

## MAHARASHTRA UNIVERSITY OF HEALTH

SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College: :- Savitridevi College Of Nursing Wani, Dist-Yavatmal 445302 Institute Phone/Mobile No. :- 9800003961  
Full Address Of College :- :- At Wadgaon, Wani, Dist-Yavatmal 445302

| 1 | 2            | 3  | 4  | 5                                | 6                        | 7                              | 8                    | 9  | 10   | 11                             | 12  | 13   | 14                            | 15  | 16                                       | 17                                     | 18            | 19        | 20                              | 21             | 22                     | 23               |
|---|--------------|--|--|----------------------------------|--------------------------|--------------------------------|----------------------|--|--|--------------------------------|---|--|-------------------------------|---|--|--|---------------|-----------|---------------------------------|----------------|------------------------|------------------|
|   | College Name | P.G Subject thought use separate row for separate subjects | Name of Teacher (Last Name First Name Middle Name) | Designation Don't use short form | M.Sc Passing Year (YYYY) | M.Sc (N) Subject Qualification | Sub Specialty If any | Ph.D Nursing Yes/ No if yes passing year | Type of Appointment (Regular/Temp./Honorary) | UG Teaching Experience in year | After PG Teaching Experience e (in Years) | Teaching Experience to Teach PG Student In Years | PG Teacher Recognition Yes/No | (Recognition Letter Date issued by University.) | Recognition Valid Till date (DD/MM/YYYY) | No. of PG Student s Guided last 5 year | Date of Birth | E-mail ID | Mobile No. give only one number | Aadhar Card No | If Debar red (Yes/ No) | Sign..of Teacher |
| 1 | NA           |  |  |                                  |                          |                                |                      |  |  |                                |   |  |                               |   |  |  |               |           |                                 |                |                        |                  |
| 2 | NA           |  |  |                                  |                          |                                |                      |  |  |                                |   |  |                               |   |  |  |               |           |                                 |                |                        |                  |
| 3 | NA           |  |  |                                  |                          |                                |                      |  |  |                                |   |  |                               |   |  |  |               |           |                                 |                |                        |                  |
| 4 | NA           |  |  |                                  |                          |                                |                      |  |  |                                |   |  |                               |   |  |  |               |           |                                 |                |                        |                  |

- This list hard Copy to be sent with inspection report with Dean and teachers signature and keep soft copy in Excel format (don't paste signature) in Inspection pen Drive to university
- Print must be taken on A-3 Page, MUHS approval status don't write under process Yes or No
- Regularly Updated list in Excel Format (don't paste signature) must be available at College website for use of Examination Department only for Colleges under MUHS not applicable to external teacher from other university

  
Principal

Savitridevi College of Nursing  
Wani, Dist. Yavatmal