





ANNEXURE XVI-C
SUBJECT WISE ELIGIBLE EXAMINERS LIST
(PG COURSES)

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

Annexure-XVI-C

Name of the College : D Y PATIL DENTAL SCHOOL, LOHEGAON, PUNE
Phone/Mobile No: 020-35037779

Name of the Subject: Conservative Dentistry & Endodontics

Sr.No	Full name of the teacher (first name middle name last name)	Designation	Subject/Speciality	Type of Appointment(Re- gular/Temp/Ho- norary)	Qualification	University Approx at (UG)	PG Teaching Experience (in years)after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No.of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No	Adhar card No	If Debarred(Yes/No)	Sign of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Dr. Pradeep Karumakara Shetty	Prof& HOD	Conservative Dentistry & Endodontics	Temp	M.D.S. -June-2009 CONSERVATIVE DENTISTRY AND ENDODONTICS		9 yrs 10 Month	Yes	MUHS/E- 2/UG/112106/2145/ 2021 Dt.18-07- 2022	11	20/07/1978	doopradeepshetty@gmail.com	8888611011	6971 4797 2545	No	
2	Dr. Kiran Kishan Keswani	Reader	Conservative Dentistry & Endodontics	Regular	MDS- August-2009 Conservative Dentistry		1 Year 5 Month	Yes	MUHS/E - 2/UG/112106/3154/ 2021 Dt- 18/11/2021	2	27/09/1980	dkirankeswani@gmail.com	9689996662	8563 5931 9147	No	
3	Dr. Prachi Narayan Joshi	Reader	Conservative Dentistry & Endodontics	Temp	MDS-Sept-2002		12 Yrs 6 Month	Yes	MUHS/E- 2/UG/112106/3503/2 022 Dt.30/09/2022	0	29/10/1975	prachi21lm@yahoo.com	9820244165	9770 5431 1621	No	
4	Dr. Vinod Annapappa Kambli	Reader	Conservative Dentistry & Endodontics	Temp	MDS- Dec -2015 Conservative Dentistry		1 Year 5 Month	Yes	MUHS/E- 2/UG/112106/2802/2 021 Dt-13/10/2021	0	05/07/1977	drvinod05@rediffmail.com	9975337900	6702 6117 2431	No	






DEAN
D. Y. PATIL DENTAL SCHOOL
D. Y. PATIL KNOWLEDGE CITY
VILAS WADI, CHOLU (BK) LOHEGAON
PUNE - 412105

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


Annexure-XVI-C

: D. Y. PATIL DENTAL SCHOOL, LOHEGAON, PUNE
020-35037779
Orthodontics & Dentofacial Dentistry

Name of the College
Phone/Mobile No:
Name of the Subject:

Sr. No	Full name of the teacher (first name middle name last name)	Designation	Subject/Speciality	Type of Appointment(Regular/Temp/Honorar)	Qualification	University Approx at (UG)	PG Teaching Experience (in years)after FGM	PG Teacher Recognition Yes/No	(Recognition Letter Date Issued by University)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No	Adhar card No	If Debarred(Yes/No)	Sign of Teacher
1	DR. SANDEEP ATMARAMJI JETHE	Professor & HOD	Orthodontics & Dentofacial Orthopaedics	Temp	MDS-Oct-2007		7 Yrs 10 Month	Yes	MUHS/E-2/UG/112106/28 02/2021 Dr-13/10/2021	4	01/02/1981	sandeep.jethe@gmail.com	9822269241	9732 1875 3938	No	
2	DR. VARSHA VASUDEV MERANI	Associate Professor	Orthodontics & Dentofacial Orthopaedics	Temp	MDS -June- 2012 Orthodontics		1 year 6 month	Yes	MUHS/E-2/UG/112106/28 02/2021 Dr-13/10/2021	2	29/11/1985	drvarshmerani@gmail.com	9822650461	9297 6167 7311	No	
3	DR. SHAILESH BABARAO DONGRE	Associate Professor	Orthodontics & Dentofacial Orthopaedics	Temp	MDS -May- 2012 Orthodontics		1 year 6 month	Yes	MUHS/E-2/UG/112106/28 02/2021 Dr-13/10/2021	0	05/11/1983	drshaild.09@gmail.com	8412821263	2222 4136 7736	No	



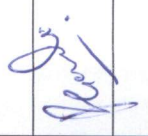

DEAN
D. Y. PATIL DENTAL SCHOOL
C. Y. PATIL KNOWLEDGE CITY
VACHARHOLI (BK) LOHEGAON
PUNE : 412105

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

Annexure-XVI-C

Name of the College : D Y PATIL DENTAL SCHOOL, LOHEGAON, PUNE
Phone/Mobile No: 020-35037779

Name of the Subject: Pediatric & Preventive Dentistry

Sr. No	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Full name of the teacher (first name middle name last name)	Designation	Subject/Speciality	Type of Appointment(Regular/Temporary)	Qualification	University Approx. at (UG)	PG Teaching Experience (in years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University)	No. of PG Students Guided last 5 Year	Date of Birth	E-mail ID	Mobile No	Adhar card No	If Debarred(Yes/No)	Sign of Teacher		
1	Dr. Anand Lingaraj Shigdi	Professor	Pediatric & Preventive Dentistry	Temp	MDS -Feb- 1995 Paedodontics	18 Yrs 2 month	Yes	MUHS/E-2/UG/112106/3376/2021 Dt. 08-12-2021	5	11/12/1966	shigsamand@rediffmail.com	8007705050	7644 8927 5033	No			
2	Dr. Pritesh Namdeo Gawali	Associate Professor	Pediatric & Preventive Dentistry	Temp	MDS -June- 2015 Paedodontics	1 Yr 6 Month	Yes	MUHS/E-2/UG/112106/2802/2021 Dt-13/10/2021	0	23/06/1988	drpriteshgawali@gmail.com	8408906089	6821 5328 5629	No			
3	Dr. Geetanjali Jeevan Jadhav	Associate Professor	Pediatric & Preventive Dentistry	Temp	MDS -June- 2015 Paedodontics	1 year	Yes	MUHS/E-2/UG/112106/2145/2021 Dt. 18-07-2022	0	05/02/1988	geetdent@gmail.com	8308000500	3457 1137 3130	No			


DEAN
D. Y. PATIL DENTAL SCHOOL
PATIL KNOWLEDGE CITY
MARHOLI (BK) LOHEGAON
412105