shivaji Bangal

### [Temporary approval for the post(s) of Open Category]

To
The Principal,
Aadivasi Devmogra Education Society's,
K. D. Gavit College of Physiotherapy,
Patharai,
Tal. & Dist. Nandurbar – 425 442

Sub.

Temporary Approval to the Appointment of Teacher(s).

Ref.

1) University Direction No. 01/2017 dated 13/04/2017

2) Your letter No. ADES/Phy/Acad/29/2023 dated 30/05/2023

Sir/Madam.

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment of the following teachers have been considered by the University and it has been decided to grant the approval, as indicated below & subject to the following conditions:-

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Kinesiothwerapy & Physical Diagnosis	Mr. Mahesh S.	Principal cum Professor	w.e.f. 29/05/2023 for two years only
2	Physiotherapy in Cardiovascular & Respiratory Sciences	Mr. Karthik V	Professor	w.e.f. 29/05/2023 for two years only
3	Physiotherapy in Cardiovascular and Respiratory Sciences	Mr. Rathinasabapathy	Associate Professor	w.e.f. 29/05/2023 for two years only
4	Physiotherapy in Musculoskeletal Sciences	Mr. S. Gerald Edwin Raj	Associate Professor	w.e.f. 29/05/2023 for two years only
5	Physiotherapy in Cardiovascular and Respiratory Sciences	Mr. Jadav Prakash Gangarambhai	Assistant Professor/ Lecturer	w.e.f, 29/05/2023 for two years only
6	Physiotherapy in Community	Mr. Ghoghari Bhaskar Devjibhai	Assistant Professor/ Lecturer	w.e.f. 29/05/2023 for two years only
7	Physiotherapy in Neurosciences	Mr. Borade Prakash Subhash	Assistant Professor/ Lecturer	w.e.f. 29/05/2023 for two years only

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
8	Physiotherapy in Musculoskeletal Sciences	Ms. Wasave Shraddha Amit	Assistant Professor/ Lecturer	w.e.f. 29/05/2023 for two years only

- 1) The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- 2) The approval is granted by the University is valid till the above said teacher is in the services (teaching) of the said College or attains the age of superannuation, whichever happens earlier.
- 3) A copy of this letter may be handed over to concerned Teacher.



## महाराष्ट्र आरोग्य विद्यान विद्यापीठ, नाशिक

## Maharashtra University of Health Sciences, Nashik

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Website: www.muhs.ac.in, E-mail: academicallied@muhs.ac.in.

डॉ. राजेंद्र शिवाजी बंगाळ

Dr. Rajendra Shivaji Bangal एम. भी. थी. एस. एस. डी. ( स्वायदेशकमान्य ), डी. एस. यी., एस. एस. सी. M.B.B.S. M.D.( Forensic Medicine), D.N.B. L.L.B.

कलसचिव

Registrar

MUNIS MUNIS

Out No.: MUHS/UG/E-6/ 12 79 /2023

Date: 10 / 07/2023

### Temporary approval for the post(s) of Open Categoryi

To.

The Principal.

Aadivasi Devmogra Education Society's. K. D. Gavit College of Physiotherapy, Patharai.

Tal. & Dist. Nandurbar - 425 442

Temporary Approval to the Appointment of Teacher(s).

Ref . 1) University Direction No. 01/2017 dated 13/04/2017

Your letter No. ADES/phy/Acad/56/2023 dated 19/06/2023.

Sir/Madam.

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment of the following teachers have been considered by the University and it has been decided to grant the approval, as indicated below & subject to the following conditions:-

Sr. No	Subject	Name of the Teacher	Designation	Status of Approval
1	Physiotherapy in Musculoskeletal Sciences	Mr. K Venkatanaga Prahalada	Professor	w.e.f. 19/06/2023 for two years only

- The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- The approval granted by the University is valid till the above said teacher is in the services (teaching) of your College or attains the age of superannuation, whichever happens earlier. However, it is mandatory to prepare the Reservation Roster and get it approved from the appropriate authorities & fill up the post permanently as early as possible.
- This temporary approval is granted subject to the rules and regulations of the University, from time to time, and shall be liable to be cancelled or amended, at any time, without prior notice.
- A copy of this letter may be handed over to concerned Teacher.



## महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

## Maharashtra University of Health Sciences, Nashik

दिहोरी पोड, ग्रमफळ, नाशिक - ४२२००४, Dindon Road, Mhasrul, Nashik- 422 004 Tel : (0253) 2539198 / 6659198, 268 Student Helpline : (0253) 2539111 /6659111

Website: www.muhs.ac.in, E-mail: academicallied@muhs.ac.in

### डॉ. राजेंद्र शिवाजी बंगाळ

एम नी.नी.एस, एम ही (न्यावदेशकागान्त्र),ही एन नी, एस.एस.वी.

कुलसचिव

Dr. Rajendra Shivaji Bangal M.B.S., M.D. (Forensic Medicine), D.N.B. L.L.B.

Registrar

Out No.: MUHS/UG/E-6/1048/2023

Date: 67 /05/2023

06

[Temporary approval against the reserved post(s)]

To

The Principal,

Aadivasi Devrnogra Education Society's, K. D. Gavit College of Physiotherapy, Patharai.

Tal. & Dist. Nandurbar - 425 442

Sub.

Temporary Approval to the Appointment of Teacher(s).

Ref.

1) University Direction No. 01/2017 dated 13/04/2017

2) Your letter No. ADES/Phy/Acad/29/2023 dated 30/05/2023

#### Sir/Madam.

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment against the reserved posts of the following teacher(s) has / have been considered by the University and it has been decided to grant the approval, as indicated below:-

Sr. No.		Name of the Teacher	Designation	Status of Approval
1	Electrotherapy & Electrodiagonis	Ms. Mori Ulka Vajubhai	Assistant Professor / Lecturer	w.e.f. 29/05/2023 for one year only against SC category

- The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- 2) The selection, appointment and approval granted against the reserved post due to non-availability of candidate of concerned category, for which the post is reserved, is only for the sake of continuation of educational activities of the admitted students and it is mandatory to advertise the reserved post minimum two times in one academic year.
- 3) This temporary approval shall be automatically cancelled when the duly appointed candidate of the concerned category, for which the post is reserved, assumes the duty. However, it is mandatory to prepare the Reservation Roster and get it approved from the appropriate authorities & fill up the post permanently as early as possible.



## महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

Maharashtra University of Health Sciences, Nashik

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Website: www.muhs.ac.in, E-mail: academic2@muhs.ac.in

डॉ. राजेंद्र शिवाजी बंगाळ

एम बी.बी.एस, एम.डी.(न्यायवैद्यक्तास्य),डी.एन.बी, एल.एस बी.

Dr. Rajendra Shivaji Bangal M.B.B.S. M.D.(Forensic Medicine), D.N.B. L.L.B.

Registrar

Out No.: MUHS/UG/E-6/ 2114 /2022

Date:0 | /1 | /2022

## Temporary approval for the post(s) of Open Category

To

The Principal,

Aadivasi Devmogra Education Society's, K. D. Gavit College of Physiotherapy,

Patharai,

Tal. & Dist. Nandurbar - 425 442

Sub.

Temporary Approval to the Appointment of Teacher(s).

Ref.

1) University Direction No. 01/2017 dated 13/04/2017

University letter No. MUHS/SC-PT/50/2020 dt 15/01/2020

Your letter No. ADEH/PHY/36/2022 dated 13/10/2022.

### Sir/Madam,

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment of the following teachers have been considered by the University and it has been decided to grant the approval, as indicated below & subject to the following conditions:-

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Kinesiotherapy & Physical Diagnosis	Mr. Senthil S.	Principal cum Professor	w.e.f. 13/10/2022 for two years only
2	Kinesiotherapy & Physical Diagnosis	Mr. Bagul Akshay Mitharam	Assistant Professor / Lecturer	w.e.f. 13/10/2022 for two years only
3	Electrotherapy & Electrodiagnosis	Mr. Sonar Swapnil Sanjay	Assistant Professor / Lecturer	w.e.f. 13/10/2022 for two years only

- The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- 2) The approval granted by the University is valid till the above said teacher is in the services (teaching) of your College or attains the age of superannuation, whichever happens earlier. However, it is mandatory to prepare the Reservation Roster and get it approved from the appropriate authorities & fill up the post permanently as early as possible.

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) UG Degree) AS ON: 22/01/2024

Faculty: PHYSIOTHERAPY

Subject- Musculoskeletal physiotherapy

Whether UG ...../ UG+PG.....

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

S. N.	Name of the Teaching	Designation	SUBJECT SPECIALIT Y	Ma b. N	E-mail ID	Date of Birth	Whether belongs to	Date of appointme nt	Tea	ching Ex	eperien	ce	Tot al Teach	Type of Appointm ent	Univers ity Approv	te	lls of PG acher mitionby	Photographwit Signature
	Staff			0.	4		Reserved category (if			t/G (	(yrs)		ing Exper I ence	04410	al Status [Yes/N	M	IUHS IS/No	
1	200-200	Section of the Control of the Contro					Yes, specif Y category		Asst. prof.	Asso. Prof.	Prof.	Total	in years of PG	Temp./Regular Contractual	0)	Temp/ Regular	The second secon	
1	Dr. K Venkatanga Prahalada	Professo r	Musculos keletal physiothe rapy	94 91 85 58 55	Venkat _dr200 2@yah oo.co.in	10/10 /1979	NO	15/06/2 023	10.8		6.5	17.3		Regular	YES	Tem p	MUH S/UG /E- 6/10 47/2 023	
2	Dr.S Gerald Edewin	Associat e professo r	Musculos keletal physiothe rapy( sports)	98 65 39 76 87	Jery1809 Mgmail.c gm	18/09 /1975	NO.	29/05/2 023	1 Y. 8 M 18 D	8 Y		9 Y8 M 18 D		Regular	Yes	T'em p	MUH S/UG /E- 6/10 47/2 023	

3	Dr. Pooja Kulkarni	Assistant Professo r	Musculos keletal	Pooja55 89apollo @gmatt. com	05/05 /1989	NO	31/05/2 023	(2)	Regular	Inpro	Tem p	•
=												

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

PATHARAI NANDURBAR

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) UG Degree) AS ON: 22 /01 /2024

Faculty: PHYSIOTHERAPY

Subject- Cardiorespiratory

Whether UG ...../ UG+PG......

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

5. N.	Name of the	Designation	Mob. No.	E-mail ID	of	Whether belongs	Date of appointme		ching Ex		ce	Tot al	Type of Appointm	Univer sity		ls of PG Recognition	Photographwith Signature
	Teaching Staff	DE:			Birth	to Reserved	nt	9	UG	(Vrs)	9.1	Teach ing	ent	Appro val		MUHS s/No)	
1	Dr.	Associat	380 A81			category (if Yes, specif Y category	200	Assi. graf.	Asso. Prof.	Prof.	Total	Experi lence in years of PG		Status {Yes/N o}	Temp/	Letter No. 8 date/	
1	Dr. Sudharshan	Associat e Professo r	998 562 760 2		06/02 /1989	NO	01/02/2 024	7.6			7.6		Regular	Inpr oces s	Temp	IN Proces s	
2	Dr. Jadhav Prakash	Assistant Professo r	787 876 751 4	Pjaday 56@g mail.co m	24/12 /1987	NO	30/05/2 023	BY	8 m		SY Smo nth		Regular	Yes	Temp	MUH S/UG /E- 6/10 47/2 023	

3	Dr. Rajula	Professo r	890 315 308 0	vinsre ju@g mail.c om	6/8/1 981	No	01/02/2 024	7.2	7.7	14.1	Regular	In Proc ess	Temp	Inproc ess	

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

Signature of Dean / Principa

D GAYY COLLEGE OF PHYSIOTHERAPY PATHARAI NANDURBAR

E:\To Upload\PT\Annexure-VIII- Subjectivise Approved & Not Approved Teaching Staff.duc

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# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) UG Degree) AS ON: 22/01/2024

Faculty: PHYSIOTHERAPY

Subject- Neuro Physiotherapy

Whether UG ...../ UG+PG.....

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

5. N.	Name of the	Designation	Mab. No.	E-mail ID	Date of	Whether belongs	Date of appointme	Tea	ching E	perien	ce	Tot	Type of Appointm	Univer		Is of PG tecognition	Photographwith Signature
	Teaching Staff				Birth	to Reserved	nt		ug	(ers)	es as a reco	Teach ing	ent	Appro val	by r	MUHS s/No)	
1	Dr. C Kamesh	Associat				category (If Yes, specif y category		Asst. prof.	Asse. Prof.	Prof.	Total		Temp./Regular Contractual	Status (Yes/N o)	Temp/	Letter No. &date	
Ĺ	Dr. C Kamesh	Associat e professo r	900 009 703 8	mckn euro @gma il.com	13/08 /1981	No	03/07/2 023	15			15		Regular	IN Proc ess	Temp	IN Proces s	
2	Dr. Priti Sonar	Assistant professo r	845 946 103 0	Prakas bborad e6@gm all.com	22/11 /1993	NO	01/02/2 024						Regular	IN Proc ess	Temp	IN Proces s	

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

Signature of Dean / Principal

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) LIG Porton AS ON: 32 (01 (2024)

UG Degree) AS ON: 22 /01 /2024

Faculty: PHYSIOTHERAPY

Subject- Kinesiotherapy and Physical Diagnosis

Whether UG ...../ UG+PG......

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

S. N.	Name of the	Designation	Mob. Na.	E-mail ID	Date of	Whether belongs	Date of appointme	Tea	iching Ex	perien	ce	Tot al	Type of Appointm	Univer sity		ls of PG lecognition	Photographwith Signature
	Teaching Staff				Birth	to Reserved	nt		ug	yrs)	V. 5	Teach ing	ent	Appro val		MUHS s/No)	
1	Dr. Akshav	Assistant				category (if Yes, specif y category		Asst. prof.	Asso. Prof.	Prof.	Total	Exper i enco in years of PG	Temp/Regular Contractual	Status (Yes/N o)	Temp/	Letter No. &date	
	Dr. Akshay M. Bagul	Assistant Professo r	942 148 271 0	Akshay bagul7 21@g mail.co m	05/ <b>0</b> 5 /1994	NO.	01/04/2 021	2.1		-	2.1		Regular	Yes	Temp	MUH S/UG /E- 6/21 14/2 022	
2	Dr. Ulka Mori	Assistant Professo r	832 045 716 9	morial ka12@ gmail.c om	23/11 /1994	NO	31/05/2 023	2.4			2.4		Regular	Yes	Temp	MUH S/UG /E- 6/10 48/2 023	

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

Signature of Dean Devincipal

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) UG Degree) AS ON: 22/01/2024

Faculty: PHYSIOTHERAPY

Subject- Electrotherapy and Electrodiagnosis

Whether UG ...../ UG+PG.....

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

S. N.	6000 no acres		Mob. No.	E-mail ID	of	Whether belongs	Date of appointme		aching Ex	perion	ce	Tot	Type of Appointm	Univer		ls of PG Recognition	Photographwith Signature
	Teaching Staff				Birth	ta Reserved	nt		UG	yes)	The second	Teach ing	ent	Appro val	by I	MUHS s/No)	
						category (if Yes, specif Y category		Asst. prof.	Asso. Prof.	Prof.	Total	Exper I ence in years of PG	Temp./Regular Contractual	Status (Yes/N o)	Temp/ Regular	Letter No. &date	
1	Dr. Swapnil S.Sonar	Assistant Professo r	899 962 692 2	Swapn ils121 @gmai l.com	07/04 /1989	NO.	10/08/2 022	2.5		. 78	2.5		Regular	Yes	Temp	MUH S/UG /E- 6/21 14/2 022	1

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

Signature of Dean principalpy

PATHARAI NANDURBAR

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) UG Degree) AS ON: 15 /06 /2023

Faculty: PHYSIOTHERAPY

Subject-Community

Whether UG ...../ UG+PG......

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

5. N.	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specif y category	Date of appointme nt	Teaching Experience US (yrs)				Tot al Teach ing	Type of Appointm ent	Univer sity Appro val	teacher Recognition		Photographwith Signature
								Asst. prof.	Asso. Prof.	Prof.	Total	Expen I ence in years of PG	Temp./Regular Contractual	Status (Yes/N o)	Temp/ Regular	Leiter No. Sidate	
1	Dr. Ghoghari Bhaskar Devjibhai	Assistant Professo r	886 655 868 9	Dribba sikargh oghari @yaho o.com	18/01 /1988	NO	30/05/2 023	6.8			6.8Y		Regular	Yes	Тетр	MUH S/UG /E- 6/10 47/2 023	

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

Signature of DeadF Principal P

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved) UG Degree) AS ON: 15 /06 /2023

Faculty: PHYSIOTHERAPY

Subject-Physiotherapy in Community health Science

Whether UG 30 / UG+PG......

Name of College: K D GAVIT COLLEGE OF PHYSIOTHERAPY College Code:163106

Intake Capacity -30

S. N.	Name of the Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specif y category )	Date of appointme nt					Tot al Teach ing	Type of Appointm ent	Univer sity Appro val	teacher Recognition		Photographwith Signature
								Asst. prof.	Asso. Pref.	Prof.	Total	Exper I ence in years of PG	Temp./Regular Contractual	Status (Yes/N o)	Temp/ Regular	Letter No. Bidate	
1	Dr. MAHESH S.	Principal	988 437 585 5	mattes bsatha iah@g mail.c om	03/07 /1976	NO	29/05/2 023	2		15	20		Regular	Yes	Temp	MUH S/UG /E- 6/10 47/2 023	9

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

Signature of Destry Principal

PATHARAI NANDURBAR