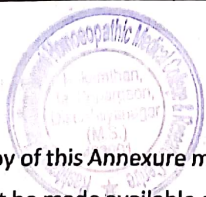


EXAMINATION RELATED INFORMATION FOR A.Y. 2025 - 2026
For Online Transmission of Question Papers:

Sr. No.	Infrastructure facilities at College	Yes /No
Strong Room :		
1	It must have a door Entry/Exit (with Safety Door/Grill for windows)	Yes
2	Minimum Area shall be 20 x 20 sq. ft.	Yes
3	Adequate Steel Almirah/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 :

Sr. No.	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



Signature of Principal with Seal

Principal
 Rashtrasant Javardhan Swami
 Homoeopathic Medical College & R.C.,
 Kokamthan, Kopargaon,
 Ahilyanagar - 423 601

1. Hard copy & soft copy of this Annexure must be submitted to the University.
2. The information must be made available on the College website.

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

Name Of The College :Rashtrasant Janardhan Swami Homeopathic Medical College & Research Centre Kopergaon
Phone/Mobile No.: 9371679000
Name Of The Subject : Anatomy

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experience after PG (Yes/No)	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age) in years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RUS HMC	Anatomy	Dr. Pratik More	Professor	28-04-2022	2008	2012	14	Yes	MUHS/E-4/UG/143116/721/2025/18-08-2025	8429 8936 9735	AZKPM1281G	22-04-2025	drpratik22@gmail.com	9702883554	No
2	RUS HMC	Anatomy	Dr. Vikram Dhameshwar	Asso. Professor	09-04-2025	2008	2012	12	Yes	MUHS/E-4/UG/143116/721/2025/18-08-2025	8745 2796 2650	AKSPD3762C	05-10-1984	dr.vikramd3762@gmail.com	8087744487	No
3	RUS HMC	Anatomy	Dr. Priti Shitalkumar Sonawane	Asst. Professor	01-07-2022	2007	2022	3.6	Yes	MUHS/E-4/UG/143116/152025/14-11-2024	9469 9093 5786	DTZP50831N	07-10-1983	priti@andha@gmail.com	9404803682	No

Name Of The College :Rashtrasant Janardhan Swami Homeopathic Medical College & Research Centre Kopergaon
Phone/Mobile No.: 9371679000
Name Of The Subject : Physiology Incl: Biochemistry

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experience after PG (Yes/No)	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age) in years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RUS HMC	Physiology	Dr. Prashant Shinde	Professor	08-12-2025	2006	2010	15	No		9302 7667 5601	CXYP50708Q	12-08-1983	prashantshinde@gmail.com	9987141575	No
2	RUS HMC	Physiology	Dr. Vinaya Acharya	Asso. Professor	22-10-2025	2009	2012	4	No		8722 3003 2514	ASCPA9521A	17-03-1986	dr.vinayacharya@gmail.com	99222109422	No

Name Of The College :Rashtrasant Janardhan Swami Homeopathic Medical College & Research Centre Kopergaon
Phone/Mobile No.: 9371679000
Name Of The Subject : Homeopathic Pharmacy

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experience after PG (Yes/No)	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age) in years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RUS HMC	PHARMACY	Dr. Manjusha V. Ahire	Asso. Professor	09-04-2025	2016	2016	7	Yes	MUHS/E-4/UG/143116/851/2025/16-09-2024	3692 5934 5553	BEIPA1298F	29-07-1987	manjushahire2@gmail.com	9021325743	No
2	RUS HMC	PHARMACY	Dr. Chudhwal Kalyani D.	Asst. Professor	21-10-2021	2015	2019	5	Yes	MUHS/E-4/UG/143116/1372025/14-11-2024	6536 2947 7951	BFUPC2736R	13-08-1991	kalyanichudhwal@gmail.com	9425550122	No

Name Of The College :Rashtrasant Janardhan Swami Homeopathic Medical College & Research Centre Kopergaon
Phone/Mobile No.: 9371679000
Name Of The Subject : Organon of Medicine

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experience after PG (Yes/No)	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age) in years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RUS HMC	Organon	Dr. Vaishali Kakad	Professor	30-06-2023	1996	2002	22	Yes	MUHS/E-4/UG/143116/721/2025/18-08-2025	8584 9905 8843	CSVPK9808D	22-03-1975	dr.vbkakad@gmail.com	9284135865	No
2	RUS HMC	Organon	Dr. Bhausaheb Ramdas Halnor	Asso. Professor	04-08-2025	2001	No	23	No		7341 2953 6693	ACLPH2841R	11-11-1978	bhausahebhalnor78@gmail.com	8338907435	No

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experie nce after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adha r No.	Pan No.	Date of Birth (Age) In years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RJS HMC	HMM	Dr.Madhu Agrawal													
2	RJS HMC	HMM	Dr.Sheetal Mandule	Professor	01-09-2025	1990	2006	31	No							
3	RJS HMC	HMM	Dr. Mandeep Gajral	Asso. Professor	01-10-2025	2009	2021	4	No							
				Asso. Professor	18-08-2025	2007	2010	6	Yes	MUHS/E-4/UG/143116/721/2025/18-08-2025	9974 8792 6081	AKNPA80368	26-01-1967	drmadhuika.agrawal@gmail.com	9422819740	No
											4122 2669 8461	BCNPB0701P	18-02-1988	sheetalmandule@gmail.com	9762054813	No
											6493 8115 3935	BAIPGS1000	07-11-1983	dr.mandeepgajral@gmail.com	9420363868	No

Name Of The College :Rashtrasant Janardhan Swami Homoeopathic Medical College & Research Centre Kopargaon
Phone/Mobile No.: 9371679000

Name Of The Subject : Pathology & Microbiology

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experie nce after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adha r No.	Pan No.	Date of Birth (Age) In years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RJS HMC	Pathology	Dr.Indrayani Badhe	Professor	01-09-2025	2004	2008	27	No							
2	RJS HMC	PATHOLOGY	Dr.Ganesh Gavhane	Asso. Professor	03-05-2023	2013	2019	7	Yes	MUHS/E-4/UG/143116/15/2025/14-11-2024	5804 0598 4468	ASLPG0043L	27-08-1975	Indrayanibadhe@gmail.com	9822718459	No
													13-06-1990	drganeshgavhane29@gmail.com	9270613837	No

Name Of The College :Rashtrasant Janardhan Swami Homoeopathic Medical College & Research Centre Kopargaon
Phone/Mobile No.: 9371679000

Name Of The Subject : OBSTETRICS & GYNAC

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experie nce after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adha r No.	Pan No.	Date of Birth (Age) In years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RJS HMC	OBGY	Dr. Suhas C. Vyavahare	Professor	04-11-2025	2002	2011	8	No							
2	RJS HMC	OBGY	Dr. Ulka Hiray	Asso. Professor	15-05-2025	2008	2017	6	No							
											2484 5721 2978	ABVPV4564G	05-03-1973	suhasvyavahare@rediffmail.com	9422764016	No
											8161 5101 7615	APIPH8459K	09-05-1985	dr.ulkaatil1@gmail.com	9527647881	No

Name Of The College :Rashtrasant Janardhan Swami Homoeopathic Medical College & Research Centre Kopargaon
Phone/Mobile No.: 9371679000

Name Of The Subject : Surgery

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experie nce after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adha r No.	Pan No.	Date of Birth (Age) In years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RJS HMC	SURGERY	Dr. Vrushali Suhas Vyavahare	Professor	01-10-2022	2001	2011	14	Yes	MUHS/E-4/UG/143116/15/2025/14-11-2024	8130 1847 5217	ADAPV4077D	25-02-1976	drvrushalivyavahare@rediffmail.com	9860002444	No
2	RJS HMC	SURGERY	Dr.Ratna Kunal Chopade	Asso. Professor	09-04-2025	2007	2012	8	Yes	MUHS/E-4/UG/143116/721/2025/18-08-2025	3036 1641 0269	AWHPC9341D	01-05-1986	dr.ratnac@gmail.com	9028591046	No

Name Of The College :Rashtrasant Janardhan Swami Homoeopathic Medical College & Research Centre Kopargaon
Phone/Mobile No.: 9371679000

Name Of The Subject : PRACTICE OF MEDICINE

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teachi ng Experie nce after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adha r No.	Pan No.	Date of Birth (Age) In years	Latest Email Address	Conta ct No. (Mob.)	Deba rred Yes/ No
1	RJS HMC	PRACTICE OF MEDICINE	Dr. Rajendra B. Kshatriya	Professor	21-09-2023	1993	NO	29	Yes	MUHS/E-4/UG/143116/15/2025/14-11-2024	6925 9747 9533	AGSPK4772B	01-01-1968	sainetrahomeo@gmail.com	9822678310	No
2	RJS HMC	PRACTICE OF MEDICINE	DR. MAHESH B. DUSANE	Asso. Professor	19-03-2024	2013	2018	7	Yes	MUHS/E-4/UG/143116/15/2025/14-11-2024	9077 5867 6861	ARHPD7243A	02-01-1989	drmaheshdusane@gmail.com	7276402602	No

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG	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	RJS HMC	COMMUNITY MEDICINE	Dr.Vyankatesh Khade	Professor	30-09-2023											
2	RJS HMC	COMMUNITY MEDICINE	Dr.Nayana Hiray	Asso. Professor	11-02-2025	2007	2011	14	Yes	MUHS/E-4/UG/143116/775/2025/28-08-2025	8398 1492 8628	BEIPK7673A	01-06-1984	drvankateshmd007@gmail.com	8087307231	No
						2010	2014	5	Yes	MUHS/E-4/UG/143116/721/2025/18-08-2025	3701 0470 0319	AWOPB5712C	20-03-1986	nayanbh21@gmail.com	9834857501	No

Name Of The College :Rashtrasant Janardhan Swami Homoeopathic Medical College & Research Centre Kopargaon
 Phone/Mobile No.: 9371679000
 Name Of The Subject : Forensic Medicine & Toxicology

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG	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	RJS HMC	FMT	Dr. Sayali Gunjal	Asso. Professor	15-05-2025	2012	2017	6	No		3708 9300 5716	BYNPG7294Q	18-09-1990	dr.sayaligunjal@gmail.com	9604014665	No

Name Of The College :Rashtrasant Janardhan Swami Homoeopathic Medical College & Research Centre Kopargaon
 Phone/Mobile No.: 9371679000
 Name Of The Subject : Repertory

Sr. No	College Name	Subject	Full name of the Teacher (First/Middle/La st)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG	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	RJS HMC	Repertory	Dr. Suresh Thombare	Professor	05-05-2025	2008	2014	10	No		8472 4033 6002	AHLPT4779R	16-07-1986	drsureshthombare07@gmail.com	9004927592	No



Signature of Principal with Seal
 Principal
 Rashtrasant Janardhan Swami
 Homoeopathic Medical College & R.C.,
 Kokamthan, Kopargaon,
 Ahilyanagar - 423 601