

Information of Director of Training Centre

It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Director	: Vd. Sanjeev R.Yadav
02.	Date of Birth	: 22/05/1962
03.	Address	: A-1/3Shriramkapuskamgar chs.kamgarnagar, Kurla (E)-24
04.	Tel. No./ Mob. No.	: 02225293820/09322456999
05.	E-mail id	: Drsanjeevyadav22@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: B.A.M.S.M.D. (Ayur.)SHALYATANTRA
08.	Teaching Experience / Health Sciences: Profession Experience (Attached document proof with signature of Head of the Institute. Also it is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)	: 27Years 04 month
09.	Present Appointment	: Dean and HOD of Shalyatantra dept.
10.	Publications (List & Proof)	: 5 Publications
11.	Post Graduate Teaching experience (Attach documentary evidence)	: 13 Years Attached
12.	Any other relevant information	:

Date: - 23/5/2022

Name & Sign. of Director

For the use of affiliated Training Center:

I have verified the eligibility of the above Director as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended).

Dr. Seema Mehre
M.D. (Ayu)
Professor and HOD
Department of Ayurveda and Shiro Roga
Dr. C. J. Patil Foundations
Ymt Ayurvedic Medical College
And Hospital Kharghar

Sign & Stamp
Head of the Department
Date:

Sign & Stamp

Dean/ Principal/ Director of Training Centre

Date: 23/5/22

Training Centre Round Seal



VD SANJEEV YADAV
Dean
Ymt Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210