

For Online Transmission of Question Papers:

SN	Infrastructure facilities at College	Yes /No
Strong Room :		
1	It must have Single Door Entry/Exit (with Safety Door/Grill for windows)	Yes
2	Minimum Area shall be 20 x 20 sq. ft.	Yes
3	Adequate Steel Almira/Cupboard for storage of Answer Books.	Yes
4	C.C.T.V. Camera with recording facility that covers entire area or Downloading and Printing of online transmission of Question Paper process.	Yes
5	Latest version Computer (Minimum 4) and Printer (Minimum 4) with Inverter facility, MS Office, PDF Reader, Winrar or Winzip.	Yes
6	Dual Internet service, Primary with 1:1 dedicated line of 100 mbps speed by class 'A' ISP, and alternate line with 1 : 1 dedicated line of 50 mbps speed, by an another Class 'A' ISP to ensure uninterrupted downloading facility, with 2(two) static IP's, Internet Dongle.	Yes
7	Adequate Number of Paper Rims for printing Question Papers.	Yes
8	One Photocopy Machine, UPS Backup.	Yes
Scanning Room :		
9	Separate Scanning Room for scanning Answer Books after end of Examination Session under CCTV Surveillance. (Laptops and Scanners will be provided by the University Appointed Agency)	Yes
10	Dual Internet service, Primary with 1:1 dedicated line of 100 mbps speed by class 'A' ISP, and alternate line with 1 : 1 dedicated line of 50 mbps speed, by an another Class 'A' ISP to ensure uninterrupted downloading facility, with 2(two) static IP's, Internet Dongle.	Yes

To Set Up DEC for Onscreen Evaluation of Answer Books :

SN	Infrastructure facilities at College	Yes /No
1	Computers (20) with latest licensed Operating System Software (OSS) with antivirus and firewalls to provide all lock, work station with Computer charts and key board tray.	Yes
2	Wiring and Networking (with Raw Power Supply and UPS) and one Printer per DEC	Yes
3	Air conditioners, Bio metric system, CCTV installation, Rest rooms and 24 x 7 security.	Yes
4	Collapsible gate for the main entrance with Name board and locking facility.	Yes
5	Dual Internet service, Primary with 1:1 dedicated line of 100 mbps speed by class 'A' ISP, and alternate line with 1 : 1 dedicated line of 50 mbps speed, by an another Class 'A' ISP to ensure uninterrupted downloading facility, with 2(two) static IP's.	Yes
6	Appointment of one Professor as a Examination Co-ordinator to Co-ordinate this Online process.	Yes
7	Separate Evaluation Room for Evaluating the Answer Books under CCTV Surveillance	Yes

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

D.Y. PATIL DENTAL SCHOOL, LOHEGAON, PUNE

779

dentistics

Sl. No.	Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No/	Pan No/	Date of Birth (Age in Years)	Latest Email Address	Contact No/(Mob)	Debarred Yes/ No
1	Dr. Shiggi Kamal Anand	Professor & HOD	06-07-2017	BDS May-1992	MDS Feb-1996	29 Years 08 Months	Yes	MUHS/Acad/Approval/UG/215/2024 Date: 19/12/2024	7375 9924 0255	AEEP0714K	11-12-1968 56 Years	kamalshiggi@yahoo.co.in	8007305050	No
2	Dr. Paulami Rathindra Bagchi	Reader	01-04-2014	BDS Dec-2003	MDS Apr-2007	17 Years 07 Months	Yes	MUHS/Acad/Approval/UG/215/2024 Date: 19/12/2024	6673 0183 1023	AEVBP2998B	03-12-1978 46 Years	paulamibagchi03@yahoo.com	9881720294	No
3	Dr. Bipin Yeshwantrao Mule	Reader	03-02-2015	BDS-2007	MDS-2013	12 Years 01 Month	Yes	MUHS/E-2/UG/1872/2018 Date: 08/05/2018	9018 2106 0780	BFHPM7434P	14-04-1983 42 Years	bipin1404@gmail.com	9028028528	No
4	Dr. Ashish Santoshrao Bhagat	Reader	03-02-2015	BDS Jan-2008	MDS Jan-2015	10 Years 11 Months	Yes	MUHS/Acad/E-2/UG/43/2026 Date: 13/02/2026	7413 8179 4469	BDKPB0401L	29-04-1985 40 Years	ashish_b2613@yahoo.com	8007450387	No



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D. Y. Patil Dental School

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

DENTAL SCHOOL, LOHEGAON, PUNE

e Dentistry & Endodontics

4	5	6	7	8	9	10	11	12	13	14	15	16	Debarred Yes/ No
Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	IF Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mid)	Debarred Yes/ No
Dr. Pradeep Karunakara Shetye	Prof. & HOD	19-04-2022	BDS Oct-2002	MDS Jun-2009	15 Years 11 Months	Yes	MUHS/Acad/E- 2/UG/273/2025 Date: 03/07/2025	6971 4797 2545	BGRPS0780B	20-07-1978 47 Years	docpradeepshetye@gmail.com	8888611011	No
Dr. Kiran Kishan Keswani	Reader	01-09-2015	BDS May-2003	MDS Aug-2009	16 Years 04 Months	Yes	MUHS/UG/E- 2/53/2207/810/2016 Date: 24/02/2016	8563 5931 9147	ALWPK4100E	27-09-1980 44 Years	drkirankeswani@gmail.com	9689996662	No
Dr. Vinod Amappa Kambli	Reader	28-01-2016	BDS Jun-2005	MDS Dec-2015	10 Years	Yes	MUHS/Acad/E- 2/UG/273/2025 Date: 03/07/2025	6702 6117 2431	BHNPK6284K	05-07-1977 48 Years	drvino05@rediffmail.com	9975337900	No
Dr. Divya Gaurav Dudulwar	Reader	10-04-2017	BDS Jun-2010	MDS Jun-2016	08 Years 09 Months	Yes	MUHS/Acad/E- 2/UG/43/2026 Date: 13/02/2026	9269 5896 6283	DICPD2134P	01-11-1989 35 Years	divyarachalwar2@gmail.com	9766376053	No
Dr. Anuja Panditrao Hakkepatil	Lecturer	02-08-2017	BDS Jun-2008	MDS Jun-2013	07 Years 11 Months	Yes	MUHS/Acad/Approval/UG/ 215/2024 Date: 19/12/2024	6559 5938 6079	ANWPH5663D	29-09-1986 39 Years	anuja.hakkepatil@gmail.com	8552047565	No
Dr. Kavita Pankaj Sonawane	Lecturer	25-11-2021	BDS June-2010	MDS Dec-2013	08 Years 02 Months	Yes	MUHS/Acad/Approval/UG/ 215/2024 Date: 19/12/2024	6379 4248 7885	BEWPPB5834G	15-06-1988 37 Years	drkavibade88@gmail.com	8668612639	No



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

DENTAL SCHOOL, LOHEGAON, PUNE

logy

4	5	6	7	8	9	10	11	12	13	14	15	16	17
Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Bith(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
Dr. Prasad Prakash Karande	Professor & HOD	01-04-2014	BDS Nov-2005	MDS June-2011 Oral Pathology	13 Years 04 Months	Yes	MUHS/Acad/E-2/UG/43/2026 Date: 13/02/2026	9214 6183 8600	CEDPK2555K	25-11-1983 41 Years	prasad352627@rediffmail.com	9028755885	No
Dr. Mrinal Vishweshwar Shete	Reader	03-02-2015	BDS May-2009	MDS May-2014 Oral Pathology	11 Years	Yes	MUHS/Acad/E-2/UG/43/2026 Date: 13/02/2026	8025 4508 6191	CYEPS5838J	28-03-1988 37 Years	shete.mrinal@gmail.com	9075098231	No



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

L.DENTAL SCHOOL, LOHEGAON, PUNE.

9

urgery

Subject	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification n & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Bith(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/No
urgery	Dr. Vikram Ramchandra Karande	Professor & HOD	02-09-2021	BDS May-2001	MDS May-2006 OMFS	18 Years 04 Months	Yes	MUHS/Acad/Appro val/UJG/86/2024 Date: 25/06/2024	4042 0551 5427	AWGPK2480C	23-05-1980 45 Years	drvikramkarande@gmail.com	9137072340	No
urgery	Dr. Pratik Sheshrao Hande	Reader	01-04-2014	BDS June-2004	MDS Oct-2010 OMFS	11 Years 10 Months	Yes	MUHS/E- 2/UJG/750/2018 Date: 08/02/2018	9564 9929 6482	AFBPH7430K	15-12-1982 42 Years	drprathyk@gmail.com	8055320040	No
urgery	Dr. Vaishali Bhaskarrao Pagare	Reader	01-09-2021	BDS Nov-2009	MDS May-2018 OMFS	04 Years 05 Months	Yes	MUHS/Acad/E- 2/UJG/43/2026 Date: 13/02/2026	6012 6243 1502	ATSPPP6338H	14-09-1986 38 Years	dr.vaishali.kk@gmail.com	9890341571	No



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

DENTAL SCHOOL, LOHEGAON, PUNE

9

ology

	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
Dr. Girish Neelkanth Baykod	Professor & HOD	20-06-2020	BDS May-1996	MDS Sep-1999 Periodontics	25 Years 03 Months	Yes	MUHS/Acad/Approval/UG/215/2024 Date: 19/12/2024	2914 7201 1730	AERP89595E	22-07-1974	gnbyakod@gmail.com	9890467812	No	
Dr. Rakesh Ajit Mutha	Reader	01-04-2014	BDS Feb-2007	MDS Jul-2011 Periodontology	11 Years 10 Months	Yes	MUHS/Acad/E-2/UG/273/2025 Date: 03/07/2025	9082 1708 8839	ANDP4410E	29-12-1984	mutha.rakesh@gmail.com	7387520131	No	
Dr. Sachin Vasant Rao Bhagat	Reader	28-01-2016	BDS Jun-2008	MDS Jun-2014 Periodontology	10 Years	Yes	MUHS/Acad/E-2/UG/273/2025 Date: 03/07/2025	2480 3771 2406	CAIPB5824P	15-07-1984	sachin_bhagat982@gmail.com	8007379361	No	
Dr. Anuja Mohanir	Lecturer	15-02-2018	BDS Jun-2010	MDS Apr-2016 Periodontology	07 Years 11 Months	Yes	MUHS/Acad/Approval/UG/215/2024 Date: 19/12/2024	9024 4141 9969	BUPEPM4440D	20-12-1988	anuja_mohanir@yahoo.in	7875815946	No	



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D. Y. Patil Dental School

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

DENTAL SCHOOL, LOHEGAON, PUNE
Dentistry & Dentofacial Dentistry

	4	5	6	7	8	9	10	11	12	13	14	15	16	Debarred Yes/ No
	Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualificatio n & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mo)	Debarred Yes/ No
& Dentistry	Dr. Sandeep Atmaramji Jethe	Professor & HOD	01-04-2019	BDS May-2003	MDS Oct-2007	17 Years 05 Months	Yes	MUHS/Acad/Approv al/UG/215/2024 Date: 19/12/2024	9732 1875 3938	AKPPJ7548B	01-02-1981 44 Years	sandeep.jethe@gmail.com	9822269241	No
& Dentistry	Dr. Varsha Vasudev Merani	Reader	01-04-2014	BDS Oct-2008	MDS Jun-2012	11 Years 10 Months	Yes	MUHS/Acad/Approv al/UG/215/2024 Date: 19/12/2024	9297 6167 7311	CFCPM7752L	29-11-1985 39 Years	drvarshmerani@gmail.com	9822650461	No
& Dentistry	Dr. Shailesh Babarao Dongre	Reader	28-01-2016	BDS Jun-2006	MDS May-2012	12 Years 01 Month	Yes	MUHS/Acad/E- 2/UG/273/2025 Date: 03/07/2025	2222 4136 7736	AQNPD7081P	05-11-1983 41 Years	drshaidl.09@gmail.com	8412821263	No
& Dentistry	Dr. Arun Rameshwar Mhaske	Lecturer	03-02-2015	BDS Aug-2008	MDS Jun-2013	11 Years	Yes	MUHS/Acad/Approv al/UG/215/2024 Date: 19/12/2024	3452 8366 7804	AYWPM6398K	02-02-1983 42 Years	drarunmhaske@gmail.com	8975074379	No
& Dentistry	Dr. Suyog Shankar Shendage	Lecturer	15-02-2018	BDS Nov-2011	MDS May-2017	07 Years 11 Months	Yes	MUHS/Acad/E- 2/UG/273/2025 Date: 03/07/2025	4739 2601 1238	DIAPS2893J	04-06-1988 37 Years	suyogshendage@gmail.com	9359578558	No



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

L DENTAL SCHOOL, LOHEGAON, PUNE
& Preventive Dentistry

	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Full name of the teacher (first/ middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Bith(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No	
Dr. Anand Lingaraj Shigli	Professor & HOD	30-06-2017	BDS May-1989	MDS Feb-1995	30 Years 08 Months	Yes	MUHS/Acad/E-2/UG/43/2026 Date: 13/02/2026	7644 8927 5033	ABYPA5554E	11-12-1966 58 Years	shigisanand@rediffmail.com	8007705050	No	
Dr. Saraswathi Vishnu Naik	Reader	19-12-2025	BDS Mar-2000	MDS May-2009	14 Years 08 Months	Yes	MUHS/Acad/E-2/UG/43/2026 Date: 13/02/2026	2405 7047 4925	CYJPS6170E	15-03-1974 51 Years	drsaru1976@gmail.com	9448439399	No	
Dr. Geetanjali Jeevan Jadhav	Reader	05-11-2016	BDS Aug-2010	MDS June-2016	09 Years 03 Months	Yes	MUHS/Acad/E-2/UG/273/2025 Date: 03/07/2025	3457 1137 3130	AGPPJ6313E	05-02-1988 37 Years	geetdent@gmail.com	8308000500	No	



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D. Y. Patil Dental School

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

DENTAL SCHOOL, LOHEGAON, PUNE

Dentistry & Radiology

Subject	4	5	6	7	8	9	10	11	12	13	14	15	16	Debarred Yes/No
	Full name of the teacher (first/ middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mob)	
Dentistry & Radiology	Dr. Anagha Vishweshwar Shete	Reader & HOD	02-02-2016	BDS Jun-2005	MDS May-2011	14 Years 05 Months	Yes	MUHS/UG/E-2/53/2207/2759/2016 Date: 25/04/2016	3533 7287 5282	CZHPS7480J	21-07-1984 41 Years	dranaghashete@yahoo.com	9420490711	No
Dentistry & Radiology	Dr. Abhijeet Rajendra Sande	Lecturer	17-09-2022	BDS Jun-2008	MDS Apr-2013	12 Years 05 Months	Yes	MUHS/Acad/Approval /UG/21/5/2024 Date: 19/12/2024	4965 9569 9868	FEAPS6234H	31-07-1986 39 Years	sandeabhijeet@gmail.com	9975720693	No



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

DENTAL SCHOOL, LOHEGAON, PUNE

17th Dentistry

	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
h	Dr. Karibasappa Gundabaktha Nagappa	Reader & HOD	17-05-2016	BDS-1998	MDS-2005 PHD	20 Years 07 Months	Yes	MUHS/E- 2/UG/750/2018 Date: 08/02/2018	8540 8873 2426	ASQPK1525L	31-05-1975 50 Years	drkb31@gmail.com	9326555659	No



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

DENTAL SCHOOL, LOHEGAON, PUNE

atomy

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Sl. No.	Full name of the teacher (first/ middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No			
1	4 Dr. Namita Alok Sharma	5 Reader & HOD	6 11-11-22	7 MBBS 1987	8 MD Anatomy 2009	9 31 Years 01 Month	10 Yes	11 MUHS/Acad/E-2/UG/273/2025 Date: 03/07/2025	12 6750 7106 7478	13 AKHPS1026M	14 23-07-1963 62 Years	15 drnamitaalok2021@gmail.com	16 16	17 NO			



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

DENTAL SCHOOL, LOHEGAON, PUNE

4	5	6	7	8	9	10	11	12	13	14	15	16	17
Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification n & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Bith(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
Dr. Yasmeen Faiz Zubairy	Reader & HOD	01-07-2024	B.Sc. 1978	M.Sc 1980 PHD 2013	24 Years 06 Months	Yes	MUHS/Acad/Appro val/UG/215/2024 Date: 19/12/2024	6240 9571 7441	AADPZ0977A	23-09-1957 67 Years	yasmeenzubairy@gmail.com	9823336664	No
Ms.Chhaya Vikram Jawlikar	Lecturer	02-03-2022	B.Sc. 2007	M.Sc. 2010	12 Years 06 Months	Yes	MUHS/Acad/Appro val/UG/86/2024 Date: 25/06/2024	3013 5072 3134	DVFP50152C	03-12-1986 38 Years	shindechava_13@rediffmail.com	9975378101	No



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D. Y. Patil Dental School

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

DENTAL SCHOOL, LOHEGAON, PUNE

4	5	6	7	8	9	10	11	12	13	14	15	16	17
Full name of the teacher (first/ middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
DR. Swati Yogesh Joshi	Reader & HOD	01-09-2015	B.Sc. Medical 1993	M.Sc. Medical 1996 Ph.D. Medical 2003	24 Years 07 Months	Yes	MUHS/UG/E- 2/53/2207/2759/2016 Date: 25/04/2016	6252 4967 9674	ANJPB4720E	06-07-1973 52 Years	jswatiy@gmail.com	9623446287	No
Ms. Shailaja Ravindra Panhalkar	Lecturer	28-01-2016	B.Sc. Medical 1994	M.Sc. Microbiology 2000	10 Years	Yes	MUHS/UG/E- 2/53/2207/810/2016 Date: 24-02-2016	2734 1282 3066	BYOPP9350D	23-04-1974 51 Years	panhalkarshailaja@gmail.com	9423269435	No
Mr. Ravindra Rangrao Panhalkar	Lecturer	01-08-2016	B.Sc. Medical 1994	M.Sc. Microbiology 1997	09 Years 06 Months	Yes	MUHS/E- 2/UG/750/2018 Dt. 08-02-2018	7592 2059 4749	AOKPK5403M	22-07-1974 51 Years	ravipanhalkar@gmail.com	9421122524	No



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

DENTAL SCHOOL, LOHEGAON, PUNE

ology

Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
4 Dr. Meena Bhikugonda Patil	5 Reader & HOD	6 01-06-2026	7 MBBS-1988	8 MD-Jun-2011 Pathology	9 26 Years	10 No	11 -	12 3838 6975 1873	13 AHFPP1088F	14 16-05-1963 62 Years	15 patilmeena64@gmail.com	16 9423574234	17 No



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D. Y. Patil Dental School

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

DENTAL SCHOOL, LOHEGAON, PUNE

Medicine

	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	Full name of the teacher (first / middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	IF Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Bith(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
ne	Dr.Samirkumar Kunnod Rama	Reader & HOD	04-11-2019	MBBS-1997	MD-2011	6 Years 03 Months	Yes	MUHS/Acad/Approval/UG/86/2024 Date: 25/06/2024	5494 4694 6041	AGQPR7818H	18-12-1975 49 Years	ramasamir20@yahoo.com	7057725738	No



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

DENTAL SCHOOL, LOHEGAON, PUNE

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	4	5	6	7	8	9	10	11	12	13	14	15	16	17
	Full name of the teacher (first/ middle/last)	Designation	Date Of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG Passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Bith(Age in Years)	Latest Email Address	Contact No.(Mob)	Debarred Yes/ No
	Dr. Sanjay Krishna Ranade	Lecturer	28-01-2016	MBBS 1977	MS Medicine 1981	12 Years 02 Months	Yes	MUHS/UG/E-2/53/2207/810/2016 Date: 24/02/2016	3107 4352 9810	ADOPRS636A	15-04-1956 69 Years	sanjay82ms@yahoo.com	9890057758	No
	Dr. Ashishkumar Shrisishmakumar Shrivastava	Lecturer	01-06-2020	MBBS 1999	DNB Gen. Surg 2006	06 Years 08 Months	Yes	MUHS/Acad/Approval/UG/86/2024 Date: 25/06/2024	9105 2439 5976	AOJPS3965B	20-06-1978 47 Years	ashriva@gmail.com	9371460636	No



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D. Y. Patil Dental School

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

ATIL DENTAL SCHOOL, LOHEGAON, PUNE

1779

Conservative Dentistry & Endodontics

Sl. No.	4	5	6	7	8	9	10	No. of PG Students Guided last 5 Year	12	13	14	15	16	17
Sl. No.	Subject/Speciality	Type of Appointment(Regular/Temporary/Monorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in years)after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date Issued by University)		Date of Birth	E-mail ID	Mobile No	Adhar card No	If Debarred(Yes/No)	Sign of Teacher
1	Conservative Dentistry & Endodontics	Temp	M.D.S. -June-2009 Conservative Dentistry	Yes	11 years 11 Month	Yes	MUHS/E- 2/PG/274/2025 Dated: 03/07/2025	8	20-07-1978	docpradeepsheety@gmail.com	8888611011	6971 4797 2545	No	
2	Conservative Dentistry & Endodontics	Regular	MDS- August-2009 Conservative Dentistry	Yes	04 Years 05 Months	Yes	MUHS/E- 2/UG/112106/3154 /2021 Dated: 18/11/2021	2	27-09-1980	dkirankeswani@gmail.com	9689996662	8563 5931 9147	No	
3	Conservative Dentistry & Endodontics	Temp	MDS- Dec -2015 Conservative Dentistry	Yes	04 Years 05 Months	Yes	MUHS/E- 2/PG/274/2025 Dated: 03/07/2025	-	05-07-1977	drvinoth05@rediffmail.com	9975337900	6702 6117 2431	No	
4	Conservative Dentistry & Endodontics	Temp	MDS- June -2016 Conservative Dentistry	Yes	02 Year 03 Month	Yes	MUHS/Acad/Approval/UG/327/2023 DT- 29/11/2023	-	01-11-1989	divyaraachahvar2@gmail.com	9766376053	9269 5896 6283	No	



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SUBJECTWISE ELIGIBLE EXAMINERS LIST(PG Courses)

ATIL DENTAL SCHOOL, LOHEGAON, PUNE

779

Pediatric & Preventive Dentistry

4	5	6	7	8	9	10	11	12	13	14	15	16	17
Subject/Speciality	Type of Appointment(Regular/Temporary/Honorary)	Qualification	University Approval 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
Pediatric & Preventive Dentistry	Temp	MDS -Feb- 1995 Paedodontics	Yes	22 Years 02 Months	Yes	MUHS/Acad/ Approval/UG/3 227/2023 DT: 29/11/2023	4	11-12-1966	shigsamand@rediffmail.com	8007705050	7644 8927 5033	No	
Pediatric & Preventive Dentistry	Temp	MDS -May- 2009 Paedodontics	Yes	10 Years 05 Months	No	-	6	15-03-1974	drsanu1976@gmail.com	9448439399	2405 7047 4925	No	
Pediatric & Preventive Dentistry	Temp	MDS -June- 2016 Paedodontics	Yes	03 Years 11 Months	Yes	MUHS- 2/PG/274/2025 Dated: 03/07/2025	-	05-02-1988	geetdenti@gmail.com	8308000500	3457 1137 3130	No	



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SUBJECTWISE ELIGIBLE EXAMINERS LIST(PG Courses)**

TIL DENTAL SCHOOL, LOHEGAON, PUNE
779

Orthodontics & Dentofacial Dentistry

Sl. No.	Subject/Speciality	Type of Appointment(Regular/Temporary/Honorary)	Qualification	University Approved at (UC)	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
	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	Orthodontics & Dentofacial Orthopaedics	Temp	MDS-April-2008	Yes	10 Yrs 10 Months	Yes	MUHS/E-2PG/216/2024 Dated: 19/12/2024	4	01-02-1981	sandeep.jethes@gmail.com	9822269241	9732 1875 3938	No	
2	Orthodontics & Dentofacial Orthopaedics	Temp	MDS-June-2012 Orthodontics	Yes	04 Years 05 Months	Yes	MUHS/E-2PG/216/2024 Dated: 19/12/2024	1	29-11-1985	dr.vanshmerani@gmail.com	98222650461	9297 6167 7311	No	
3	Orthodontics & Dentofacial Orthopaedics	Temp	MDS-May-2012 Orthodontics	Yes	04 Years 05 Months	Yes	MUHS/E-2PG/274/2025 Dated: 03/07/2025	-	05-11-1983	dr.shahid.09@gmail.com	8412821263	2222 4136 7736	No	



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SUBJECTWISE ELIGIBLE EXAMINERS LIST(PG Courses)

D. Y. PATIL DENTAL SCHOOL, LOHEGAON, PUNE
35037779
Prosthodontics

3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Designation	Subject/Speciality	Type of Appointment(Regular/Temporary)	Qualification	University Approved 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
Prof & HOD	Prosthodontics	Temp	MDS-1996	Yes	19 Years 03 Months	Yes	MUHS/E2/PG/09/2 025 Dt. 09.01.2025	4	11-12-1968	kamalshiggi@yahoo.co.in	8007305050	7375 9924 0255	No	
Reader	Prosthodontics	Temp	MDS-2007	Yes	01 Year 05 Months	Yes	MUHS/E2/PG/09/2 025 Dt. 09.01.2025	2	03-12-1978	paulambagch03@yahoo.com	9881720294	6673 0183 1023	No	
Reader	Prosthodontics	Regular	MDS-2013	Yes	01 Year 05 Months	Yes	MUHS/E2/PG/09/2 025 Dt. 09.01.2025	-	14-04-1983	bipin1404@gmail.com	9028028528	9018 2106 0780	No	
Reader	Prosthodontics	Temp	MDS-2015	Yes	01 Year 05 Months	Yes	MUHS/E2/PG/09/2 025 Dt. 09.01.2025	-	29-04-1985	ashish_b2613@yahoo.com	8007450387	7413 8179 4469	No	



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