**Annexure-XIII(B)**

**MAHARASHTRAUNIVERSITYOFHEALTHSCIENCES,NASHIK**
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College:-Dr Hedgewar College of Nursing, Chh. Sambhajinagar. Phone/Mobile No of college. :-0240-2331195, 960712337

Full Address Of College :-Near Gajanan Mandir, Garkheda, Chh. Sambhajinagar

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| 2 | Dr Hedgewar College of Nursing | Nursing Education | Mr. Ramteke Amol Mukundrao | Professor | 2011 | Mental Health Nursing | - | - | Regular | 1 year 6 month | 12 Years 5 months | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | 1 | 10.09.1983 | amolramteke1983@gmail.com | 9975715802 | 328319347310 | No | |
| 3 | Dr Hedgewar College of Nursing | Nursing Education | Dr. Duraphe Vaibhavi Mahesh. | Associte Professor | 2009 | Child Health Nursing | - | - | Regular | 1 year 7 month | 13 years 9 Months | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | 2 | 2.07.198 | vaibhu_1@rediffmeil.com | 9730131180 | 750421145806 | No | |
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| 7 | Dr Hedgewar College of Nursing | Nursing Education | Ms. Tupe Bharati K. | Assistant Professor | 2018 | Community Health Nursing | - | - | Regular | 1 year 8 month | 6 year 1 month | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | - | 25.06.1986 | bharatitupe1986@gmail.com | 9420034549 | 290013366166 | No | |
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| 9 | Dr Hedgewar College of Nursing | Nursing Education | Ms. Khandagale Namrata B. | Assistant Professor | 2020 | Obstetrics and Gynecology Nursing | - | - | Regular | 2 years | 3 years 3 months | 1 year | No | - | - | 1 | 06.02.1994 | namratakhandagle9823@gmail.com | 9067880068 | 767992012162 | No | |

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| 6 | Dr Hedgewar College of Nursing | Advance Nursing Practice | Mrs. Udaykar Sheetal Makarand | Associate Professor | 2013 | Medical Surcal Nursing | Oncology Nursing | - | Regular | 3 year 8 month | 5 years 7 months | 6 months | In Process | In Process | In Process | 2 | 02.09.1984 | sheetmak84@gmail.com | 7745047229 | 499414658155 | No | |
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| Sr. No. | 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 (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 Students 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 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 1 | Dr Hedgewar College of Nursing | Child Health Nursing | Dr. Duraphe Vaibhavi Mahesh. | Associte Professor | 2009 | Child Health Nursing | - | - | Regular | 1 year 7 month | 13 years 9 Months | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | 2 | 2.07.198 | vaibhu_1@rediffmeil.com | 9730131180 | 750421145806 | No | |

- 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

**Annexure-XIII(B)**

**MAHARASHTRAUNIVERSITYOFHEALTHSCIENCES,NASHIK**
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College:-Dr Hedgewar College of Nursing, Chh. Sambhajinagar. Phone/Mobile No of college. :-0240-2331195, 960712337
Full Address Of College :-Near Gajanan Mandir, Garkheda, Chh. Sambhajinagar

| Sr. No. | 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 (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 Students 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 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 1 | Dr Hedgewar College of Nursing | Mental Halth Nursing | Mr. Ramteke Amol Mukundrao | Professor | 2011 | Mental Health Nursing | - | - | Regular | 1 year 6 month | 12 Years 5 months | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | 1 | 10.09.1983 | amolramteke1983@gmail.com | 9975715802 | 328319347310 | No | |

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**Annexure-XIII(B)**

**MAHARASHTRAUNIVERSITYOFHEALTHSCIENCES,NASHIK**
**SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of the College:-Dr Hedgewar College of Nursing, Chh. Sambhajinagar. Phone/Mobile No of college. :-0240-2331195, 960712337

Full Address Of College :-Near Gajanan Mandir, Garkheda, Chh. Sambhajinagar

| Sr. No. | 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 (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 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 1 | Dr Hedgewar College of Nursing | Community Health Nursing | Mr.Hiremath Prashanth Srikanth | Associte Professor | 2012 | Community Health Nursing | - | - | Regular | 1 year 8 month | 12 years 8 months | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | - | 01.01.1986 | prashanthiremath1008@gmail.com | 9595458586 | 436902466026 | No | |
| 2 | Dr Hedgewar College of Nursing | Community Health Nursing | Ms. Tupe Bharati K. | Assistant Professor | 2018 | Community Health Nursing | - | - | Regular | 1 year 8 month | 6 year 1 month | 1 year 6 months | Yes | MUHS/PG/E-6/154122/2434/2023 | 11.09.2025 | - | 25.06.1986 | bharatitupe1986@gmail.com | 9420034549 | 290013366166 | No | |

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