

## ANNEXURE – VII

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College: Matoshri Ayurved College Eklahare  
Nashik

Phone/Mobile No. : 9850899351

Name of the Subject :

Rog Nidan

VD	Initial
Shyamsunder	Fir st Name
Sitaram	Middle Name
Nagpure	Last Name
15-Jun-1958	D O B
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	Collge Code (New)
Rog Nidan	Dept. name (as per Council)
ROGA NIDANA AVUM VIKRITI VIGYANA	Tought Subject Name (as per Council)
9850899351	Mobile No.
shyamsudarsn@gmail.com	E mail
Reader / Associate Professor	Desig nat ion
-	OSA CID/ Evalu tion ID
35	UG Exp Yea rs
1	UG Exp Months
∞	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Rog Nidan	PG qualification
2001	PG Quali Pass Year
No	Approval St PG
No	Approval St UG
No	P H D Yes or NO
No	P G Guide
No	P H D Guide
No	Debar
371399344128	Aadhar No
ACMPN9159M	P A N No
Yes	H O D
12	Faculty Code
	total No of Dissertation Submitted



PRINCIPAL  
Matoshri Ayurved College,  
Eklahare, Nashik

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College  
Eklahare Nashik

Phone/Mobile No. :

9823252222

Name of the Subject :

Agad Tantra Vyavhar Ayurved Evum Vidhi Vaidyak

VD	Initial
Dhiraj	Fir st Name
Baliram	Middle Name
Patil	Last Name
16/11/1985	D O B
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	Collge Code (New)
Agad Tantra Vyavhar Ayurved Evum Vidhi Vaidyak	Dept. name (as per Council)
Agad Tantra evam Vidhi Vaidyaka	Tought Subject Name (as per Cou ncil)
9823252222	Mobile No.
<a href="mailto:dran221@gmail.com">dran221@gmail.com</a>	E mail
Professor	Desig nat ion
22MUHS6736	OSA CID/ Evalu tion ID
11 Year	UG Exp Yea rs
2 Monts	UG Exp Months
25 Days	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Agad Tantra	PG quificati-on
2014	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	P H D Yes or NO
No	P G Guide
No	P H D Guide
No	Debar
702995211865	Aadhar No
BJJPP8986Q	P A N No
Yes	H O D
12	Faculty Code
	total No of Dissertation Submitted



*(Signature)*  
**PRINCIPAL**  
Matoshri Ayurved College,  
Eklahare, Nashik

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College Eklahare Nashik

Phone/Mobile .No

9422802102

Name of the Subject :

Shalakya Tantra

VD	Initial
Jagdish	First Name
Tukaramji	Middle Name
Gore	Last Name
31/05/1979	DOB
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Shalakya Tantra	Dept. name (as per Council)
Shalakya Tantra	Tought Subject Name (as per Council)
9422802102	Mobile No.
jagdish.gore@gmail.com	E mail
Profeser	Designation
22MUHS6563	OSA CID/ Evaluation ID
18	UG Exp Years
4	UG Exp Months
26	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Shalakya	PG qualification
2005	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
233061731817	Aadhar No
AKAPG7303C	PAN No
Yes	HOD
12	Faculty Code
	total No of Dissertation Submitted



**PRINCIPAL**  
Matoshri Ayurved College,  
Eklahare, Nashik

## ANNEXURE – VII

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College: Matoshri Ayurved College  
Eklahare Nashik

Phone/Mobile No. :

9623695801

Name of the Subject :

Swasthavritta evam Yog

VD	Initial
Neha	First Name
Nandkishor	Middle Name
Bogle	Last Name
25/6/1991	D O B
Female	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Swasthavritta evam Yoga	Dept. name (as per Council)
Swasthavritta evam Yoga	Tought Subject Name (as per Council)
9623695801	Mobile No.
dr.nehabogle@gmail.com	E mail
Reader / Associate Professor	Designation
2MUHS15084	OSA CID/ Evaluation ID
7	UG Exp Years
5	UG Exp Months
10	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Swasthavritta evam Yoga	PG qualification
2017	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	P H D Yes or NO
No	P G Guide
No	P H D Guide
No	Debar
507641960668	Aadhar No
CFGPB7194M	P A N No
Yes	H O D
12	Faculty Code
.	total No of Dissertation Submitted



**PRINCIPAL**  
Matoshri Ayurved College,  
Eklahare, Nashik

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: **Matoshri Ayurved College Eklahare Nashik**

Phone/Mobile No. : **9545643076**

Name of the Subject :

**Rachana Sharira, Rachna Sharir**

VD	Initial
Mineshkumar	Fir st Name
Nemichand	Middle Name
Chawhan	Last Name
14/04/1972	D O B
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Rachna Sharir	Dept.
Rachna Sharir	Tought Subject Name (as per Cou ncil)
9545643076	Mobile No.
chawhanminesh@gmail.com	E mail
Professor	Desig nat ion
2MUHS15083	OSA CID/ Evalu tion ID
21	UG Exp Yea rs
0	UG Exp Months
12	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Rachna Sharir	PG Qualificati-on
2003	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	P H D Yes or NO
No	P G Guide
No	P H D Guide
No	Debar
438589821595	Aadhar No
AFYPC2988L	P A N No
Yes	H O D
12	Faculty Code
	total No of Dissertation Submitted



**PRINCIPAL**  
Matoshri Ayurved College,  
Eklahare, Nashik.

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College  
Eklahare, Nashik

Phone/Mobile No. 9503799579

Name of the Subject :

Kayachikitsa

VD	Initial
Amit	First Name
Prakash	Middle Name
Bari	Last Name
07/10/1987	DOB
male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Kayachikitsa	Dept. name (as per Council)
Kayachikitsa	Tought Subject Name (as per Council)
9503799579	Mobile No.
dramitbari75@gmail.com	E mail
Assistant Professor	Designation
2MUHS15082	OSA CID/ Evaluation ID
7 years	UG Exp Years
1 Monts	UG Exp Months
2 days	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Kay Chikitsa	PG qualification
2016	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
397337037003	Aadhar No
CRWPB9066L	PAN No
Yes	HOD
12	Faculty Code
	total No of Dissertation Submitted



*(Signature)*  
**PRINCIPAL**

Matoshri Ayurved College,  
Eklahare, Nashik

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College  
Eklahare Nashik

Phone/Mobile No. :

9552538383

Name of the Subject : Kaumarabhritya

VD	Initial
Satish	First Name
Baburao	Middle Name
Nirmal	Last Name
18/2/1986	DOB
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
KB	Dept. name (as per Council)
Kaumarabhritya, BALROGA	Tought Subject Name (as per Council)
9552538383	Mobile No.
satish.nirmal2005@gmail.com	E mail
Reader / Associate Professor	Designation
22MUHS6563	OSA CID/ Evaluation ID
10	UG Exp Years
1	UG Exp Months
11	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Kaumarabhritya	PG qualification
2015	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
928061030696	Aadhar No
AGBPN5369C	PAN No
Yes	HOD
12	Faculty Code
	total No of Dissertation Submitted



  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College  
Eklahare Nashik

Phone/Mobile No. : 9821333571

Name of the Subject :

Sanskrit evam  
Ayurved etihās

Mrs.	Initial
Rucha	First Name
Akshay	Middle Name
Kulkarni	Last Name
13/04/1991	DOB
Female	Gender
Matoshri Ayurved College	College Name
123121	College Code (New)
sanskrit samhita & siddhanta	Dept. name (as per Council)
sanskrit evam ayurved itihās	Tought Subject Name (as per Council)
9821333571	Mobile No.
rucha.navare@gmail.com	E mail
Assitant Professor	Designation
2MUHS11850	OSA CID/ Evaluation ID
3	UG Exp Years
3	UG Exp Months
1	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
M.A Sanskrit	PG qualification
2016	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
972071840448	Aadhar No
ARBPN7312A	PAN No
No	HOD
12	Faculty Code
	total No of Dissertation Submitted



*Ball*  
**PRINCIPAL**  
Matoshri Ayurved College,  
Eklahare, Nashik

## ANNEXURE - VII

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College: Matoshri Ayurved College Eklahare  
Nashik

Phone/Mobile No. : 7776967427

Name of the Subject :

Panchakarma

VD	Initial
Poonam	First Name
Nitin	Middle Name
Jadhav	Last Name
10/6/1987	DOB
Female	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Panchakarma	Dept. name (as per Council)
Panchakarma & Upakarma, PANCHAKARMA	Tought Subject Name (as per Council)
7776967427	Mobile No.
poonamsonawane.10@gmail.com	E mail
Reader / Associate Professor	Designation
22MUHS7483	OSA CID/ Evaluation ID
9	UG Exp Years
1	UG Exp Months
2	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Panchakarma	PG qualification
2014	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
442287482332	Aadhar No
EBDPS3474N	PAN No
Yes	HOD
12	Faculty Code
.	total No of Dissertation Submitted



*Bal*  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

**ANNEXURE – VII**  
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College Eklahare  
 Nashik

Phone/Mobile No. :


9766037571

Name of the Subject :

Rasashastra

VD	Initial
Sagar	First Name
Sudhakar	Middle Name
Narode	Last Name
24/06/1985	D O B
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	Collge Code (New)
Rasashastra evam Bhaishajyakalpana	Dept. name (as per Council)
Rasashastra evam Bhaishajyakalpana	Tought Subject Name (as per Council)
9766037571	Mobile No.
sagernarode@gmail.com	E mail
Professor	Desig nat ion
2MUHS15078	OSA CID/ Evaluation ID
13	UG Exp Yea rs
12	UG Exp Months
0	UG
0	Exp Days PG
0	Exp Years
0	PG Exp Months
0	PG
MD Rasashastra	Exp Days PG qualificati-on
2010	PG Quali Pass Year
NO	Approval St PG
Yes	Approval St UG
NO	P H D Yes or NO
NO	P G Guide
NO	P H D Guide
NO	Debar
838223089043	Aadhar No
CDDPS9375J	P A N No
Yes	H O D
12	Faculty Code
	total No of Dissertation Submitted



  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

## ANNEXURE – VII

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College: Matoshri Ayurved College Eklahare  
Nashik

Phone/Mobile No. :

9028268046

Name of the Subject :

Dravyaguna

VD	Initial
Atul	First Name
Prakash	Middle Name
Songire	Last Name
15/09/1984	DOB
Male	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Dravyaguna	Dept. name (as per Council)
Dravyaguna Vigyan , DRAVYAGUN VIGYAN	Tought Subject Name (as per Council)
9028268046	Mobile No.
dr.atulsongire@gmail.com	E mail
Reader / Associate Professor	Designation
2MUHS11529	OSA CID/ Evaluation ID
9	UG Exp Years
6	UG Exp Months
20	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD	PG qualification
2013	PG Quali Pass Year
NO	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
464004043389	Aadhar No
FLLPS6554J	PAN No
YES	HOD
12	Faculty Code
	total No of Dissertation Submitted



*[Signature]*  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

**ANNEXURE – VII**

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College::**Matoshri Ayurved College Eklahare Nashik**

Phone/Mobile No. :

**9921222266**

Name of the Subject :

**Prasuti Tantra**

VD	Initial	
Nilesh	Fir st Name	
Yuvraj	Middle Name	
Bediskar	Last Name	
13/05/1987	D O B	
Male	Gender	
Matoshri Ayurved College, Eklahare, Nashik	College Name	
123121	College Code (New)	
Prasuti Tantra	Dept. name (as per Council)	
Prasuti Tantra evam Stree Roga, PRASUTI EVAN	Tought Subject Name (as per Cou ncil)	
9921222266	Mobile No.	
nileshbediskar@gmail.com	E mail	
Reader / Associate Professor	Desig nat ion	
2MUHS15085	OSA CID/ Evalu tion ID	
6	UG Exp Yea rs	
7	UG Exp Months	
10	UG Exp Days	
0	PG Exp Years	
0	PG Exp Months	
0	PG Exp Days	
MS	PG qualificati-on	
2015	PG Quali Pass Year	
No	Approval St PG	
Yes	Approval St UG	
No	P H D Yes or NO	
NO	P G Guide	
No	P H D Guide	
No	Debar	
814284749898	Aadhar No	
BAKPB0937N	P A N No	
Yes	H O D	
12	Faculty Code	
	total No of Dissertation Submitted	



  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

**ANNEXURE – VII**  
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College Eklahare Nashik

Phone/Mobile No. :

9420366076

Name of the Subject :

kay chikitsa

VD	Initial	
Devshree	First Name	
Devdatta	Middle Name	
Deshmukh	Last Name	
15/7/1980	D O B	
Female	Gender	
Matoshri Ayurved College, Eklahare, Nashik	College Name	
123121	College Code (New)	
kay chikitsa	Dept. name (as per Council)	
KAYACHIKITSA	Tought Subject Name (as per Council)	
9420366076	Mobile No.	
dddevshree@gmail.com	E mail	
Professor	Designation	
2MUHS15079	OSA CID/ Evaluation ID	
17	UG Exp Years	
0	UG Exp Months	
11	UG Exp Days	
0	PG Exp Years	
0	PG Exp Months	
0	PG Exp Days	
MD kay chikitsa	PG qualification	
2007	PG Quali Pass Year	
NO	Approval St PG	
YES	Approval St UG	
NO	P H D Yes or NO	
No	P G Guide	
No	P H D Guide	
No	Debar	
225995568334	Aadhar No	
ALRPD0925H	P A N No	
Yes	H O D	
12	Faculty Code	
	total No of Dissertation Submitted	



*DSU*  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

**ANNEXURE – VII**  
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College Eklahare Nashik

Phone/Mobile No. : 9921928267

Name of the Subject : Shalya Tantra,

VD	Initial	
Swapnil	First Name	
Suhas	Middle Name	
chaudhari	Last Name	
23/5/1984	DOB	
Male	Gender	
Matoshri Ayurved College, Eklahare, Nashik	College Name	
123121	College Code (New)	
Shalya Tantra	Dept. name (as per Council)	
Shalya Tantra, SHALYA TANTRA	Tought Subject Name (as per Council)	
9921928267	Mobile No.	
<a href="mailto:swapnilchaudhari7@gmail.com">swapnilchaudhari7@gmail.com</a>	E mail	
Professor	Designation	
2MUHS14455	OSA CID/ Evaluation ID	
14	UG Exp Years	
10	UG Exp Months	
13	UG Exp Days	
0	PG Exp Years	
0	PG Exp Months	
0	PG Exp Days	
MS Shalya	PG qualification	
2010	PG Quali Pass Year	
No	Approval St PG	
Yes	Approval St UG	
No	PHD Yes or NO	
No	PG Guide	
No	PHD Guide	
NO	Debar	
651734166772	Aadhar No	
AISPC5246J	PAN No	
Yes	HOD	
12	Faculty Code	
	total No of Dissertation Submitted	



*Dr. B. B. B.*  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik

**ANNEXURE – VII**  
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College: Matoshri Ayurved College  
 Eklahare Nashik

Phone/Mobile No. : 9146049771

Name of the Subject : Panchakarma

VD	Initial
Suchita	First Name
Uttam	Middle Name
Pachore	Last Name
19/8/1982	DOB
Female	Gender
Matoshri Ayurved College, Eklahare, Nashik	College Name
123121	College Code (New)
Panchakarma & Upakarma,	Dept. name (as per Council)
Panchakarma & Upakarma, PANCHAKARMA	Tought Subject Name (as per Council)
9146049771	Mobile No.
<a href="mailto:drsuchitapachore1982@gmail.com">drsuchitapachore1982@gmail.com</a>	E mail
Lecturer / Assistant Professor	Designation
	OSA CID/ Evaluation ID
6	UG Exp Years
3	UG Exp Months
23	UG Exp Days
0	PG Exp Years
0	PG Exp Months
0	PG Exp Days
MD Panchakarma	PG qualification
2019	PG Quali Pass Year
No	Approval St PG
Yes	Approval St UG
No	PHD Yes or NO
No	PG Guide
No	PHD Guide
No	Debar
689036906058	Aadhar No
CJCPK5729F	PAN No
No	HOD
12	Faculty Code
	total No of Dissertation Submitted



*(Signature)*  
**PRINCIPAL**  
 Matoshri Ayurved College,  
 Eklahare, Nashik