ANNEXURE – "F"

Information of Mentor 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 Mentor	:	Vd. Seema Mehere
02.	Date of Birth	:	20-08-1964
03.	Address	:	501,Nishant millenieum,Vashi
04.	Tel. No./ Mob. No.	:	9930940403
05.	e-mail id	:	Seema.mehre@gmail.com
06.	Nationality	:	Indian
07.	Qualification in details : (attach documentary proof)	:	B.A.M.S., M.D. (Ayur.)
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)	:	22 yrs 10 mths
09.	Present Appointment	:	Professor & HOD
10.	Publications (List & Proof)	:	Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	8yrs 10mth
12.	Any other relevant information	:	PhD guide recognition from MUHS 2017

Dr. Seema mehere.

Date: - 23/5/2022

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Dr. Seema Mehere
M.D. (Ayu)
Professor and HOD
Dept. of Prasuti Tantra And Stri Roga
Dr. G. D. Pol Foundations
Ymt Ayurvedic Medical College
And Hospital Kharghar

Sign & Stamp

Head of the Department

Date:

V D SANJEEV YADAV
Dean
Y.M.T. Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210

Sign & Stamp

Dean/ Principal/ Director of Training Centre

Date: 23/5/22

Training Centre Round Seal

Y.M.T. AYURVEDIC MEDICAL COLLEGE & HOSPITAL Kharghar Navi Mumbai 410210

ANNEXURE – "F"

Information of Mentor 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 Mentor	:	Vd. Mangesh Patil
02.	Date of Birth	:	21-08-1977
03.	Address	:	B-202,Galaxy Nebula,sec10,kharghar
04.	Tel. No./ Mob. No.	:	9320380219
05.	e-mail id	:	drmangeshpatil21@gmail.com
06.	Nationality	:	Indian
07.	Qualification in details : (attach documentary proof)	:	B.A.M.S., MD (Ayu) Prasutitantra
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)	:	16yrs 9mths
09.	Present Appointment	:	Reader
10.	Publications (List & Proof)	:	ATTACHED
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	10yrs 8mths-
12.	Any other relevant information	:	Ph.D guide recognition from MUHS 2017

Name & Sign. of Mentor

Date: - 23/5/2022

For the use of affiliated Training Center:

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Sign & Stamp

Head of the Department

Date:

Dr. Seema Mohite
M.D. (Ayu)
Professor & Head
Dept. of Prasuti Tantra And Stri Roga
Dr. G. D. Pharma Foundations
Ymt Ayurvedic Medical College
And Hospital Kharghar

Sign & Stamp

Dean/ Principal/ Director of Training Centre

Date: 23/5/2022

V D SANJEEV YADAV
Dean
YMT Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210

Training Centre Round Seal

YMT AYURVEDIC MEDICAL COLLEGE & HOSPITAL Kharghar Navi Mumbai 410210

ANNEXURE – "F"

Information of Mentor 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 Mentor	:	Vd. Pranali Dandekar
02.	Date of Birth	:	07-04-1980
03.	Address	:	M205,Hawre spendors Scty,KHARGHAR
04.	Tel. No./ Mob. No.	:	9619020010
05.	e-mail id	:	pranalibhardwaj@gmail.com
06.	Nationality	:	Indian
07.	Qualification in details : (attach documentary proof)	:	B.A.M.S.,MD(Ayu)Streeroga Prasutitantra
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)	:	11yrs. 6 month
09.	Present Appointment	:	Reader
10.	Publications (List & Proof)	:	Attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	5yr. 7 month
12.	Any other relevant information	:	Admission for PhD 2017 AT YMT

Date: - 23/5/2022

Pandikar

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed bythe University vide clause no.7 of the University Direction No. 05/2017 (Amended) and UniversityCircular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Dr. Seema Mehere
M.D. (Ayu)
Professor and HOD
Dept of Prasuti Tantra And Stri Roga
Dr. G. D. Pol Foundations
Ymt Ayurvedic Medical College
And Hospital Kharghar

Sign & Stamp

Head of the Department

Date:

V D SANJEEV YADAV
Dean
Y.M.T. Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210

Sign & Stamp

Dean/ Principal/ Director of Training Centre

Date: 23/5/22

Training Centre Round Seal

Y.M.T. AYURVEDIC MEDICAL COLLEGE & HOSPITAL Kharghar Navi Mumbai 410210

ANNEXURE – "F"

Information of Mentor 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 Mentor	:	Dr.Mayura Devadiga
02.	Date of Birth	:	02-02-1980
03.	Address	:	1601,Priya Tower,sec19,KHARGHAR
04.	Tel. No./ Mob. No.	:	8108103035
05.	e-mail id	:	mayura.kundapura@gmail.com
06.	Nationality	:	Indian
07.	Qualification in details : (attach documentary proof)	:	B.A.M.S., M. D.(prasutitantra)
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)	:	14yrs 04months
09.	Present Appointment	:	Lecturer
10.	Publications (List & Proof)	:	attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	4 yr.
12.	Any other relevant information	:	Admission for Ph.D 2019 At YMT

Date: - 23/5/2022

Name & Sign. of Mentor

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Dr. Sharmila Mehere
M.D. (Ayu)
Professor and HOD
Dept of Prasuti Tantra And Stri Roga
Dr. G. D. Pol Foundations
Ymt Ayurvedic Medical College
And Hospital Kharghar

Sign & Stamp

Head of the Department

Date:

Sign & Stamp

V D SANJEEV YADAV
Dean
Y.M.T. Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210

Dean/ Principal/ Director of Training Centre

Date: 23/5/22

Training Centre Round Seal

Y.M.T. AYURVEDIC MEDICAL HOSPITAL Kharghar Navi Mumbai 410210

ANNEXURE – "F"

Information of Mentor 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 Faculty / Teacher	:	DR. JENY BHATT
02.	Date of Birth	:	24-03-1987
03.	Address	:	1,La Petite Fleur, Church Lane, Orlem, Malad (W), Mumbai – 400064.
04.	Tel. No./ Mob. No.	:	9167541086
05.	e-mail id	:	dr.jenybhatt@gmail.com
06.	Nationality	:	Indian
07.	Qualification in details : (attach documentary proof)	:	B.A.M.S., M.S. (Streeroga Prasutitantra)
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)	:	7yrs 6mth
09.	Present Appointment	:	Lecturer
10.	Publications (List & Proof)	:	attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	3 yrs. 4 month
12.	Any other relevant information	:	

Date: - 23/5/2022

Jeny

Name & Sign. of Teacher

DR. JENY M. BHATT

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Dr. Sharma Mehere
M.D. (Ayu)
Prof. and HOD
Dept. of Stri Roga
Dr. G. P. Pal Foundations
Ymt Ayurvedic Medical College
And Hospital Kharghar

Sign & Stamp

Head of the Department

Date:

Sign & Stamp

V D SANJEEV YADAV
Dean
Y.M.T. Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210

Dean/ Principal/ Director of Training Centre

Date: 23/5/22

Y.M.T. AYURVEDIC MEDICAL COLLEGE & HOSPITAL Kharghar Navi Mumbai 410210

ANNEXURE – F

Information of Mentor 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 Faculty / Teacher	:	Dr. Nishigangha Pirajirao Bhavake
02.	Date of Birth	:	15/10/1990
03.	Address	:	Room no-3 Staff quarter Y.M.T.Ayurved College Kharghar 410210
04.	Tel. No./ Mob. No.	:	8108150590
05.	e-mail id	:	nishigandhabhavake@gmail.com
06.	Nationality	:	Indian
07.	Qualification in details : (attach documentary proof)	:	B.A.M.S., M.S.(Streeroga Prasutitantra)
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)	:	4 year 6 month
09.	Present Appointment	:	Lecturer
10.	Publications (List & Proof)	:	attached
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	-
12.	Any other relevant information	:	

Date: - 23/5/2022

Name & Sign. of Teacher

For the use of affiliated Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Sign & Stamp

Dr. Seema Mehere
M.D. (Ayu)
Professor and HOD
Dept of Prasuti Tantra And Stri Roga
Dr. G. D. Pol Foundations
Smt Ayurvedic Medical College
And Hospital Kharghar

Head of the Department

Date:

Sign & Stamp

Dean/Principal/ Director of Training Centre

Date:

Training Centre Round Seal

Dr. SANJEEV YADAV
Dean
YMT Ayurvedic Medical
College & Hospital,
Sec - 4, Kharghar,
Navi Mumbai - 410 210