



Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE
Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

Year 2017-18 PhD GUIDES

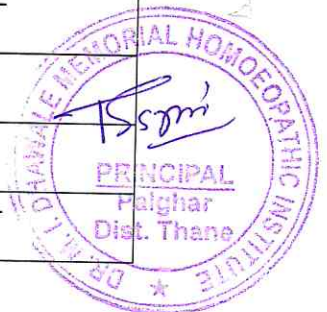
Sr. No.	PhD Research Guide	University Teacher recognition (ref letter no.)
1.	Dr Bipin Jain	MUHS/UDC/ PhD (Homoeo)/288/2012 dtd 12/04/2012





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PG GUIDES 2017-18		
Sr. No.	PG Guide	University Teacher recognition (ref letter no.)
1.	Dr. Anand Kapse	Professor, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
2.	Dr. Sunil Bhalinge	Reader, Recognition letter No. MUHS/PG/E4/3178/2014
3.	Dr. Sachin Junagade	Lecturer, Approval letter No. MUHS/PG/E4/3418/2016 dated 21/11/2016
4.	Dr. Anoop M. Nigwekar	Professor, Recognition letter No. MUHS/PG/E4/439/2015
5.	Dr. Nikunj Jani	Reader, Approval Letter no. MUHS/PG/E-4/582/2018
6.	Dr. Prashant Tamboli	Reader, Approval Letter no. MUHS/PG/E-4/582/2018
7.	Dr. Devangini Broker	Lecturer, Approval Letter no. MUHS/PG/E-4/2288/2018 dted 17/12/2018
8.	Dr. Madhavi Tamboli	Lecturer, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
9.	Dr. C. B. Jain	Reader, Approval Letter no. MUHS/PG/E-4/582/2018
10.	Dr. Shama Rao	Professor, Approval Letter no. MUHS/PG/E-4/582/2018
11.	Dr. Naziya Shaikh	Lecturer, Approval Letter no. MUHS/PG/E-4/403/2017 dted- 1/11/2017
12.	Dr. Harshala Sarvagod	Lecturer, Approval Letter no. MUHS/PG/E-4/1556/2018 dted 15/09/2018
13.	Dr. Manoj K. Patel	Professor, Recognition letter No. MUHS/PG/E-4/2784/2014
14.	Dr. Sunita Nikumbh	Reader, Recognition letter No MUHS/PG/E-4 / 73/2017
15.	Dr. Gayatri Patel	Reader, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
16.	Dr. Rajesh Yadav	Lecturer, Approval Letter no. MUHS/PG/E-4/403/2017 dted- 1/11/2017
17.	Dr. C.R. Goda,	Professor, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
18.	Dr. K.P. Pandya	Reader, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
19.	Dr. Omkar Anavkar	Lecturer, Approval Letter no. MUHS/PG/E-4/403/2017 dted- 1/11/201
20.	Dr. Nandan Daptardar	Lecturer, Approval Letter no. MUHS/PG/E-4/582/2018
21.	Dr. Bipin Jain	Professor, Recognition letter No. MUHS/PG/E4/224/2018
22.	Dr. Bhavik Parekh	Reader, Recognition letter No. MUHS/PG/E4/2070/2018
23.	Dr. Vivek Kadam	Lecturer, Approval Letter no. MUHS/PG/E-4/403/2017 dted- 1/11/2017





महाराष्ट्र आरोग्य विज्ञान विद्यापिठ

Maharashtra University of Health Sciences

दिंडोरी रोड, म्हसळ, नाशिक ४२२ ००४, Dindori Road, Mhasrul, Nashik 422 004

Tel: (0253)2539292, Fax: (0253)2539295

Website: www.muhsnashik.com, E-mail: registrar@muhsnashik.com

डॉ आदिनाथ सूर्यकर

पीएचडी, एफएसीबीआय

कुलसचिव

Dr Adinath Suryakar

PhD, FACBI

Registrar

O.No.: MUHS/UDC/PhD(Homoeo)/ 288 /2012

Date: 12.04.2012

17

To,

Dr Jain Bipin Sohanraj

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

Subject : Recognition as a PhD Guide

Reference: Your application dated 19.10.11, received on 12.01.12

Sir,

With reference to your application for recognition as a PhD Guide of this University, I am directed to inform you that on the recommendations of the Board of Research, Hon'ble Vice-Chancellor is pleased to grant you recognition as a PhD Guide of this University in the subject of Homoeopathic Materia Medica, with effect from 28.02.2012 till attaining the age of 70 years.

Kindly note that the recognition granted to you will always be subject to the terms and conditions prescribed by the University from time to time.

dm
10

Thanking you,

Yours,

Registrar

y to:

The Principal

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

} For information please.



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-2539100-300, Phone: 0253-2539199/194

E-mail : academic2@muhs.ac.in Web.: www.muhs.ac.in

MUHS

डॉ. कल्लिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/1556/2018

Date: 15/09/2018

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road, Palghar

Dist. Palghar – 401 404.

Sub :- **Approval as Guide / Examiner.**

Ref :- 1) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.

2) University Letter No. MUHS/PG/E-4/1285/2018 dtd.27/08/2018.

3) Your letter No. MLDMHI/M6-172/2018, dtd. 11/08/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Practice of Medicine	Dr. Harshala Chandrakant Sarvgoad	Lecturer	w.e.f. date of proposal i.e. 11/08/2018. Upto 31.07.2019 Subject to following conditions.
02	Psychiatry	Dr. Rajesh Ramkunwar Yadav	Lecturer	

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik

2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Registrar

No. MUHS/PG/E-4/1555/2018

Date: 15/09/2018

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road, Palghar

Dist. Palghar - 401 404.

MLDMHI/P-277/2018

24/09/18

Sub :- Approval as Guide / Examiner.

- Ref :- 1) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.
2) University Letter No. MUHS/PG/E-4/1285/2018 dtd.27/08/2018.
3) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Homoeopathic Philosophy	Dr. Anand Ramchandra Kapse	Professor	w.e.f. date of proposal i.e. 20/07/2018. Subject to following conditions.
02	Paediatrics	Dr. Chandrashekhar Ramkrishna Goda	Professor	
03	Paediatrics	Kanailal Purushottam Pandya	Reader	
04	Psychiatry	Dr. Gayatri Manoj Patel	Lecturer	

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

(An ISO 9001:2008 Certified University)

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

Tel : (0253) 2539199, Fax : (0253) 2539200

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

अ. क. सोनवणे

सहा. कुलसचिव

A.K. Sonawane

Asstt. Registrar

No. MUHS/PG/E4/ 3148 /2016

Date: 21 /11/2016

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop,

Boisar, Road,

Dist. Palghar - 401 404

MLDMHI/P- 514/2016
26/11/16

Sub :- **Approval as Guide / Examiner.**

- Ref :- 1) Your Letter No. MLDMHI/M6-377/2016 dtd.19/11/2016.
2) Your Letter No. MLDMHI/M6-358/2016 dtd.02/11/2016.
3) University Letter No. MUHS/PG/E-4/2684/2016 dtd.17/10/2016.
4) Your Letter No. MLDMHI/M6-337/2016 dtd.19/10/2016.
5) Your Letter No. MLDMHI/M6-269/2016 dtd.14/09/2016.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 11 of the CCH Regulation 2015 (Amended). Hon'ble Vice-Chancellor is pleased to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her/ their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of Guide Approval
1	Organon of Medicine	Dr. Sachin Junagade	Asst. Professor	w.e.f. 26/09/2016 & Onward.

Note: In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.

Kindly note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Yours faithfully,

Asstt. Registrar

Copy to :- The Controller of Examination, MUHS Nashik



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 73 /2017

Date: 31/08/2017

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar – 401 404.

MLDMHI/P-328/2017
08/09/2017

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-326/2017, dtd. 09/08/2017.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 11 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Asso. Professor	w.e.f. 09/08/2017 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 2670/2018

Date: 15/12/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-316/2018
Name:
Date: 24/12/2018

Sub :- **Approval as Guide / Examiner**


Ref :- Your letter No. MLDMHI/M6-253/2018, dtd. 23/11/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Bhavik Ramesh Parekh	Reader	w.e.f. date of proposal i.e. 23/11/2018. & Onwards Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



77/MLDMHI/18
७-२-१८
महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/224/2018

Date: 01/03/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road,
Dist. Palghar – 401 404.

MLDMHI/P-071/2018
05/03/2018

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-14/2017, dtd. 02/02/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Bipin Sohanraj Jain	Professor	w.e.f. 02/02/2018 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
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Registrar

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डॉ. कलिदास द. चव्हाण
 एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
 M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/2288/2018

Date: 17/12/2018

To,
 The Dean / Principal,
 Dr. M. L. Dhawale Memorial Homoeopathic Institute,
 Opp. S.T. Workshop, Boisar, Road, Palghar
 Dist. Palghar – 401 404.

R. No. MLDMHI/P-317/2018

Name:

Date: 24/12/2018

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-251/2018, dtd. 23/11/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Repertory	Dr. Devangini Rameshbhai Broker	Lecturer	w.e.f. date of proposal i.e. 23/11/2018. Upto 31.07.2020 Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
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2) Concern Teacher



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एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 582/2018

Date: 11/05/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road,
Dist. Palghar – 401 404.

MLDMHI/P - 163/2018
25/05/18

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-130/2018, dtd. 16/04/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Practice of Medicine	Dr. (Mrs) Shama Manoj Rao	Professor	w.e.f. date of proposal i.e. 16/04/2018 upto 31/07/2019. Subject to following conditions.
02	Practice of Medicine	Dr. Champat Bhabutmal Jain	Reader	w.e.f. date of proposal i.e. 16/04/2018 upto 31/07/2019. Subject to following conditions.
03	Repertory	Dr. Prashant Prakash Tamboli	Reader	w.e.f. date of proposal i.e. 16/04/2018 upto 31/07/2019. Subject to following conditions.
04	Repertory	Dr. Nikunj Jagdish Jani	Reader	w.e.f. date of proposal i.e. 16/04/2018 upto 03/03/2019. Subject to following conditions.
05	Paediatrics	Dr. Nandan Bhalchandra Daptardar	Lecturer	w.e.f. date of proposal i.e. 16/04/2018 upto 31/03/2019. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.

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- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher

डॉ. कलिदास द. चव्हाण
 एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
 M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 403 /2017

Date: 01/10/2017

To,

The Dean / Principal,
 Dr. M. L. Dhawale Memorial Homoeopathic Institute,
 Opp. S.T. Workshop, Boisar, Road,
 Dist. Palghar – 401 404.

MLDMHI/P - 397/2017
 06/11/2017

Sub :- Approval as Guide / Examiner.

Ref :- 1) Your letter No. MLDMHI/M6-382/2017, dtd. 11/10/2017.
 2) University letter No. MUHS/PG/E4/320/2017, dtd. 10/10/2017.
 3) Your letter No. MLDMHI/M6-361/2017, dtd. 25/09/2017.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 11 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Vivek Vittal Kadam	Lecturer	w.e.f. date of proposal i.e. 25/09/2017 upto 15/03/2018. Subject to following conditions.
02	Practice of Medicine	Dr. Naziyabe Mohd. Gause Shaikh	Lecturer	w.e.f. date of proposal i.e. 25/09/2017 upto 31/07/2018. Subject to following conditions.
03	Psychiatry	Dr. Rajesh R. Yadav	Lecturer	
04	Padiatrics	Dr. Omkar Deepak Anavkar	Lecturer	w.e.f. date of proposal i.e. 25/09/2017 upto 31/07/2019. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.
- 3) teacher(s) for further necessary action.

Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
 2) Concern Teacher

डॉ. सुनिल एच. फुगारे

एम.एस्सी., पीएच.डी.

शैक्षणिक विभागप्रमुख (पदव्युत्तर)

Dr. Sunil H. Fugare

M. Sc., Ph. D.

I/c, Academic Section (PG)

No. MUHS/PG/E4/ 439 /2015

Date: 10/02/2015

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop,

Boisar, Road, Palghar,

Thane - 401 404

MLDMHI/P-093/2015

16/02/2015

Sub:- Recognition as Post-Graduate Teacher.

Ref :- Your Letter No. MLDMHI/M-2:358/2014 dtd.11/12/2014.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section 29(2)(I) of the MUHS Act, 1998 Hon'ble Vice-Chancellor is pleased to grant recognition as Post-Graduate Teacher to the following teacher(s) of your Institute/College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Diploma or Super-Speciality Course(s) (as applicable) in the subject mentioned against his/ her/ their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of PG recognition
1	Organon of Medicine	Dr. Anand Ramchandra Kapse	Professor	w.e.f.11/12/2014 & Onward
2	Repertory	Dr. Anoop Mohan Nigwekar	Professor	w.e.f.11/12/2014 & Onward

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by any teacher is incorrect, PG Recognition/ UG approval granted by the University will stand cancelled.

Kindly note that the recognition granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Yours faithfully,



I/C Academic Section (PG)

डॉ. सुनिल एच. फुगारे

एम.एस्सी., पीएच.डी.

शैक्षणिक विभागप्रमुख (पदव्युत्तर)

Dr. Sunil H. Fugare

M. Sc., Ph. D.

I/c, Academic Section (PG)

No. MUHS/PG/E4/2784/2014

Date: 6/10/2014

To,

The Dean / Principal,
 Dr. M. L. Dhawale Memorial Homoeopathic Institute,
 Opp. S.T. Workshop,
 Boisar, Road, Palghar,
 Thane - 401 404

975/MLDMHI/2014
 27/10/2014

Sub:- Recognition as Post-Graduate Teacher.

Ref :- 1) Postgraduate Teacher Recognition Committee meeting dtd.18/09/2014.
 2) Your Letter No. MLDMHI/M-2:284/2014 dtd.01/10/2014.
 3) University Letter No. MUHS/PG/E-4/2478/2014 dtd.17/09/2014.
 4) Your Letter No. MLDMHI/M-2:237/2014 dtd.20/08/2014.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section 29(2)(f) of the MUHS Act, 1998 Hon'ble Vice-Chancellor is pleased to grant recognition as Post-Graduate Teacher to the following teacher(s) of your Institute/College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Diploma or Super-Speciality Course(s) (as applicable) in the subject mentioned against his/ her/ their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of PG recognition
1	Paediatrics	Dr. Chandrasekhar Ramakrishna Goda	Professor	w.e.f.20/08/2014 & Onward
2	Psychiatry	Dr. Manoj Kanchanbhai Patel	Professor	w.e.f.20/08/2014 & Onward
3	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Asso. Professor/Reader	w.e.f.20/08/2014 & Onward
4	Repertory	Dr. Prashant Prakash Tamboli	Asso. Professor/Reader	w.e.f.20/08/2014 & Onward
5	Repertory	Dr. Mrs. Madhavi Prashant Tamboli	Asst. Professor / Lecturer	w.e.f.20/08/2014 & Onward

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by any teacher is incorrect, PG Recognition/ UG approval granted by the University will stand cancelled.

Kindly note that the recognition granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Yours faithfully,

I/C Academic Section (PG)



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

Maharashtra University of Health Sciences, Nashik

(An ISO 9001:2008 Certified University)

वणी - दिंडोरी रोड, म्हास्रुळ, नाशिक - ४२२००४, Vani-Dindori Road, Mhasrul, Nashik- 422 004

EPABX: 0253-2539100-300, Fax – 0253-2539200, Phone: 0253-2539239, 199

E-mail : pgacademic@muhs.ac.in Web.: www.muhs.ac.in

डॉ. सुनिल एच. फुगारे

एम.एस्सी.,पीएच.डी.

शैक्षणिक विभागप्रमुख (पदव्युत्तर)

Dr. Sunil H. Fugare

M. Sc., Ph. D.

I/c, Academic Section (PG)

No. MUHS/PG/E4/3178/2014

Date: 25/11/2014

To,

The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop,
Boisar, Road, Palghar,
Thane - 401 404

1043 / MLDMHI/2014
03/12/14

Sub:- **Recognition as Post-Graduate Teacher.**

Ref :- 1) University Letter No. MUHS/PG/E-4/2783/2014 dtd.16/10/2014.

2) Your Letter No. MLDMHI/M-2:275/2014 dtd.17/09/2014.

3) Your Letter No. MLDMHI/M-2:264/2014 dtd.09/09/2014.

4) University Letter No. MUHS/PG/E-4/2527/2013 dtd.04/09/2013.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section 29(2)(f) of the MUHS Act, 1998 Hon'ble Vice-Chancellor is pleased to grant recognition as Post-Graduate Teacher to the following teacher(s) of your Institute/College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Diploma or Super-Speciality Course(s) (as applicable) in the subject mentioned against his/ her/ their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of PG recognition
1	HMM	Dr. Bipin Sohanraj Jain	Professor	w.e.f.17/09/2014 & Onward
2	Organon of Medicine	Dr. Sunil Dattatray Bhalinge	Reader	w.e.f.09/09/2014 & Onward

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by any teacher is incorrect, PG Recognition/ UG approval granted by the University will stand cancelled.

Kindly note that the recognition granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Yours faithfully,

I/C Academic Section (PG)



Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PhD GUIDES - Year 2018-19		
Sr. No.	PhD Research Guide	University Teacher recognition (ref letter no.)
1.	Dr Bipin Jain	MUHS/UDC/ PhD (Homoeo)/288/2012 dtd 12/04/2012

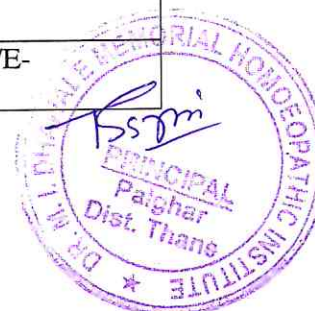




Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PG GUIDES 2018-19		
Sr. No.	PG Guide	University Teacher recognition (ref letter no.)
1.	Dr. Anand Kapse,	Professor, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
2.	Dr. Sunil D. Bhaline	Reader, Recognition letter No. MUHS/PG/E4/430/2019
3.	Dr. Sachin Junagade	Lecturer, Approval letter No. MUHS/PG/E4/3418/2016 dated 21/11/2016
4.	Dr. Anoop M. Nigwekar	Professor, Recognition letter No. MUHS/PG/E4/430/2019
5.	Dr. Nikunj Jani	Reader, Approval Letter no. MUHS/PG/E-4/1866/2019
6.	Dr. Prashant Tamboli	Reader, Approval Letter no. MUHS/PG/E-4/60/2019 dted 15/01/2019
7.	Dr. Devangini Broker	Lecturer, Approval Letter no. MUHS/PG/E-4/2288/2018 dted 17/12/2018
8.	Dr. C. B. Jain	Reader, Approval Letter no. MUHS/PG/E-4/60/2019 dted 15/01/2019
9.	Dr. Shama Rao	Professor, Approval Letter no. MUHS/PG/E-4/60/2019 dted 15/01/2019
10.	Dr. Harshala Sarvagod	Lecturer, Approval Letter no. MUHS/PG/E-4/60/2019 dted 15/01/2019
11.	Dr. Manoj K.Patel	Professor, Recognition letter No. MUHS/PG/E4/430/2019
12.	Dr. Sunita Nikumbh	Reader, Recognition letter No MUHS/PG/E-4 / 73/2017
13.	Dr. Gayatri Patel	Reader, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
14.	Dr. Rajesh Yadav	Lecturer, Approval Letter no. MUHS/PG/E-4/1866/2019
15.	Dr. C.R. Goda,	Professor, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
16.	Dr. K.P. Pandya	Reader, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
17.	Dr. Omkar Anavkar	Lecturer, Approval Letter no. MUHS/PG/E-4/60/2019 dted 15/01/2019
18.	Dr. Nandan Daptardar	Lecturer, Approval Letter no. MUHS/PG/E-4/1866/2019
19.	Dr. Bipin Jain	Professor, Recognition letter No. MUHS/PG/E4/224/2018
20.	Dr. Bhavik Parekh	Reader, Recognition letter No. MUHS/PG/E4/2070/2018
21.	Dr. Vivek Kadam	Lecturer, Approval Letter no. MUHS/PG/E-4/60/2019 dted 15/01/2019





महाराष्ट्र आरोग्य विज्ञान विद्यापिठ

Maharashtra University of Health Sciences

दिंडोरी रोड, म्हसळ, नाशिक ४२२ ००४, Dindori Road, Mhasrul, Nashik 422 004

Tel: (0253)2539292, Fax: (0253)2539295

Website: www.muhsnashik.com, E-mail: registrar@muhsnashik.com

डॉ आदिनाथ सूर्यकर

पीएचडी, एफएसीबीआय

कुलसचिव

Dr Adinath Suryakar

PhD, FACBI

Registrar

O.No.: MUHS/UDC/PhD(Homoeo)/ 288 /2012

Date: 12.04.2012

17

To,

Dr Jain Bipin Sohanraj

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

Subject : Recognition as a PhD Guide

Reference: Your application dated 19.10.11, received on 12.01.12

Sir,

With reference to your application for recognition as a PhD Guide of this University, I am directed to inform you that on the recommendations of the Board of Research, Hon'ble Vice-Chancellor is pleased to grant you recognition as a PhD Guide of this University in the subject of Homoeopathic Materia Medica, with effect from 28.02.2012 till attaining the age of 70 years.

Kindly note that the recognition granted to you will always be subject to the terms and conditions prescribed by the University from time to time.

dm
10

Thanking you,

Yours,

Registrar

y to:

The Principal

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

} For information please.



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-2539100-300, Phone: 0253-2539199/194

E-mail : academic2@muhs.ac.in Web.: www.muhs.ac.in

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Registrar

No. MUHS/PG/E-4/1555/2018

Date: 15/09/2018

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road, Palghar

Dist. Palghar - 401 404.

MLDMHI/P-277/2018

24/09/18

Sub :- Approval as Guide / Examiner.

- Ref :- 1) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.
2) University Letter No. MUHS/PG/E-4/1285/2018 dtd.27/08/2018.
3) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Homoeopathic Philosophy	Dr. Anand Ramchandra Kapse	Professor	w.e.f. date of proposal i.e. 20/07/2018. Subject to following conditions.
02	Paediatrics	Dr. Chandrashekhar Ramkrishna Goda	Professor	
03	Paediatrics	Kanailal Purushottam Pandya	Reader	
04	Psychiatry	Dr. Gayatri Manoj Patel	Lecturer	

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES

(An ISO 9001:2008 Certified University)

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

Tel : (0253) 2539199, Fax : (0253) 2539200

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

अ. क. सोनवणे

सहा. कुलसचिव

A.K. Sonawane

Asstt. Registrar

No. MUHS/PG/E4/ 3148 /2016

Date: 21 /11/2016

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop,

Boisar, Road,

Dist. Palghar - 401 404

MLDMHI/P- 514/2016
26/11/16

Sub :- **Approval as Guide / Examiner.**

- Ref :- 1) Your Letter No. MLDMHI/M6-377/2016 dtd.19/11/2016.
2) Your Letter No. MLDMHI/M6-358/2016 dtd.02/11/2016.
3) University Letter No. MUHS/PG/E-4/2684/2016 dtd.17/10/2016.
4) Your Letter No. MLDMHI/M6-337/2016 dtd.19/10/2016.
5) Your Letter No. MLDMHI/M6-269/2016 dtd.14/09/2016.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 11 of the CCH Regulation 2015 (Amended). Hon'ble Vice-Chancellor is pleased to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her/ their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of Guide Approval
1	Organon of Medicine	Dr. Sachin Junagade	Asst. Professor	w.e.f. 26/09/2016 & Onward.

Note: In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.

Kindly note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Yours faithfully,

Asstt. Registrar

Copy to :- The Controller of Examination, MUHS Nashik



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 73 /2017

Date: 31/08/2017

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar – 401 404.

MLDMHI/P-328/2017
08/09/2017

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-326/2017, dtd. 09/08/2017.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 11 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Asso. Professor	w.e.f. 09/08/2017 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हस्रुळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-2539100-300, Phone: 0253-2539199/194

E-mail : academic2@muhs.ac.in Web.: www.muhs.ac.in

डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 2670/2018

Date: 15/12/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-316/2018
Name:
Date: 24/12/2018

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-253/2018, dtd. 23/11/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Bhavik Ramesh Parekh	Reader	w.e.f. date of proposal i.e. 23/11/2018. & Onwards Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



77/MLDMHI/18
७-२-१८

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-2539100-300, Phone: 0253-2539199/194

E-mail : academic2@muhs.ac.in Web.: www.muhs.ac.in

डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/224/2018

Date: 01/03/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road,
Dist. Palghar – 401 404.

MLDMHI/P-071/2018
05/03/2018

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-14/2017, dtd. 02/02/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Bipin Sohanraj Jain	Professor	w.e.f. 02/02/2018 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हास्रुळ, नाशिक- ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D.(Forensic Medicine)
Registrar

No. MUHS/PG/E-4/1866 /2019

Date: 03/07/2019

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-174/2019

Name:

Date: 11/07/19

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-187/2019, dtd. 19/06/2019.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Repertory	Dr. Nikunj Jagdish Jani	Reader	w.e.f. date of proposal i.e. 19/06/2019. Temporary upto 21/05/2020.
02	Paediatrics	Dr. Nandan Bhalchandra Daptardar	Lecturer	w.e.f. date of proposal i.e. 19/06/2019. Temporary upto 21/05/2020.
03	Psychiatry	Dr. Rajesh Ramkunwar Yadav	Lecturer	w.e.f. date of proposal i.e. 19/06/2019. Temporary upto 21/05/2020.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.

- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

03
R. No.....
Name:.....
Date:.....

1806


Registrar

Copy to :- 1) The Controller of Examination,s MUHS Nashik
2) Concerned Teacher



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Registrar

No. MUHS/PG/E-4/ 60 /2019

Date: 15/01/2019

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar – 401 404.

R. No. MLDMH/P-019/2019

Name:

Date: 19/01/2019

Sub :- **Approval as Guide / Examiner.**


Ref :- Your letter No. MLDMHI/M6-694/2018, dtd. 10/12/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Practice of Medicine	Dr. Shama Manoj Rao	Professor	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
02	Practice of Medicine	Dr. Champatlal Bhabutmalji Jain	Reader	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
03	Repartory	Dr. Prashant Prakash Tamboli	Reader	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
04	Materia Medica	Dr. Vivek Viitthal Kadam	Lecturer	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
05	Practice of Medicine	Harshala Chandrakant Sarvagod	Lecturer	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
06	Paediatrics	Dr. Omkar Deepak Anavkar	Lecturer	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हास्रुळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/430/2019

Date: 12/03/2019

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-070/2019

Name:

Date: 20/03/2019

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-044/2019, dtd. 25/01/2019.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Repertory	Dr. Anoop Mohan Nigwekar	Professor	w.e.f. date of proposal i.e. 25/01/2019. & Onwards Subject to following conditions.
02	Psychiatry	Dr. Manoj Kanchanbhai Patel	Professor	w.e.f. date of proposal i.e. 25/01/2019. & Onwards Subject to following conditions.
03	Homoeopathic Philosophy (Organon of Medicine)	Dr. Sunil Dattatray Bhalinge	Reader	w.e.f. date of proposal i.e. 25/01/2019. & Onwards Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.

- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination,s MUHS Nashik
2) Concerned Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हास्रुळ, नाशिक - ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/2288/2018

Date: 17/12/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-317/2018

Name:

Date: 24/12/2018

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-251/2018, dtd. 23/11/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Repertory	Dr. Devangini Rameshbhai Broker	Lecturer	w.e.f. date of proposal i.e. 23/11/2018. Upto 31.07.2020 Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik

2) Concern Teacher



Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PhD GUIDES - Year 2019-20		
Sr. No.	PhD Research Guide	University Teacher recognition (ref letter no.)
1.	Dr Bipin Jain	MUHS/UDC/ PhD (Homoeo)/288/2012 dted 12/04/2012
2.	Dr. Anand R. Kapse	MUHS/UDC (Ph.D.)/Guide /262/2020 dted 15/12/2020
3.	Dr. C. R. Goda	MUHS/UDC (Ph.D.)/Guide /262/2020 dted 15/12/2020
4.	Dr. A. M. Nigwekar	MUHS/UDC (Ph.D.)/Guide /274/2020 dted 15/12/2020
5.	Dr. Manoj K.Patel	MUHS/UDC (Ph.D.)/Guide /262/2020 dted 15/12/2020





Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PG GUIDES 2019-20		
Sr. No.	PG Guide	University Teacher recognition (ref letter no.)
1.	Dr. Shama Rao	Professor, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
2.	Dr. Harshla Sarvagod	Lecturer, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
3.	Dr. C. B. Jain	Reader, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
4.	Dr. Manoj K. Patel	Professor, Recognition letter No. MUHS/PG/E4/430/2019
5.	Dr. Sunita Nikumbh	Reader, Recognition letter No MUHS/PG/E-4 / 73/2017
6.	Dr. Rajesh Yadav	Lecturer, Recognition Letter no. MUHS/PG/E-4/1323/2020 dtd 11/10/2020
7.	Dr. Gayatri Patel	Lecturer, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
8.	Dr. C.R. Goda,	Professor, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
9.	Dr. Omkar Anavkar	Lecturer, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
10.	Dr. K.P. Pandya	Reader. Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
11.	Dr. Nandan Daptardar	Lecturer, Recognition Letter no. MUHS/PG/E-4/1323/2020 dtd 11/10/2020
12.	Dr. Bipin Jain,	Professor, Recognition letter No. MUHS/PG/E4/224/2018
13.	Dr. Bhavik Parekh	Reader, Recognition letter No. MUHS/PG/E4/2070/2018
14.	Dr. Vivek Kadam	Reader, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
15.	Dr. Anand Kapse	Professor, Approval letter No. MUHS/PG/E4/1555/2018 dated 15/9/2018
16.	Dr. Sachin Junagade	Reader, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
17.	Dr. Sunil D. Bhalinge	Reader, Recognition letter No. MUHS/PG/E4/430/2019
18.	Dr. Anoop M. Nigwekar	Professor, Recognition letter No. MUHS/PG/E4/430/2019
19.	Dr. Prashant Tamboli	Reader, Approval Letter no. MUHS/PG/E-4/60/2019 dtd 15/01/2019
20.	Dr. Nikunj Jani	Reader, Recognition Letter no. MUHS/PG/E-4/1323/2020 dtd 11/10/2020
21.	Dr. Devangini Broker	Lecturer, Approval Letter no. MUHS/PG/E-4/2288/2018 dtd 17/12/2018





महाराष्ट्र आरोग्य विज्ञान विद्यापिठ

Maharashtra University of Health Sciences

दिंडोरी रोड, म्हसळ, नाशिक ४२२ ००४, Dindori Road, Mhasrul, Nashik 422 004

Tel: (0253)2539292, Fax: (0253)2539295

Website: www.muhsnashik.com, E-mail: registrar@muhsnashik.com

डॉ आदिनाथ सूर्यकर

पीएचडी, एफएसीबीआय

कुलसचिव

Dr Adinath Suryakar

PhD, FACBI

Registrar

O.No.: MUHS/UDC/PhD(Homoeo)/ 288 /2012

Date: 12.04.2012

17

To,

Dr Jain Bipin Sohanraj

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

Subject : Recognition as a PhD Guide

Reference: Your application dated 19.10.11, received on 12.01.12

Sir,

With reference to your application for recognition as a PhD Guide of this University, I am directed to inform you that on the recommendations of the Board of Research, Hon'ble Vice-Chancellor is pleased to grant you recognition as a PhD Guide of this University in the subject of Homoeopathic Materia Medica, with effect from 28.02.2012 till attaining the age of 70 years.

Kindly note that the recognition granted to you will always be subject to the terms and conditions prescribed by the University from time to time.

dm
10

Thanking you,

Yours,

Registrar

y to:

The Principal

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

} For information please.



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसर्गळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O.No.MUHS/UDC(Ph.D.)/Guide / 262/2020

Date : 15/12/2020

By Email

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial,

Homoeopathic Institute,

Rural Homoeopathic Hospital,

Opp. S.T. Workshop, Palghar-Boisar,

Road, **Palghar- 401 404.**

Email – mldmhipg@gmail.com

Subject : Recognition as Ph.D. Guide...

Reference : 1) Your letter no. MLDMHI/M15-030/2020 dt.- 25/01/2020
2) Ph.D. Direction No. 01/2020
3) Board of Research Resolution No. 02/2020, dated - 23/06/2020
4) Academic Council Resolution No. 37/2020, dated 15/07/2020.

Sir/Madam,

With reference to the above cited subject, I am directed to inform you that Board of Research in its meeting has Passed the Resolution No. 02/2020, dated 23/06/2020 to grant recognition as Ph.D. Guide to the following teacher(s) of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Psychiatry	Dr. Patel Manoj Kanchanbhai	Professor	Approved, w.e.f. 25/01/2020, onwards
2	Homoeopathic Philosophy	Dr. Kapse Anand Ramchandra	Professor	Approved, w.e.f. 25/01/2020, onwards
3	Paediatrics	Dr. Goda Chandrasekhar Ramkrishna	Professor	Approved, w.e.f. 25/01/2020, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

The above teacher(s) are required to attend the Research Methodology Workshop conducted by this University or any other Centre authorized by the University.

(P.T.O.)

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,



Dy. Registrar
University Dept. Cell
(Ph.D.)

15/12

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D. in concerned subjects]*

Copy to: The Concern Ph.D. Guide



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हस्रुळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O.No.MUHS/UDC(Ph.D.)/Guide / 274/2020

Date : 15/12/2020

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. workshop

Boisar Road, Palghar

Thane - 401 404.

Email - mldmhipg@gmail.com

Subject : Recognition as Ph.D. Guide...

Reference : 1) Your Application dated - 14/02/2020

2) Ph.D. Direction No. 01/2020

3) Academic Council Resolution No. 37/2020, dated 15/07/2020.

Sir/Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per the provision u/s 29 (2) of (i) of MUHS Act, 1998 & clause 8.1 (ii) (a), (b), (c), (d) of Direction No. 01/2020 Hon'ble Vice Chancellor is pleased to grant recognition as Ph.D. Guide to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Repertory	Dr. Nigewkar Anoop Mohan	Professor	Approved w.e.f. 14/02/2020, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

The above teacher is required to attend the Research Methodology Workshop conducted by this University or any other Centre authorized by the University.

(P.T.O.)

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,



15/12

Dy. Registrar
University Dept. Cell
(Ph.D.)

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dept. of Repertory., Dr. M. L. Dhawale Memorial Homoeopathic Institute Thane should be recognized place of research of Ph.D.]*

Copy to :

1. Dr. Nigewkar Anoop Mohan

Professor

Dept. of Repertory

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. workshop

Boisar Road, Palghar

Thane – 401 404.

Email – sbriclinic25@gmail.com

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine)

Registrar

No. MUHS/PG/E-4/1738/2020

Date: 24/12/2020

To,
The Dean/Principal,
Dr. M. L. Dhawale Memorial
Homoeopathic Institute, Opp. S. T.
Workshop, Boisar Road,
Dist. Palghar - 401 404.

R. No. MLD/MHI/P-002/2021

Name:

Date: 02/01/2021

Sub :- **Recognition as Post-Graduate Teacher.**

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडीएमएचआय/पाल/म२ : ३२३/२०२० दि. २५/११/२०२०.

5) University Letter No. मआवि/पीजी/ई४/३१८३/२०२० दि. १९/११/२०२०.

6) Your Letter No. एमएलडीएमएचआय/पाल/म२ : ३०८/२०२० दि. २९/१०/२०२०.

7) Your Letter No. एमएलडीएमएचआय/पाल/म२ : २७७/२०२० दि. ०७/१०/२०२०.


Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
01	Practice of Medicine	Dr. Shama Manoj Rao	Professor	w.e.f. 07/10/2020 Subject to following Conditions.
02	Paediatrics	Dr. Kanaiyalal Purushottamdas Pandya	Reader	w.e.f. 07/10/2020 Subject to following Conditions.
03	Practice of Medicine	Dr. Champatlal Bhabutmalji Jain	Reader	w.e.f. 07/10/2020 Subject to following Conditions.
04	Materia Medica	Dr. Vivek Vitthal Kadam	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
05	Practice of Medicine	Dr. Harashala Chandrakant Sarvagod	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
06	Homoeopathic Philosophy	Dr. Sachin Gajanan Junagade	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
07	Psychiatry	Dr. Gayatri Manoj Patel	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
08	Paediatrics	Dr. Omkar Deepak Anavkar	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.

Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, wichiever happens earlier.


Registrar

Copy to: - The Concern Teacher

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by the teacher concerned is incorrect, PG Recognition/UG approval granted by the University will stand cancelled.



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

Maharashtra University of Health Sciences, Nashik

वणी - दिंडोरी रोड, म्हास्रुळ, नाशिक - ४२२००४, Vani-Dindori Road, Mhasrul, Nashik- 422 004

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डॉ. कलिदास द. चव्हाण
एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D.(Forensic Medicine)
Registrar

Out No.: MUHS/E-4/PG/1323 /2020

Date: 11/10/2020

To
The Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S. T. Workshop, Boisar, Road,
Dist. Palghar - 401 404

R. No. muhs/218-147/2020
Name:
Date: 19/12/22

- Sub. : Extension to Temporary **Post Graduate Teacher Recognition** extended by the College
- Ref. : 1) University Circular No. 14/2020 (amended) dated 23/06/2020
2) Your Letter dtd. एमएलडिएमएचआय/पाल/मर/-३०६/२०२० दि.२८/१०/२०२०.
3) University Letter No. MUHS/E-4/PG/914/2020 dtd. 08/09/2020
4) University Letter No. MUHS/PG/E4/1886/2019 dtd. 03/07/2019.

Sir/Madam,

With reference to the subject cited above, I am to inform you that, the proposal of Extension to Post Graduate Teacher Recognition extended by the College for grant of temporary Recognition of the following teacher(s) is considered by the University. It is decided by the University to grant temporary Recognition for one year as per order issued by the Institute :-

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Repertory	Dr. Nikunj J. Jani	Reader	w.e.f. 29/05/2020 Temporary for one year upto 28/05/2021 Subject to following Conditions
2	Psychiatry	Dr. Rajesh R. Yadav	Lecturer	w.e.f. 29/05/2020 Temporary for one year upto 28/05/2021 Subject to following Conditions
3	Paediatrics	Dr. Nandan B. Daptardar	Lecturer	w.e.f. 29/05/2020 Temporary for one year upto 28/05/2021 Subject to following Conditions

Kindly note that the Recognition granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.


Registrar

Copy to: Concern Teacher(S)



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Registrar

No. MUHS/PG/E-4/1555/2018

Date: 15/09/2018

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road, Palghar

Dist. Palghar - 401 404.

MLDMHI/P-277/2018

24/09/18

Sub :- Approval as Guide / Examiner.

- Ref :- 1) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.
2) University Letter No. MUHS/PG/E-4/1285/2018 dtd.27/08/2018.
3) Your letter No. MLDMHI/M6-223/2018, dtd. 28/08/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Homoeopathic Philosophy	Dr. Anand Ramchandra Kapse	Professor	w.e.f. date of proposal i.e. 20/07/2018. Subject to following conditions.
02	Paediatrics	Dr. Chandrashekhar Ramkrishna Goda	Professor	
03	Paediatrics	Kanailal Purushottam Pandya	Reader	
04	Psychiatry	Dr. Gayatri Manoj Patel	Lecturer	

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 73 /2017

Date: 31/08/2017

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar – 401 404.

MLDMHI/P-328/2017
08/09/2017

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-326/2017, dtd. 09/08/2017.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 11 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Asso. Professor	w.e.f. 09/08/2017 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/ 2670/2018

Date: 15/12/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-316/2018
Name:
Date: 24/12/2018

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-253/2018, dtd. 23/11/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Bhavik Ramesh Parekh	Reader	w.e.f. date of proposal i.e. 23/11/2018. & Onwards Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



77/MLDMHI/18
७-२-१८
महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
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एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/224/2018

Date: 01/03/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road,
Dist. Palghar – 401 404.

MLDMHI/P-071/2018
05/03/2018

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-14/2017, dtd. 02/02/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Materia Medica	Dr. Bipin Sohanraj Jain	Professor	w.e.f. 02/02/2018 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.

Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik
2) Concern Teacher



MUHS

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Registrar

No. MUHS/PG/E-4/ 60 /2019

Date: 15/01/2019

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar – 401 404.

R. No. MLDMH/P-019/2019

Name:

Date: 19/01/2019

Sub :- **Approval as Guide / Examiner.**


Ref :- Your letter No. MLDMHI/M6-694/2018, dtd. 10/12/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College **subject to the terms and conditions of appointment order** for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Practice of Medicine	Dr. Shama Manoj Rao	Professor	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
02	Practice of Medicine	Dr. Champatlal Bhabutmalji Jain	Reader	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
03	Repartory	Dr. Prashant Prakash Tamboli	Reader	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
04	Materia Medica	Dr. Vivek Viitthal Kadam	Lecturer	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
05	Practice of Medicine	Harshala Chandrakant Sarvagod	Lecturer	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.
06	Paediatrics	Dr. Omkar Deepak Anavkar	Lecturer	w.e.f. 10/12/2018 & Onwards. Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik

2) Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/430/2019

Date: 12/03/2019

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar - 401 404.

R. No. MLDMHI/P-070/2019

Name:

Date: 20/03/2019

Sub :- Approval as Guide / Examiner.

Ref :- Your letter No. MLDMHI/M6-044/2019, dtd. 25/01/2019.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Repertory	Dr. Anoop Mohan Nigwekar	Professor	w.e.f. date of proposal i.e. 25/01/2019. & Onwards Subject to following conditions.
02	Psychiatry	Dr. Manoj Kanchanbhai Patel	Professor	w.e.f. date of proposal i.e. 25/01/2019. & Onwards Subject to following conditions.
03	Homoeopathic Philosophy (Organon of Medicine)	Dr. Sunil Dattatray Bhalinge	Reader	w.e.f. date of proposal i.e. 25/01/2019. & Onwards Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.

- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination,s MUHS Nashik
2) Concerned Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)
कुलसचिव

Dr. Kalidas D. Chavan
M.B.B.S., M.D. (Forensic Medicine)
Registrar

No. MUHS/PG/E-4/2288/2018

Date: 17/12/2018

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial Homoeopathic Institute,
Opp. S.T. Workshop, Boisar, Road, Palghar
Dist. Palghar – 401 404.

R. No. MLDMHI/P-317/2018

Name:

Date: 24/12/2018

Sub :- **Approval as Guide / Examiner.**

Ref :- Your letter No. MLDMHI/M6-251/2018, dtd. 23/11/2018.

Sir / Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per provision under the section / clause 12 of the CCH Regulation 2015 (Amended), University has decided to grant approval as Guide / Examiner to the following teacher(s) of your Institute / College subject to the terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Course(s) in the subject mentioned against his/ her name.

Sr. No	Subject	Name of the Teacher	Designation	Status of Guide Approval
01	Repertory	Dr. Devangini Rameshbhai Broker	Lecturer	w.e.f. date of proposal i.e. 23/11/2018. Upto 31.07.2020 Subject to following conditions.

- 1) In case, if it is found at later stage that information furnished in Guide / Examiner form by any teacher is incorrect, Guide approval granted by the University will stand cancelled.
- 2) Note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, which ever happens earlier.
- 3) You are requested to handover the copy of letter to the concerned teacher(s) for further necessary action.


Registrar

Copy to :- 1) The Controller of Examination, MUHS Nashik

2) Concern Teacher



Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PhD GUIDES - 2020-21		
Sr. No.	PhD Research Guide	University Teacher recognition (ref letter no.)
1.	Dr Bipin Jain	MUHS/UDC/ PhD (Homoeo)/288/2012 dtd 12/04/2012
2.	Dr Bhavik Parekh	MUHS/UDC (Ph.D.)/Guide /423/2021 dtd 31/12/2021
3.	Dr. Sunita B Nikumbh	MUHS/UDC (Ph.D.)/Guide /423/2021 dtd 31/12/2021
4.	Dr. A. M. Nigwekar	MUHS/UDC (Ph.D.)/Guide /274/2020 dtd 15/12/2020
5.	Dr. P.P. Tamboli	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
6.	Dr. Nikunj Jani	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
7.	Dr. Anand R. Kapse	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
8.	Dr. C. R. Goda	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
9.	Dr. Shama Rao	MUHS/UDC (Ph.D.)/Guide /423/2021 dtd 31/12/2021

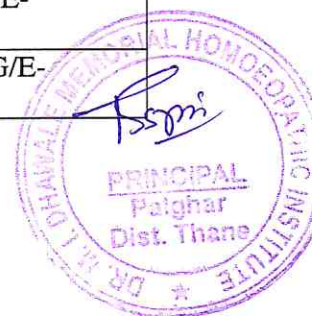




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(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PG GUIDES 2020-21		
Sr. No.	PG Guide	University Teacher recognition (ref letter no.)
1.	Dr. Shama Rao	Professor, Recognition Letter no. MUHS/PG/E-4/1738/2020 dted 24/12/2020
2.	Dr. C. B. Jain	Reader, Recognition Letter no. MUHS/PG/E-4/1738/2020 dted 24/12/2020
3.	Dr. Harshla Sarvagod	Lecturer, Recognition Letter no. MUHS/PG/E-4/1738/2020 dted 24/12/2020
4.	Dr. Sonam Mishra	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
5.	Dr. Sunita Nikumbh	Professor, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
6.	Dr. Rajesh Yadav	Reader, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
7.	Dr. Mansi Surati	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
8.	Dr. C.R. Goda	Professor, Recognition letter No. MUHS/PG/E4/468/2021 dted- 01/03/2021
9.	Dr. Omkar Anavkar	Reader, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
10.	Dr. Nikita Mehta	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1136/2021 dated 6.7.2021
11.	Dr. Bipin Jain	Professor, Recognition letter No. MUHS/PG/E4/468/2021 dted- 01/03/2021
12.	Dr. Bhavik Parekh	Reader, Recognition letter No. MUHS/PG/E4/468/2021 dted- 01/03/2021
13.	Dr. Vivek Kadam,	Reader, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
14.	Dr. Akshata Nayak	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
15.	Dr. Anand Kapse	Professor, Recognition letter No. MUHS/PG/E4/468/2021 dted- 01/03/2021
16.	Dr. Sachin Junagade	Reader, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/21
17.	Dr. Mehvish Dandoti	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
18.	Dr. Anoop M. Nigwekar	Professor, Recognition letter No. MUHS/PG/E4/468/2021 dted- 01/03/2021
19.	Dr. Prashant Tamboli	Reader, Recognition letter No. MUHS/PG/E4/468/2021 dted- 01/03/2021
20.	Dr. Nikunj Jani	Reader, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021
21.	Dr. Devangini Broker	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1077/2021 dted 25/06/2021





महाराष्ट्र आरोग्य विज्ञान विद्यापिठ

Maharashtra University of Health Sciences

दिंडोरी रोड, म्हसळ, नाशिक ४२२ ००४, Dindori Road, Mhasrul, Nashik 422 004

Tel: (0253)2539292, Fax: (0253)2539295

Website: www.muhsnashik.com, E-mail: registrar@muhsnashik.com

डॉ आदिनाथ सूर्यकर

पीएचडी, एफएसीबीआय

कुलसचिव

Dr Adinath Suryakar

PhD, FACBI

Registrar

O.No.: MUHS/UDC/PhD(Homoeo)/ 288 /2012

Date: 12.04.2012

17

To,

Dr Jain Bipin Sohanraj

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

Subject : Recognition as a PhD Guide

Reference: Your application dated 19.10.11, received on 12.01.12

Sir,

With reference to your application for recognition as a PhD Guide of this University, I am directed to inform you that on the recommendations of the Board of Research, Hon'ble Vice-Chancellor is pleased to grant you recognition as a PhD Guide of this University in the subject of Homoeopathic Materia Medica, with effect from 28.02.2012 till attaining the age of 70 years.

Kindly note that the recognition granted to you will always be subject to the terms and conditions prescribed by the University from time to time.

dmh
10

Thanking you,

Yours,

Registrar

y to:

The Principal

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

} For information please.

**MUHS****महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक**
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसर्गळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव**Dr. Sunil H. Fugare**

MSc.Ph.D.

Deputy Registrar**O.No.MUHS/UDC(Ph.D.)/Guide / 262/2020****Date : 15/12/2020****By Email****To,****The Dean / Principal,**

Dr. M. L. Dhawale Memorial,

Homoeopathic Institute,

Rural Homoeopathic Hospital,

Opp. S.T. Workshop, Palghar-Boisar,

Road, **Palghar- 401 404.**Email – mldmhipg@gmail.com**Subject : Recognition as Ph.D. Guide...****Reference :** 1) Your letter no. MLDMHI/M15-030/2020 dt.- 25/01/2020
2) Ph.D. Direction No. 01/2020
3) Board of Research Resolution No. 02/2020, dated - 23/06/2020
4) Academic Council Resolution No. 37/2020, dated 15/07/2020.

Sir/Madam,

With reference to the above cited subject, I am directed to inform you that Board of Research in its meeting has Passed the Resolution No. 02/2020, dated 23/06/2020 to grant recognition as Ph.D. Guide to the following teacher(s) of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Psychiatry	Dr. Patel Manoj Kanchanbhai	Professor	Approved, w.e.f. 25/01/2020, onwards
2	Homoeopathic Philosophy	Dr. Kapse Anand Ramchandra	Professor	Approved, w.e.f. 25/01/2020, onwards
3	Paediatrics	Dr. Goda Chandrasekhar Ramkrishna	Professor	Approved, w.e.f. 25/01/2020, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

The above teacher(s) are required to attend the Research Methodology Workshop conducted by this University or any other Centre authorized by the University.

(P.T.O.)

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,



Dy. Registrar
University Dept. Cell
(Ph.D.)

15/12

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D. in concerned subjects]*

Copy to: The Concern Ph.D. Guide

**MUHS****महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक**
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हस्रुळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव**Dr. Sunil H. Fugare**

MSc.Ph.D.

Deputy Registrar**O.No.MUHS/UDC(Ph.D.)/Guide / 274/2020****Date : 15/12/2020****To,****The Dean / Principal,**

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. workshop

Boisar Road, Palghar

Thane - 401 404.**Email - mldmhipg@gmail.com****Subject : Recognition as Ph.D. Guide...****Reference : 1) Your Application dated - 14/02/2020**

2) Ph.D. Direction No. 01/2020

3) Academic Council Resolution No. 37/2020, dated 15/07/2020.

Sir/Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per the provision u/s 29 (2) of (i) of MUHS Act, 1998 & clause 8.1 (ii) (a), (b), (c), (d) of Direction No. 01/2020 Hon'ble Vice Chancellor is pleased to grant recognition as Ph.D. Guide to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Repertory	Dr. Nigewkar Anoop Mohan	Professor	Approved w.e.f. 14/02/2020, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

The above teacher is required to attend the Research Methodology Workshop conducted by this University or any other Centre authorized by the University.

(P.T.O.)

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,



15/12

Dy. Registrar
University Dept. Cell
(Ph.D.)

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dept. of Repertory., Dr. M. L. Dhawale Memorial Homoeopathic Institute Thane should be recognized place of research of Ph.D.]*

Copy to :

1. Dr. Nigewkar Anoop Mohan

Professor

Dept. of Repertory

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. workshop

Boisar Road, Palghar

Thane – 401 404.

Email – sbriclinic25@gmail.com



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसर्गळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in



डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O. No. MUHS/UDC (Ph.D.)/Guide / 423/2021

Date: 31/12/2021

By Email

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial

Homoeopathic Institute, Opp. S.T. Workshop,

Palghar boisor Road, **Palghar- 401 404.**

Email – mldmhbp@gmail.com

Subject : Recognition as Ph.D. Guide (Suo-Motto) ...

Reference : 1) Your Proposal dated - 25/11/2020
2) Ph.D. Direction No. 01/2020
3) Board of Research Resolution No. 13/2020, dated - 19/10/2020.
4) Academic Council Resolution No. 77/2021, dated 28/07/2021.

Sir/Madam,


With reference to the above cited subject, I am directed to inform you that Academic Council in its meeting has Passed the Resolution No. 77/2021, dated 28/07/2021 to grant recognition as Ph.D. Guide to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Professor	Approved w.e.f. 28/07/2021, onwards
2	Practice of Medicine	Dr. Shama Manoj Rao	Professor	Approved w.e.f. 28/07/2021, onwards
3	Repertory	Dr. Prashant Prakash Tamboli	Associate Professor	Approved w.e.f. 28/07/2021, onwards
4	HMM	Dr. Bhavik Ramesh Parekh	Associate Professor	Approved w.e.f. 28/07/2021, onwards

(P.T.O.)

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,

Dy. Registrar 31/12
University Dept. Cell
(Ph. D.)

[Note: -

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the, Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D.in concerned subject]*

Copy to :

1. The concern Ph. D Guide
2. In-Charge, Exam (Ph.D.), MUHS Nashik.

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
दिंडोरी रोड, म्हस्रुळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206
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डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O.No.MUHS/UDC (Ph.D.)/Guide / 50 /2022

Date: 11 /02/2022

By Email

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial

Homoeopathic Institute,

Opp. S.T. Workshop, Palghar Boisor Road,

Palghar- 401 404.

Email – mldmhip@gmail.com

Subject : Recognition as Ph.D. Guide (Suo-Motto) ...

Reference : 1) Your Proposal dated –17/01/2022
2) Ph.D. Direction No. 01/2020
3) Board of Research Resolution No. 13/2020, dated - 19/10/2020.
4) Academic Council Resolution No. 77/2021, dated 28/07/2021.

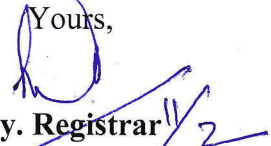
Sir/Madam,

With reference to the above cited subject, I am directed to inform you that Academic Council in its meeting has Passed the Resolution No. 77/2021, dated 28/07/2021 to grant recognition as Ph.D. Guide (Suo-Motto) to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Repertory	Dr. Nikunj Jagdish Jani	Associate Professor	Approved w.e.f. 28/07/2021, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,

Dy. Registrar
University Dept. Cell
(Ph.D.)

(P.T.O.)

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dept. of Repertory, Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D.]*

Copy to :

1. Dr. Nikunj Jagdish Jani

Professor,
Dept. of Repertory
Dr. M. L. Dhawale Memorial
Homoeopathic Institute,
Opp. S.T. Workshop, Palghar boisor Road,
Palghar- 401 404.

E-mail:- drnikunj@gmail.com

**2. In-Charge, Exam (Ph.D.),
MUHS Nashik.**

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine)

Registrar

No. MUHS/PG/E-4/1738/2020

Date: 24/12/2020

To,
The Dean/Principal,
Dr. M. L. Dhawale Memorial
Homoeopathic Institute, Opp. S. T.
Workshop, Boisar Road,
Dist. Palghar - 401 404.

R. No. MLD/MHI/P-002/2021

Name:

Date: 02/01/2021

Sub :- **Recognition as Post-Graduate Teacher.**

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडीएमएचआय/पाल/म२ : ३२३/२०२०. दि. २५/११/२०२०.

5) University Letter No. मआवि/पीजी/ई४/३१८३/२०२० दि. १९/११/२०२०.

6) Your Letter No. एमएलडीएमएचआय/पाल/म२ : ३०८/२०२०. दि. २९/१०/२०२०.

7) Your Letter No. एमएलडीएमएचआय/पाल/म२ : २७७/२०२०. दि. ०७/१०/२०२०.


Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
01	Practice of Medicine	Dr. Shama Manoj Rao	Professor	w.e.f. 07/10/2020 Subject to following Conditions.
02	Paediatrics	Dr. Kanaiyalal Purushottamdas Pandya	Reader	w.e.f. 07/10/2020 Subject to following Conditions.
03	Practice of Medicine	Dr. Champatlal Bhabutmalji Jain	Reader	w.e.f. 07/10/2020 Subject to following Conditions.
04	Materia Medica	Dr. Vivek Vitthal Kadam	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
05	Practice of Medicine	Dr. Harashala Chandrakant Sarvagod	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
06	Homoeopathic Philosophy	Dr. Sachin Gajanan Junagade	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
07	Psychiatry	Dr. Gayatri Manoj Patel	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
08	Paediatrics	Dr. Omkar Deepak Anavkar	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.

Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, wichiever happens earlier.


Registrar

Copy to: - The Concern Teacher

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by the teacher concerned is incorrect, PG Recognition/UG approval granted by the University will stand cancelled.



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हसळ, नाशिक- ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-6659100-300, Phone: 0253-6659199/194

E-mail :pgacademic@muhs.ac.in Web.:www.muhs.ac.in

डॉ. कलदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

प्र. कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine)

Offg. Registrar

No. MUHS/PG/E-4/PG/ 1077 /2021

Date: 25/06/2021

To,

The Dean/Principal

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar - 401 404.

R. No. MUHS/114/2021

Name: MUHS

Date: 20/05/2021

Sub :- **Recognition as Post-Graduate Teacher.**

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडिएमएचआय/पाल/म२-१६१/२०२१ दि. १६/०३/२०२१

Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Psychiatry	* Dr. Sunita Bhanudas Nikumbh	Professor	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.
2	Repertory	Dr. Nikunj Jagdish Jani	Reader	Temporary approved for one year only upto 04/03/2022 against SC Category w.e.f 16/03/2021 subject to following conditions.
3	Psychiatry	Dr. Rajesh Ramkunwar Yadav	Reader	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.
4	Paediatrics	* Dr. Omkar Deepak Anavkar	Reader	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
5	Homoeopathic Philosophy	Dr. Sachin Gajanan Junagade	Reader	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.
6	Materia Medica	Dr. Vivek Vitthal Kadam	Reader	Temporary approved for one year only upto 04/03/2022 against SC Category w.e.f 16/03/2021 subject to following conditions.
7	Repertory	* Dr. Devangini Ramesh Broker	Lecturer	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.
8	Psychiatry	* Dr. Mansi Jayantibhai Surati	Lecturer	w.e.f 16/03/2021 Temporary upto 04/03/2022 subject to following conditions.
9	Homoeopathic Philosophy	Dr. Mehvish Haris Dandoti	Lecturer	Temporary approved for one year only upto 04/03/2022 against SC Category w.e.f 16/03/2021 subject to following conditions.
10	Practice of Medicine	* Dr. Sonam Ashishkumar Mishra	Lecturer	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.
11	Materia Medica	* Dr. Akshatha Damodar Nayak	Lecturer	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.

* Indicate that, 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 Recognition. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor may be cancelled.

Kindly note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.


Registrar

Copy to: Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हसळ, नाशिक- ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-6659100-300, Phone: 0253-6659199/194

E-mail :academic2@muhs.ac.in Web.:www.muhs.ac.in

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine)

Registrar

No. MUHS/PG/E-4/ 468 /2021

Date: 01/02/2021
03

R. No. MLDMHX/P-083/2021

Name:

Date: 19/03/2021

To,
The Dean/Principal,
Dr. M. L. Dhawale Memorial
Homoeopathic Institute, Opp. S. T.
Workshop, Boisar Road,
Dist. Palghar - 401 404.

Sub :- Recognition as Post-Graduate Teacher.

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडीएमएचआय/पाल/मर : ३७१/२०२०. दि. ३१/१२/२०२०.

Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
01	Materia Medica	Dr. Bipinkumar Sohanraj Jain	Professor	w.e.f. 31/12/2020 Subject to following Conditions.
02	Homoeopathic Philosophy	Dr. Anand Ramchandra Kapse	Professor	w.e.f. 31/12/2020 Subject to following Conditions
03	Repertory	Dr. Anup Mohan Nigwekar	Professor	w.e.f. 31/12/2020 Subject to following Conditions
04	Paediatrics	Dr. Chandrasekhar Ramkrushna Goda	Professor	w.e.f. 31/12/2020 Subject to following Conditions
05	Psychiatry	Dr. Manoj Kanchanbhai Patel	Professor	w.e.f. 31/12/2020 Subject to following Conditions
06	Materia Medica	Dr. Bhavik Ramesh Parekh	Reader	w.e.f. 31/12/2020 Subject to following Conditions
07	Homoeopathic Philosophy	Dr. Sunil Dattatray Bhalinge	Reader	w.e.f. 31/12/2020 Subject to following Conditions
08	Repertory	Dr. Prashant Prakash Tamboli	Reader	w.e.f. 31/12/2020 Subject to following Conditions
09	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Reader	w.e.f. 31/12/2020 Subject to following Conditions

Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, wichiever happens earlier.


Registrar

Copy to: - The Concern Teacher

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by the teacher concerned is incorrect, PG Recognition/UG approval granted by the University will stand cancelled



महाराष्ट्र आरोग्य विज्ञानविद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हास्रुळ, नाशिक- ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

Tel : (0253) 2539292 Fax : (0253) 2539294

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

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र), पीएच.डी

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine), Ph.D

Registrar

No. MUHS/PG/E-4/PG/ 1136 /2021

Date: 06/06/2021

To,

The Dean/Principal

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar - 401 404.

R. No. MUHS/PG-7/25/2021

Name:

Date: 10/7/2021

Sub :- Recognition as Post-Graduate Teacher.

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your email letter dated 25/06/2021.

5) Your Letter No. एमएलडिएमएचआय/पाल/म२-१६१/२०२१ दि. १६/०३/२०२१

Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Paediatrics	* Dr. Nikita Sureshchandra Mehta	Lecturer	w.e.f 16/03/2021 Temporary upto 04/03/2023 subject to following conditions.

* Indicate that, 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 Recognition. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor may be cancelled.

Kindly note that the approval granted by the University is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

Registrar

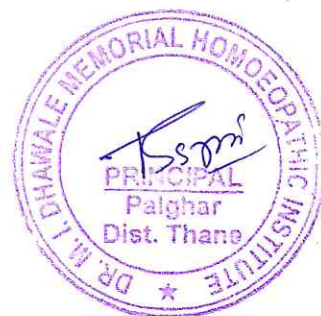
Copy to: Concern Teacher



Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

Opp. S.T. Workshop, Palghar-Boisar Road, Palghar 401 404. • Tel : 02525-256932/33 • Fax : 02525-257019
(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PhD GUIDES 2021-22		
Sr. No.	PhD Research Guide	University Teacher recognition (ref letter no.)
1.	Dr Bipin Jain	MUHS/UDC/ PhD (Homoeo)/288/2012 dtd 12/04/2012
2.	Dr Bhavik Parekh	MUHS/UDC (Ph.D.)/Guide /423/2021 dtd 31/12/2021
3.	Dr. Sunita B Nikumbh	MUHS/UDC (Ph.D.)/Guide /423/2021 dtd 31/12/2021
4.	Dr. A. M. Nigwekar	MUHS/UDC (Ph.D.)/Guide /274/2020 dtd 15/12/2020
5.	Dr. P.P. Tamboli	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
6.	Dr. Nikunj Jani	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
7.	Dr. Anand R. Kapse	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
8.	Dr. C. R. Goda	MUHS/UDC (Ph.D.)/Guide /262/2020 dtd 15/12/2020
9.	Dr. Shama Rao	MUHS/UDC (Ph.D.)/Guide /423/2021 dtd 31/12/2021





Dr. M. L. DHAWALE MEMORIAL HOMOEOPATHIC INSTITUTE

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(Recognized by the Central council of Homoeopathy, New Delhi and
Maharashtra University of Health Sciences, Nashik)

PG GUIDES Year 2021-22		
Sr. No.	PG Guide	University Teacher recognition (ref letter no.)
1.	Dr. Shama Rao	Professor, Recognition Letter no. MUHS/PG/E-4/1738/2020 dtd 24/12/2020
2.	Dr. Harshla Sarvagod	Reader, Recognition Letter no. MUHS/PG/E-4/PG/1159/2022 dtd 29/06/2022
3.	Dr. Sonam Mishra	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
4.	Dr. Namrata Pandey	Lecturer, Recognition Letter no. MUHS/PG/E-4/PG/1159/2022 dtd 29/06/2022
5.	Dr. Sunita Nikumbh	Professor, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
6.	Dr. Rajesh Yadav	Reader, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
7.	Dr. Mansi Surati	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
8.	Dr. Tanvir Sheikh	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
9.	Dr. C.R. Goda	Professor, Recognition letter No. MUHS/PG/E4/468/2021
10.	Dr. Omkar Anavkar	Reader, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
11.	Dr. Nikita Mehta	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
12.	Dr. Bipin Jain	Professor, Recognition letter No. MUHS/PG/E4/468/2021
13.	Dr. Bhavik Parekh	Reader, Recognition letter No. MUHS/PG/E4/468/2021
14.	Dr. Vivek Kadam	Reader, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
15.	Dr. Akshata Nayak	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
16.	Dr. Anand Kapse,	Professor, Recognition letter No. MUHS/PG/E4/468/2021
17.	Dr. Sachin Junagade	Reader, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
18.	Dr. Mehvish Dandoti	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
19.	Dr. Anoop M. Nigwekar	Professor, Recognition letter No. MUHS/PG/E4/468/2021
20.	Dr. Prashant Tamboli	Reader, Recognition Letter No. MUHS/PG/E4/468/2021
21.	Dr. Nikunj Jani	Reader, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022
22.	Dr. Devangini Broker	Lecturer, Recognition Letter no. MUHS/PG/E-4/UG& PG/480/2022 dtd 04/08/2022





महाराष्ट्र आरोग्य विज्ञान विद्यापिठ

Maharashtra University of Health Sciences

दिंडोरी रोड, म्हसळ, नाशिक ४२२ ००४, Dindori Road, Mhasrul, Nashik 422 004

Tel: (0253)2539292, Fax: (0253)2539295

Website: www.muhsnashik.com, E-mail: registrar@muhsnashik.com

डॉ आदिनाथ सूर्यकर

पीएचडी, एफएसीबीआय

कुलसचिव

Dr Adinath Suryakar

PhD, FACBI

Registrar

O.No.: MUHS/UDC/PhD(Homoeo)/ 288 /2012

Date: 12.04.2012

17

To,

Dr Jain Bipin Sohanraj

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

Subject : Recognition as a PhD Guide

Reference: Your application dated 19.10.11, received on 12.01.12

Sir,

With reference to your application for recognition as a PhD Guide of this University, I am directed to inform you that on the recommendations of the Board of Research, Hon'ble Vice-Chancellor is pleased to grant you recognition as a PhD Guide of this University in the subject of Homoeopathic Materia Medica, with effect from 28.02.2012 till attaining the age of 70 years.

Kindly note that the recognition granted to you will always be subject to the terms and conditions prescribed by the University from time to time.

dm
10

Thanking you,

Yours,

Registrar

y to:

The Principal

Dr ML Dhawale Memorial Homoeo Inst

Opp ST Workshop,

Palghar-Boisar Road,

Palghar 401 404

} For information please.

**MUHS****महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक**
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हसर्गळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव**Dr. Sunil H. Fugare**

MSc.Ph.D.

Deputy Registrar**O.No.MUHS/UDC(Ph.D.)/Guide / 262/2020****Date : 15/12/2020****By Email****To,****The Dean / Principal,**

Dr. M. L. Dhawale Memorial,

Homoeopathic Institute,

Rural Homoeopathic Hospital,

Opp. S.T. Workshop, Palghar-Boisar,

Road, **Palghar- 401 404.**Email – mldmhipg@gmail.com**Subject****: Recognition as Ph.D. Guide...****Reference**

- 1) Your letter no. MLDMHI/M15-030/2020 dt.- 25/01/2020
- 2) Ph.D. Direction No. 01/2020
- 3) Board of Research Resolution No. 02/2020, dated - 23/06/2020
- 4) Academic Council Resolution No. 37/2020, dated 15/07/2020.

Sir/Madam,

With reference to the above cited subject, I am directed to inform you that Board of Research in its meeting has Passed the Resolution No. 02/2020, dated 23/06/2020 to grant recognition as Ph.D. Guide to the following teacher(s) of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Psychiatry	Dr. Patel Manoj Kanchanbhai	Professor	Approved, w.e.f. 25/01/2020, onwards
2	Homoeopathic Philosophy	Dr. Kapse Anand Ramchandra	Professor	Approved, w.e.f. 25/01/2020, onwards
3	Paediatrics	Dr. Goda Chandrasekhar Ramkrishna	Professor	Approved, w.e.f. 25/01/2020, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

The above teacher(s) are required to attend the Research Methodology Workshop conducted by this University or any other Centre authorized by the University.

(P.T.O.)

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,



Dy. Registrar
University Dept. Cell
(Ph.D.)

15/12

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D. in concerned subjects]*

Copy to: The Concern Ph.D. Guide



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हस्रुळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O.No.MUHS/UDC(Ph.D.)/Guide / 274/2020

Date : 15/12/2020

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. workshop

Boisar Road, Palghar

Thane - 401 404.

Email - mldmhipg@gmail.com

Subject : Recognition as Ph.D. Guide...

Reference : 1) Your Application dated - 14/02/2020

2) Ph.D. Direction No. 01/2020

3) Academic Council Resolution No. 37/2020, dated 15/07/2020.

Sir/Madam,

With reference to the above cited subject, I am directed to inform you that in view of the norms prescribed as per the provision u/s 29 (2) of (i) of MUHS Act, 1998 & clause 8.1 (ii) (a), (b), (c), (d) of Direction No. 01/2020 Hon'ble Vice Chancellor is pleased to grant recognition as Ph.D. Guide to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Repertory	Dr. Nigewkar Anoop Mohan	Professor	Approved w.e.f. 14/02/2020, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

The above teacher is required to attend the Research Methodology Workshop conducted by this University or any other Centre authorized by the University.

(P.T.O.)

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,



15/12

Dy. Registrar
University Dept. Cell
(Ph.D.)

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dept. of Repertory., Dr. M. L. Dhawale Memorial Homoeopathic Institute Thane should be recognized place of research of Ph.D.]*

Copy to :

1. Dr. Nigewkar Anoop Mohan

Professor

Dept. of Repertory

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. workshop

Boisar Road, Palghar

Thane – 401 404.

Email – sbriclinic25@gmail.com



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरी रोड, म्हासुरुळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206

Email: udc@muhs.ac.in Website: www.muhs.ac.in



डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O. No. MUHS/UDC (Ph.D.)/Guide / 423/2021

Date: 31/12/2021

By Email

To,

The Dean / Principal,

Dr. M. L. Dhawale Memorial

Homoeopathic Institute, Opp. S.T. Workshop,

Palghar boisor Road, **Palghar- 401 404.**

Email – mldmhbp@gmail.com

Subject : Recognition as Ph.D. Guide (Suo-Motto) ...

Reference : 1) Your Proposal dated - 25/11/2020
2) Ph.D. Direction No. 01/2020
3) Board of Research Resolution No. 13/2020, dated - 19/10/2020.
4) Academic Council Resolution No. 77/2021, dated 28/07/2021.

Sir/Madam,


With reference to the above cited subject, I am directed to inform you that Academic Council in its meeting has Passed the Resolution No. 77/2021, dated 28/07/2021 to grant recognition as Ph.D. Guide to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Professor	Approved w.e.f. 28/07/2021, onwards
2	Practice of Medicine	Dr. Shama Manoj Rao	Professor	Approved w.e.f. 28/07/2021, onwards
3	Repertory	Dr. Prashant Prakash Tamboli	Associate Professor	Approved w.e.f. 28/07/2021, onwards
4	HMM	Dr. Bhavik Ramesh Parekh	Associate Professor	Approved w.e.f. 28/07/2021, onwards

(P.T.O.)

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,

Dy. Registrar 31/12
University Dept. Cell
(Ph. D.)

[Note: -

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the, Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D.in concerned subject]*

Copy to :

1. The concern Ph. D Guide
2. In-Charge, Exam (Ph.D.), MUHS Nashik.

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
दिंडोरी रोड, म्हस्रुळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik-422004

Phone : 0253 - 2539196/206, 0253 - 6659196/206
Email: udc@muhs.ac.in Website: www.muhs.ac.in

डॉ. सुनिल ह. फुगारे

एमएस्सी. पीएच.डी.

उपकुलसचिव

Dr. Sunil H. Fugare

MSc.Ph.D.

Deputy Registrar

O.No.MUHS/UDC (Ph.D.)/Guide / 50 /2022

Date: 11 /02/2022

By Email

To,
The Dean / Principal,
Dr. M. L. Dhawale Memorial
Homoeopathic Institute,
Opp. S.T. Workshop, Palghar Boisor Road,
Palghar- 401 404.
Email – mldmhip@gmail.com

Subject : Recognition as Ph.D. Guide (Suo-Motto) ...

Reference : 1) Your Proposal dated –17/01/2022
2) Ph.D. Direction No. 01/2020
3) Board of Research Resolution No. 13/2020, dated - 19/10/2020.
4) Academic Council Resolution No. 77/2021, dated 28/07/2021.

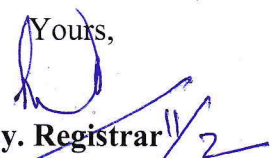
Sir/Madam,

With reference to the above cited subject, I am directed to inform you that Academic Council in its meeting has Passed the Resolution No. 77/2021, dated 28/07/2021 to grant recognition as Ph.D. Guide (Suo-Motto) to the following teacher of your College/ Institute, subject to the terms & conditions of appointment order, for guiding the Ph.D. student in the subject mentioned against his/her/their name.

Sr. No.	Subject	Name of the Teacher	Designation	Status of recognition as Ph.D. Guide
1	Repertory	Dr. Nikunj Jagdish Jani	Associate Professor	Approved w.e.f. 28/07/2021, onwards

Kindly note that the recognition granted by the University is valid till the above said teacher is in the service or till attaining the age of superannuation whichever happens earlier.

You are requested to handover the copy of this letter to the concerned teacher for further necessary action.

Yours,

Dy. Registrar
University Dept. Cell
(Ph.D.)

(P.T.O.)

[Note :-

1. *In case, at later stage, if it is found that the information furnished in the Ph. D. recognition form by any Guide is incorrect, Ph.D. Guide Recognition granted by the University will stand cancelled.*
2. *It is required that the Dept. of Repertory, Dr. M. L. Dhawale Memorial Homoeopathic Institute, Palghar should be recognized place of research of Ph.D.]*

Copy to :

1. Dr. Nikunj Jagdish Jani

Professor,
Dept. of Repertory
Dr. M. L. Dhawale Memorial
Homoeopathic Institute,
Opp. S.T. Workshop, Palghar boisor Road,
Palghar- 401 404.

E-mail:- drnikunj@gmail.com

**2. In-Charge, Exam (Ph.D.),
MUHS Nashik.**



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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Tel : (0253) 2539194/2539291 Student Helpline : 0253-2539111/6659111

Website: www.muhs.ac.in, E-mail: academi2@muhs.ac.in

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र), पीएच.डी., डी.एससी.

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine), Ph.D., D.Sc.

Registrar

No. MUHS/PG/E-4/UG& PG/1480 /2022

Date: 04/10/2022

To,

The Dean/Principal

Dr. M. L. Dhawale Memorial Homoeopathic Institute,

Opp. S.T. Workshop, Boisar, Road,

Dist. Palghar - 401 404.

Sub :- Recognition as Post-Graduate Teacher.

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

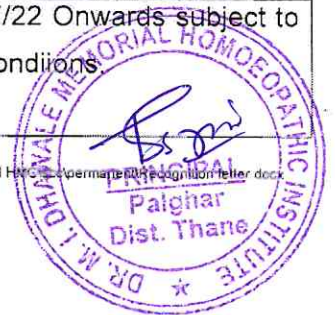
3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडिएमएचआय/पाल/म२-३७७/२०२२ दि. १२/०७/२०२२

Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the teacher(s) mentioned below was considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name and accordingly recognition letter was issued by the University,

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Psychiatry	* Dr. Sunita Bhanudas Nikumbh	Professor	w.e.f. 12/07/22 Onwards subject to following Condiions.
2	Repertory	Dr. Nikunj Jagdish Jani	Reader (Additional)	w.e.f. 12/07/22 Onwards subject to following Condiions.
3	Psychiatry	Dr. Rajesh Ramkunwar Yadav	Reader	w.e.f. 12/07/22 Onwards subject to following Condiions.
4	Paediatrics	Dr. Omkar Deepak Anavkar	Reader	w.e.f. 12/07/22 Onwards subject to following Condiions.
5	Homoeopathic Philosophy	* Dr. Sachin Gajanan Junagade	Reader	w.e.f. 12/07/22 Onwards subject to following Condiions.
6	Materia Medica	Dr. Vivek Vitthal Kadam	Reader (Additional)	w.e.f. 12/07/22 Onwards subject to following Condiions.



Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
7	Repertory	* Dr. Devangini Ramesh Broker	Lecturer	w.e.f. 12/07/22 Onwards subject to following Condiions.
8	Psychiatry	Dr. Mansi Jayantibhai Surati	Lecturer	w.e.f. 12/07/22 Onwards subject to following Condiions.
9	Paediatrics	Dr. Nikita Sureshchandra Mehta	Lecturer	w.e.f. 12/07/22 Onwards subject to following Condiions.
10	Homoeopathic Philosophy	Dr. Mehvish Haris Dandoti	Lecturer	w.e.f. 12/07/22 Onwards subject to following Condiions.
11	Practice of Medicine	* Dr. Sonam Ashishkumar Mishra	Lecturer	w.e.f. 12/07/22 Onwards subject to following Condiions.
12	Materia Medica	Dr. Akshatha Damodar Nayak	Lecturer	w.e.f. 12/07/22 Onwards subject to following Condiions.
13	Psychiatry	Dr. Sheikh Tanvir Abdul Hamid	Lecturer (Additional)	w.e.f. 12/07/22 Onwards subject to following Condiions.

- 1) The above mentioned teacher / teachers is / are required to attend "Research Methodology Workshop" conducted by Regional Centre, Pune of this University or any other centre authorized by the University (if not attended earlier), within a period of one year from the date of recognition. It is further clarified that the validity of 'Research Methodology Workshop' is for five years only and it must be renewed after every five years as per Circular 14/2011 dated 22/06/2011.
- 2) *Indicates that, the recognition 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 recognition. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- 3) Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, whichever happens earlier.

Registrar

Copy to: - Concern Teacher /s



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हास्रुळ, नाशिक- ४२२००४ Dindori Road, Mhasrul, Nashik - 422004
 Tel : (0253) 2539194/2539291 Student Helpline : 0253-2539111/6659111
 Website: www.muhs.ac.in, E-mail: academi2@muhs.ac.in



डॉ.कलिदास द. चव्हाण
 एम.बी.बी.एस.,एम.डी.(न्यायवैद्यकशास्त्र),पीएच.डी.,डी.एससी.
कुलसचिव

Dr.Kalidas D. Chavan
 M.B.B.S.,M.D.(Forensic Medicine),Ph.D.,D.Sc.
Registrar

No. MUHS/PG/E-4/PG/ 1159 /2022

Date: 23 /06/2022

To,
 The Dean/Principal
 Dr. M. L. Dhawale Memorial Homoeopathic Institute,
 Opp. S.T. Workshop, Boisar, Road,
 Dist. Palghar - 401 404.

Sub :- Recognition as Post-Graduate Teacher.

Ref :- 1) University Direction No. 01/2017 dtd.,13/04/2017.
 2) University Circular No. 04/2019 dtd. 22/01/2019.
 3) University Circular No. 69/2019 dtd. 15/10/2019.
 4) Your Letter No. एमएलडिएमएचआय/पाल/म२-१९०/२०२२ दि.१२/०४/२०२२

Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the teacher(s) mentioned below was considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name and accordingly recognition letter was issued by the University,

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Practice of Medicine	Dr. Pandey Namrata Awadhesh	Additional Lecturer	w.e.f 12/04/2022 Temporary upto 11/04/2024 subject to following conditions.
2	Practice of Medicine	* Dr.Harashala Chandrakant Sarvagod	Reader	w.e.f 12/04/2022 Temporary upto 11/04/2024 subject to following conditions.

- 1) The above mentioned teacher / teachers is / are required to attend "Research Methodology Workshop" conducted by Regional Centre, Pune of this University or any other centre authorized by the University (if not attended earlier), within a period of one year from the date of recognition. It is further clarified that the validity of 'Research Methodology Workshop' is for five years only and it must be renewed after every five years as per Circular 14/2011 dated 22/06/2011.

- 2) *Indicates that, the recognition 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 recognition. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- 3) Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, wichiever happens earlier.


Registrar

Copy to: Concern Teacher



महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हसळ, नाशिक- ४२२००४ Dindori Road, Mhasrul, Nashik - 422004

EPABX: 0253-6659100-300, Phone: 0253-6659199/194

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डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine)

Registrar

No. MUHS/PG/E-4/ 468 /2021

Date: 01/02/2021
03

R. No. MLDMHXZ/P-083/2021

Name:

Date: 19/03/2021

To,
The Dean/Principal,
Dr. M. L. Dhawale Memorial
Homoeopathic Institute, Opp. S. T.
Workshop, Boisar Road,
Dist. Palghar - 401 404.

Sub :- **Recognition as Post-Graduate Teacher.**

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडीएमएचआय/पाल/मर : ३७१/२०२०. दि. ३१/१२/२०२०.

Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
01	Materia Medica	Dr. Bipinkumar Sohanraj Jain	Professor	w.e.f. 31/12/2020 Subject to following Conditions.
02	Homoeopathic Philosophy	Dr. Anand Ramchandra Kapse	Professor	w.e.f. 31/12/2020 Subject to following Conditions
03	Repertory	Dr. Anup Mohan Nigwekar	Professor	w.e.f. 31/12/2020 Subject to following Conditions
04	Paediatrics	Dr. Chandrasekhar Ramkrushna Goda	Professor	w.e.f. 31/12/2020 Subject to following Conditions
05	Psychiatry	Dr. Manoj Kanchanbhai Patel	Professor	w.e.f. 31/12/2020 Subject to following Conditions
06	Materia Medica	Dr. Bhavik Ramesh Parekh	Reader	w.e.f. 31/12/2020 Subject to following Conditions
07	Homoeopathic Philosophy	Dr. Sunil Dattatray Bhalinge	Reader	w.e.f. 31/12/2020 Subject to following Conditions
08	Repertory	Dr. Prashant Prakash Tamboli	Reader	w.e.f. 31/12/2020 Subject to following Conditions
09	Psychiatry	Dr. Sunita Bhanudas Nikumbh	Reader	w.e.f. 31/12/2020 Subject to following Conditions

Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, wichiever happens earlier.


Registrar

Copy to: - The Concern Teacher

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by the teacher concerned is incorrect, PG Recognition/UG approval granted by the University will stand cancelled

डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D.(Forensic Medicine)

Registrar

No. MUHS/PG/E-4/1738/2020

Date: 24/12/2020

To,
The Dean/Principal,
Dr. M. L. Dhawale Memorial
Homoeopathic Institute, Opp. S. T.
Workshop, Boisar Road,
Dist. Palghar - 401 404.

R. No. MLD/MHI/P-002/2021

Name:

Date: 02/01/2021

Sub :- **Recognition as Post-Graduate Teacher.**

Ref :- 1) University Direction No. 01/2017 dtd., 13/04/2017.

2) University Circular No. 04/2019 dtd. 22/01/2019.

3) University Circular No. 69/2019 dtd. 15/10/2019.

4) Your Letter No. एमएलडीएमएचआय/पाल/म२ : ३२३/२०२०. दि. २५/११/२०२०.

5) University Letter No. मआवि/पीजी/ई४/३१८३/२०२० दि. १९/११/२०२०.

6) Your Letter No. एमएलडीएमएचआय/पाल/म२ : ३०८/२०२०. दि. २९/१०/२०२०.

7) Your Letter No. एमएलडीएमएचआय/पाल/म२ : २७७/२०२०. दि. ०७/१०/२०२०.


Sir / Madam,

With reference cited above, I am directed to inform you that, the proposal of Recognition as Post-Graduate Teacher of the following teacher(s) has been considered by the University subject to terms and conditions of appointment order for imparting instructions to the Post Graduate Degree, Diploma of Super-Speciality Course(s) (as applicable) in the subject mentioned against his /her name.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
01	Practice of Medicine	Dr. Shama Manoj Rao	Professor	w.e.f. 07/10/2020 Subject to following Conditions.
02	Paediatrics	Dr. Kanaiyalal Purushottamdas Pandya	Reader	w.e.f. 07/10/2020 Subject to following Conditions.
03	Practice of Medicine	Dr. Champatlal Bhabutmalji Jain	Reader	w.e.f. 07/10/2020 Subject to following Conditions.
04	Materia Medica	Dr. Vivek Vitthal Kadam	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
05	Practice of Medicine	Dr. Harashala Chandrakant Sarvagod	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.

Sr.No.	Subject	Name of the Teacher	Designation	Status of PG recognition
06	Homoeopathic Philosophy	Dr. Sachin Gajanan Junagade	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
07	Psychiatry	Dr. Gayatri Manoj Patel	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.
08	Paediatrics	Dr. Omkar Deepak Anavkar	Lecturer	w.e.f. 07/10/2020 Subject to following Conditions.

Kindly note that the Recognition granted by the Univeristy is valid till the above said teacher is in the services of the said PG teaching College or attains the age of superannuation, wichiever happens earlier.


Registrar

Copy to: - The Concern Teacher

Note: In case, if it is found at later stage that information furnished in Post Graduate Recognition form by the teacher concerned is incorrect, PG Recognition/UG approval granted by the University will stand cancelled.