# **ANNEXURE VIII**

(Subject Wise Teachers)

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK **DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF**

(Approved + Not Approved UG Degree/ PG Degree) AS ON: 30/06/2023

Whether UG / UG+PG **Faculty: PHYSIOTHERAPY Subject: ALL SUBJECTS OF PHYSIOTHERAPY** 

Name of College: HORIZON COLLEGE OF PHYSIOTHERAPY College Code: 1164114 **Intake Capacity: 50** 

S. N.	Name of the Teaching Staff	Desig - nation	Teaching Subject	Mobile Number	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specify	Date of Appoint - ment	Total Teaching Experi ence in years	Total Teaching Experi ence in years	Type of Appoint - ment	University Approval Status	Details teach Recognit MUH (Yes/I	ner ion by HS	Photograph with Signature
							category)		of UG	of PG	Temp./Regular Contractual	(Yes/No)	Temp/ Regular/ Contrac- tual	Letter No. & date	
1	Dr. N. Srinivasan	Principal cum Professor	Any Subject	9000300416	sanjana_pt@yahoo.com	20/07/74	NA	28/01/2021	10 Y	16 Y 05 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		
2	Dr. Guntuka Kalyan	Associate Professor	Kinesiotherapy & Kinesiology	9177990033	k9866990033@ gmail. com	06/07/80	NA	01/06/2022	01 Y	10 Y 05 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		
3	Dr. K. Vishnuvardhan Reddy	Associate Professor	Electrotherapy	8790966229	k.vishnureddy@ gmail. com	19/10/78	NA	03/11/2022		07 Y 05 M	Regular	YES	MUHS/ UG/E-6 /2261/ 2022, Dt. 16/11/22		
4	Dr. Vani Kumari Thota	Assistant Professor	Kinesiotherapy & Kinesiology	9494390033	v9494390033@ gmail. com	05/08/81	NA	01/06/2022	07 Y 06 M	05 Y 01 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		
5	Dr. Dhongade Pooja Rajesh	Assistant Professor	Kinesiotherapy & Kinesiology	9763984090	poojadhongade21@ gmail.com	21/10/95	SC	01/04/2022		01Y 03 M	Regular	YES	MUHS/ UG/E-6 /2261/ 2022, Dt. 16/11/22		

6	Dr. Bargaje Pallavi Vitthal	Assistant Professor	Electrotherapy	9604632895	pallavi.bargaj@ gmail. com	05/01/94	VJNT	01/04/2022	 01Y 03 M	Regular	YES	MUHS/ UG/E-6 /2261/ 2022, Dt. 16/11/22	
7	Dr. Sontakke Sayali Nandkishore	Assistant Professor	Electrotherapy	9823674405	sontakkesayali767@ gmail.com	26/08/96	NA	01/05/2022	 01Y 02 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22	 (a.a)

• Note: The College shall submit one hard copy & soft copy (in Excel Format) of the list from Academic Online Teacher Database (OTD)



Signature of Dean / Principal
Principal
Horizon College of Physiotherapy
Vishnupuri, Nanded.

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved UG Degree/ PG Degree) AS ON: 30/06/2023

Faculty: PHYSIOTHERAPY Subject: ANY SUBJECT OF PHYSIOTHERAPY Whether UG / UG+PG

Name of College: <u>HORIZON COLLEGE OF PHYSIOTHERAPY</u> College Code: <u>1164114</u> Intake Capacity: <u>50</u>

S. N.	Name of the Teaching Staff	Desig - nation	Teaching Subject	Mobile Number	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specify category)	Date of Appoint - ment	Total Teaching Experi ence in years of UG	Total Teaching Experi ence in years of PG	Type of Appoint - ment Temp./Regular Contractual	University Approval Status (Yes/No)	Details teacl Recognit MUI (Yes/ Temp/ Regular/ Contractual	ner ion by HS	Photograph with Signature
1	Dr. N. Srinivasan	Principal cum Professor	Any Subject (Approved for Kinesiotherapy & Kinesiology)	9000300416	sanjana_pt@yahoo.com	20/07/74	NA	28/01/2021	10 Y	16 Y 05 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		

• Note: The College shall submit one hard copy & soft copy (in Excel Format) of the list from Academic Online Teacher Database (OTD)



Signature of Dean / Principal

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF

(Approved + Not Approved UG Degree/ PG Degree) AS ON: 30/06/2023

Faculty: PHYSIOTHERAPY Subject: KINESIOLOGY & KINESIOTHERAPY Whether UG / UG+PG

Name of College: <u>HORIZON COLLEGE OF PHYSIOTHERAPY</u> College Code: <u>1164114</u> Intake Capacity: <u>50</u>

S. N.	Name of the Teaching Staff	Desig - nation	Teaching Subject	Mobile Number	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specify category)	Date of Appoint - ment	Total Teaching Experi ence in years of UG	Total Teaching Experi ence in years of PG	Type of Appoint - ment Temp./Regular Contractual	University Approval Status (Yes/No)	Details teacl Recognit MUI (Yes/ Temp/ Regular/ Contractual	ner tion by HS	Photograph with Signature
1	Dr. Guntuka Kalyan	Associate Professor	Kinesiotherapy & Kinesiology	9177990033	k9866990033@ gmail. com	06/07/80	NA	01/06/2022	01 Y	10 Y 05 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		
2	Dr. Vani Kumari Thota	Assistant Professor	Kinesiotherapy & Kinesiology	9494390033	v9494390033@ gmail. com	05/08/81	NA	01/06/2022	07 Y 06 M	05 Y 01 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		
3	Dr. Dhongade Pooja Rajesh	Assistant Professor	Kinesiotherapy & Kinesiology	9763984090	poojadhongade21@ gmail.com	21/10/95	SC	01/04/2022		01Y 03 M	Regular	YES	MUHS/ UG/E-6 /2261/ 2022, Dt. 16/11/22		

• Note: The College shall submit one hard copy & soft copy (in Excel Format) of the list from Academic Online Teacher Database (OTD)



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Signature of Dean / Principal
Principal
Horizon College of Physiotherapy
Vishnupuri, Nanded.

# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF

(Approved + Not Approved UG Degree/ PG Degree) AS ON: 30/06/2023

Faculty: PHYSIOTHERAPY Subject: ELECTROTHERAPY & ELECTRO-DIAGNOSIS Whether UG / UG+PG

Name of College: <u>HORIZON COLLEGE OF PHYSIOTHERAPY</u> College Code: <u>1164114</u> Intake Capacity: <u>50</u>

S. N.	Name of the Teaching Staff	Desig - nation	Teaching Subject	Mobile Number	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specify	Date of Appoint - ment	Total Teaching Experi ence in years	Total Teaching Experi ence in years	Type of Appoint - ment	University Approval Status	Details teach Recognit MU (Yes/	her tion by HS	Photograph with Signature
							category)		of UG	of PG	Temp./Regular Contractual	(Yes/No)	Temp/ Regular/ Contrac- tual	No. & date	
1	Dr. K. Vishnuvardhan Reddy	Associate Professor	' '	8790966229	k.vishnureddy@ gmail. com	19/10/78	NA NA	03/11/2022		07 Y 05 M	Regular	YES	MUHS/ UG/E-6 /2261/ 2022, Dt. 16/11/22		
2	Dr. Bargaje Pallavi Vitthal	Assistant Professor	Electrotherapy & Electro	9604632895	pallavi.bargaj@ gmail. com	05/01/94	VJNT	01/04/2022		01Y 03 M	Regular	YES	MUHS/ UG/E-6 /2261/ 2022, Dt. 16/11/22		
3	Dr. Sontakke Sayali Nandkishore	Assistant Professor	Electrotherapy & Electro	9823674405	sontakkesayali767@ gmail.com	26/08/96	NA NA	01/05/2022		01Y 02 M	Regular	YES	MUHS/ UG/E-6 /2260/ 2022, Dt. 16/11/22		

• Note: The College shall submit one hard copy & soft copy (in Excel Format) of the list from Academic Online Teacher Database (OTD)



Signature of Dean / Principal Principal



## महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

Maharashtra University of Health Sciences, Nashik

दिडोरी रोड, म्हसरुळ, नाशिक - ४२२००४ Dindon Road, Mhasrul, Nashik-422 004

Tel: (0253) 2539325/6659325, 268 Student Helpline: (0253) 2539111/6659111

Website: www.muhs.ac.in, E-mail: academic2@muhs.ac.in

डॉ. राजेंद्र शिवाजी बंगाळ

एम.बी.बी.एस, एम.डी.(न्यायवैद्यक्शास्त्र), ही एन.बी, एल:एल.बी.

Dr. Rajendra Shivaji Bangal M.B.B.S. M.D.( Forensic Medicine), D.N.B., L.L.B.

Registrar

कुलसचिव

Out No.: MUHS/UG/E-6/ 2260 /2022

Date: 16 /11/2022

[Temporary approval for the post(s) of Open Category]

To. The Principal, Horizon College of Physiotherapy, Near STRM University, Off. Latur Road, Vishnupuri. Nanded- 443 001

Sub.

Temporary Approval to the Appointment of Teacher(s).

Ref.

1) University Direction No. 01/2017 dated 13/04/2017

Your letter No. HCOP/PHY/Admin/2022/38 dated 03/11/2022.

Sir/Madam.

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment of the following teachers have been considered by the University and it has been decided to grant the approval, as indicated below & subject to the following conditions:-

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Kinesiotherapy & Physical Diagnosis	Mr. Srinivasan N.	Principal cum Professor	w.e.f. 03/11/2022 for two years only
2	Kinesiotherapy & Physical Diagnosis	Mr. Kalyan G	Associate Professor	w.e.f. 03/11/2022 for two years only
3,	Kinesiotherapy & Physical Diagnosis	Ms. Vani Kumari T	Assistant Professor/ Lecturer	w.e.f. 03/11/2022 for two years only
4	Electrotherapy & Electrodiagnosis	Ms. Sontakke Sayali Nandkishore	Assistant Professor/ Lecturer	w.e.f. 03/11/2022 for two years only

1) The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.

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- 2) The approval granted by the University is valid till the above said teacher is in the services (teaching) of your College or attains the age of superannuation, whichever happens earlier. However, it is mandatory to prepare the Reservation Roster and get it approved from the appropriate authorities & fill up the post permanently as early as possible.
- This temporary approval is granted subject to the rules and regulations of the University, from time to time, and shall be liable to be cancelled or amended, at any time, without prior notice.
- 4) A copy of this letter may be handed over to concerned Teacher.

Horizon College of Allege of Adelautour, Nanded

Registrar



# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

Maharashtra University of Health Sciences, Nashik

दिंडोरी रोड, म्हसरुळ, नाशिक - ४२२००४, Dindori Road, Mhasrul, Nashik- 422 004 Tel : (0253) 2539325/6659325, 268 Student Helpline : (0253) 2539111/6659111

Website: www.muhs.ac.in, E-mail: academic2@muhs.ac.in

हॉ. राजेंद्र शिवाजी बंगाळ

एम बी.बी.एस. एम डी.(न्यायवैधकशास्त्र),डी.एन बी. एल.एल बी

M.B.B.S. M.D. (Forensic Medicine), D.N.B., L.L.B. Registrar

Out No.: MUHS/UG/E-6/ 2 2 6 | /2022

Date: /6 /11/2022

Dr. Rajendra Shivaji Bangal

### [Temporary approval against the reserved post(s)]

To,
The Principal,
Horizon College of Physiotherapy,
Near STRM University, Off. Latur Road,
Vishnupuri,
Nanded- 443 001

Sub.

Temporary Approval to the Appointment of Teacher(s).

Ref.

University Direction No. 01/2017 dated 13/04/2017
 Your letter No. HCOP/PHY/Admin/2022/38 dated 03/11/2022.

Sir/Madam,

With reference to the subject cited above, I am directed to inform you that, the proposal of approval to the appointment of the following teachers have been considered by the University and it has been decided to grant the approval, as indicated below & subject to the following conditions:

Sr. No.	Subject	Name of the Teacher	Designation	Status of Approval
1	Electrotherapy & Electrodiagnosis	Mr. Vishnuvardhan Reddy K.	Associate Professor	w.e.f. 03/11/2022 for one year only against SC category
2	Kinesiotherapy & Physical Diagnosis	Ms. Dhongade Pooja Rajesh	Assistant Professor / Lecturer	w.e.f. 03/11/2022 for two years only
,3	Electrotherapy & Electrodiagnosis	Ms. Bargaje Pallavi Vitthal	Assistant Professor / Lecturer	w.e.f. 03/11/2022 for two years only

- The approval granted by the University is subject to successful completion of at least one Medical Education Technology (MET) workshop conducted by the University, within the period of one year from the date of approval. If any teacher fails to comply with the said provision, the approval granted by the Vice-Chancellor shall stand cancelled automatically.
- 2) The selection, appointment and approval granted against the reserved post due to non-availability of candidate of concerned category, for which the post is reserved, is only for the sake of continuation of educational activities of the admitted students and it is mandatory to advertise the reserved post minimum two times in one academic year.

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- 3) This temporary approval shall be automatically cancelled when the duly appointed candidate of the concerned category, for which the post is reserved, assumes the duty. However, it is mandatory to prepare the Reservation Roster and get it approved from the appropriate authorities & fill up the post permanently as early as possible.
- 4) This temporary approval is granted subject to the rules and regulations and State policy of reservation and shall be liable to be cancelled, at any time, without prior notice.
- 5) This temporary approval is valid till the above said teacher is in the services (teaching) of your College or attains the age of superannuation, whichever happens earlier, subject to the above mentioned conditions.
- 6) A copy of this letter may be handed over to concerned Teacher.

College of Physique

Jundau' Ma

Registrar

Principal

Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Category	Dincodo	Name Before Marriage:	Permanent Residential Address	Current Working College
DR.	N	1,1111	SRINIVASAN	20-07-1974	9000300416	785476701904	Male	OPEN	431606		Horizon College of Physiotherapy, Near SRTM University, Off Latur Road, Vishnupuri, Nanded, Maharashtra - 431606	Horizon College of Physiotherapy, Vishnupuri, Nanded

### **Qualification Details**

No.	Faculty	Qualification	Туре	Year	College	University	Country	Recognised (Central Council)
1	Physiotherapy	M.P.T. IN CARDIOVASCULAR AND RESPIRATORY PHYSIOTHERAPY	Post Graduate Degree	2007	VAPMS College of Physiotherapy, Visakhapatnam	Dr. NTR University of Health Sciences, Vijayawada	INDIA	Yes
		Bachelor of Physiotherapy	Graduate		Vinayaka Missions College of Physiotherapy, Salem	The TN Dr MGR Medical University, Chennai	INDIA	Yes

### **Other Qualification Details**

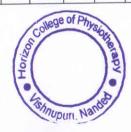
Computer Knowledge		Counc	il Registration Details		
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	Central Council Reg. No.	Date
Computer Knowledge Dasic	-	01.01.0001	01-01-0001	IAP - 4226-L	07-01-1998
Yes	3169721023222	01-01-0001	01-01-0001	TO VICE VICE VICE VICE VICE VICE VICE VICE	

### **Current Academic Details**

Designation Heads	Designations	Date Of Joining	Current Experience
	Dean / Principal / Director/Superintendent	01-09-1997	25 Years - 3 Months - 26 Days
Graduate	200 (200 (200 (200 (200 (200 (200 (200	28-01-2021	1 Years - 11 Months - 0 Days
Post Graduate Degree	Dean / Principal / Director/Superintendent	20 01 2022	

Additiona Post Held		Recognised	MUHS PG Guide	PHD		Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)		Debarred Letter Ref. No.	Debarred From	Debarred Till	Attended Date in MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date	Latest MUHS PG Recognition Letter No.	Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter No.	Latest MUHS PHD Approval Letter Date
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Yes	No	No	No			Physiotherapy	Physiotherapy	MUHS Approved	Temporary For Two Years	03-11-2024	No			MUHS/UG/E-6/2260/2022	16-11-2022	Carette.	

### **Transfer Details**

Mode of Transfer	Type of Transfer	Course Level	Transfer Date

### Previous Experience Details (Approved / Unapproved)

No.	Exp. Level	Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date
1	Graduate	Physiotherapy	Padmavathi College Of Physiotherapy	The TN Dr.MGR Medical University	Lecturer / Assistant Professor	Physiotherapy	Permanent	01-09-1997	31-03-1998	00 Y - 07 M - 00 D	No	30-11-0001
2	Graduate	Physiotherapy	Garden City College of Physiotherapy Bangalore	Rajiv Gandhi University of Health Sciences	Lecturer / Assistant Professor	Physiotherapy -	Permanent	01-05-1998	07-12-1998	00 Y - 07 M - 06 D	No	30-11-0001
3	Graduate	Physiotherapy		Dr. NTR University of Health Sciences	Lecturer / Assistant Professor	Physiotherapy	Permanent	12-12-1998	02-07-2002	03 Y - 06 M - 20 D	No	30-11-0001
4	Graduate	Physiotherapy	VAPMS College of Physiotherapy, vishakhapattanam, Andhra Pradesh	Dr. NTR University of Health Sciences	Lecturer / Assistant Professor	Physiotherapy	Permanent	21-08-2002	28-04-2007	04 Y - 08 M - 07 D	No	30-11-0001
5	Post Graduate Degree	Physiotherapy	VAPMS College of Physiotherapy, vishakhapattanam, Andhra Pradesh	Dr. NTR University of Health Sciences	Reader / Associate Professor	Cardiovascular & Respiratory Physiotherapy	Permanent	02-05-2007	30-04-2014	06 Y - 11 M - 28 D	No	30-11-0001
6	Post Graduate Degree	Physiotherapy	VAPMS College of Physiotherapy, vishakhapattanam, Andhra Pradesh	Dr. NTR University of Health Sciences	Professor	Cardiovascular & Respiratory Physiotherapy	Permanent	02-05-2014	25-01-2021	06 Y - 08 M - 23 D	No	30-11-0001

**Total Experience Summary (Previous Experience + Current Experience)** 



Horizon College of Physiotherapy Vishnupuri, Nanded.

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				Design	nations		
Sr No.	Course Level	Experience Type	Professor	Reader / Associate Professor	Lecturer / Assistant Professor	Dean / Principal / Director/Superintendent	GRAND TOTAL
		Approved	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	25 Y - 03 M - 26 D	25 Y - 03 M - 26 D
		Not Approved	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	09 Y - 05 M - 03 D	00 Y - 00 M - 00 D	09 Y - 05 M - 03 D
1	1 Graduate	Total	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	09 Y - 05 M - 03 D	25 Y - 03 M - 26 D	34 Y - 08 M - 29 D
		Approved	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	01 Y - 11 M - 00 D	01 Y - 11 M - 00 D
	Post Cyaduata	Not Approved	06 Y - 08 M - 23 D	06 Y - 11 M - 28 D	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	13 Y - 08 M - 21 D
2	Post Graduate Degree	Total	06 Y - 08 M - 23 D	06 Y - 11 M - 28 D	00 Y - 00 M - 00 D	01 Y - 11 M - 00 D	15 Y - 07 M - 21 D
	GRAND TOTA	u la	06 Y - 08 M - 23 D	06 Y - 11 M - 28 D	09 Y - 05 M - 03 D	27 Y - 02 M - 26 D	50 Y - 04 M - 20 D

### **Publication Details**

No.	Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication	
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### **Conference Details**

No.	Name	Level Date Venue		Venue	Registration No.	Participated As
	Indian Association of Physiotherapists	National	17-03-2018	Delhi		Faculty
2	58th Annual Conference of the IAP	National	06-03-2020	Mahaballipuram, Chennai, Tamil Nadu		Participant

### **Bank Details**

No.	Bank Name	Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
1	Bank of India	Vishnupuri, Nanded	065516310000020	SB	BKID0000655		ADGPN6570R	N Srinivasan

**Document Upload** 

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Principal
Horizon College of Physiotherapy
Vishnupuri, Nanded.

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No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	UIDAI	23-09-2011
2	Income Tax PAN Card	Income tax Department, Govn. of India	Not Applicable
3	UG Degree Certificate tobe scanned from original	The TN Dr. MGR Medical University	23-03-1998
4	PG Degree Certificate tobe scanned from original	Dr. NTR University of Health Sciences	03-08-2009
5	State-Board / State-Council Registration Certificate	The Indian Association of Physiotherapists	07-01-1998
6	Date of Birth Certificate / 10th Passing Certificate	Department of Government Examinations - Tamil nadu	14-06-1990
7	MUHS UG Approval Letter	MUHS - Nashik - Maharashtra	16-11-2022
8	All Teaching Experience Certificates	Principal - Padmavathi College of Physiotherapy	02-04-1998
9	All Teaching Experience Certificates	Principal - Garden City College of Physiotherapy	07-12-1998
10	All Teaching Experience Certificates	Principal - Pragathi College of Physiotherapy	02-07-2002
11	All Teaching Experience Certificates	Principal - VAPMS College of Physiotherapy	25-01-2021
12	Lastest Appointment Order given by the College	Secretary RSCMT - Horizon College of Physiotherapy	28-01-2022
13	Latest College Joining Report	in Person	03-02-2021



Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Category	Pincode	Name Before Marriage:	Permanent Residential Address	Current Working College
	GUNTUKA		KALYAN	06-07-1980	7277990033	La	Male					Horizon College of Physiotherapy, Vishnupuri, Nanded

### **Qualification Details**

No.	Faculty	Qualification	Туре	Year	College	University	Country	Recognised (Central Council)
1	Physiotherapy	Bachelor of Physiotherapy	Graduate	2004	Pragati College of Physiotherapy	Dr. NTR University of Health Sciences	INDIA	Yes
2	Physiotherapy	M.P.T. IN NEUROPHYSIOTHERAPY	Post Graduate Degree	2008	Vaagdevi College of Physiotherapy	Dr. NTR University of Health Sciences	INDIA	Yes

### **Other Qualification Details**

Computer Knowledge	Council Registration Details										
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	Central Council Reg. No.	Date						
Yes	L-16757		11111								

### **Current Academic Details**

Designations	Date Of Joining	Current Experience
Reader / Associate Professor	01-06-2022	0 Years - 6 Months - 26 Days
		Dute of Johning

Additional Post Held	MUHS Approved UG Teacher	MUHS Recognised PG Teacher	10	PHD Guide	225	Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)	If Debarred, Specify	Debarred Letter Ref. No.	Debarred From	Debarred Till	Attended Date In MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date		Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter Date
	Yes	No	No	No				Physiotherapy		MUHS Approved	Temporary For Two Years	03-11-2024		No	8			The same	MUHS/UG/E-6/2260/2022		16-11-2022		

### **Transfer Details**

Mode of Transfer

Type of Transfer

Course Level

Transfer Date

Print Date:28-12-22 02:31:50 PM

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### Previous Experience Details (Approved / Unapproved)

No.	Exp. Level	Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date
1	Graduate	Physiotherapy	TIRUMALA COLLEGE OF PHYSIOTHERAPY,NIZAMABAD	Dr. NTR University of Health Sciences	Lecturer / Assistant Professor	Physiotherapy	Permanent	01-12-2007	30-11-2008	00 Y - 11 M - 29 D	No	30-110001
2	Post Graduate Degree	Physiotherapy	TIRUMALA COLLEGE OF PHYSIOTHERAPY,NIZAMABAD	Dr. NTR University of Health Sciences	Lecturer / Assistant Professor	Neuro Physiotherapy	Permanent	01-12-2008	30-11-2014	05 Y - 11 M - 29 D	No	30-110001
3	Post Graduate Degree	Physiotherapy	TIRUMALA COLLEGE OF PHYSIOTHERAPY,NIZAMABAD	Dr. NTR University of Health Sciences	Reader / Associate Professor	Neuro Physiotherapy	Permanent	06-07-2018	10-12-2021	03 Y - 05 M - 04 D	No	30-110001

### **Total Experience Summary (Previous Experience + Current Experience)**

Sr	Course Level	Experience	Desi	gnations	
No.	Course Level	Туре	Reader / Associate Professor	Lecturer / Assistant Professor	GRAND TOTAL
		Approved	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D
1	Graduate	Not Approved	00 Y - 00 M - 00 D	00 Y - 11 M - 29 D	00 Y - 11 M - 29 D
		Total	00 Y - 00 M - 00 D	00 Y - 11 M - 29 D	00 Y - 11 M - 29 D
		Approved	00 Y - 06 M - 26 D	00 Y - 00 M - 00 D	00 Y - 06 M - 26 D
2	Post Graduate Degree	Not Approved	03 Y - 05 M - 04 D	05 Y - 11 M - 29 D	09 Y - 05 M - 03 D
	Degree	Total	04 Y - 00 M - 00 D	05 Y - 11 M - 29 D	09 Y - 11 M - 29 D
	GRAND TOTA	L -	04 Y - 00 M - 00 D	06 Y - 11 M - 28 D	10 Y - 11 M - 28 D

### **Publication Details**

No. Article / Book Typ	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication	
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### **Conference Details**

No.	Name	Level	Date	Venue	Registration No.	Participated As
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### **Bank Details**

No.	Bank Name	Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
1	Bank of India	Vinayak Nagar, Nizamabad	869610110013393	SB	BKID0008696		ANXPG4515C	Kalyan Guntuka

### **Document Upload**

No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	UIDAI	Not Applicable
2	Income Tax PAN Card	Incometax Department of India	01-01-0001
3	Date of Birth Certificate / 10th Passing Certificate	Board of Secondary Education	08-06-1995
4	PG Degree Certificate tobe scanned from original	Dr. NTR University of Health Sciences	08-10-2010
5	UG Degree Certificate tobe scanned from original	Dr. NTR University of Health Sciences	29-06-2005
6	All Teaching Experience Certificates	Principal - Tirumala COP	10-12-2021
7	All Teaching Experience Certificates	Principal - Tirumala COP	01-12-2014
8	Lastest Appointment Order given by the College	Principal - Horizon College of Physiotherapy	19-05-2022
9	Latest College Joining Report	In-Person	01-06-2022
10	MUHS UG Approval Letter	MUHS - Nashik - Maharashtra	16-11-2022



Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Category	Pincode	Name Before Marriage:	Permanent Residential Address	Current Working College
DR.	VISHNUVARDHAN	REDDY	K	19-10-1978	8790966229	876320583351	Male	OPEN	431606		Horizon College of Physiotherapy, Near SRTM University, Off Latur Road, Vishnupuri, Nanded	Horizon College of Physiotherapy, Vishnupur Nanded

### **Qualification Details**

No.	Faculty	Qualification	Туре	Year	College	University	Country	Recognised (Central Council)
1	Physiotherapy	M.P.T. IN SPORTS PHYSIOTHERAPY	Post Graduate Degree	2009	Vagdevi College of Physiotherapy	Dr. NTR University of Health Sciences	INDIA	Yes
2	Physiotherapy	Bachelor of Physiotherapy	Graduate	2003	H.M.S College of Physiotherapy	Rajiv Gandhi University of Health Sciences	INDIA	Yes

### **Other Qualification Details**

Computer Knowledge		Council Re	gistration Details		
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	Central Council Reg. No.	Date
Yes	L15341	28-03-2006	LULIUM III		1

### **Current Academic Details**

Designation Heads	Designations	Date Of Joining	Current Experience
Post Graduate Degree	Reader / Associate Professor	03-11-2022	0 Years - 1 Months - 25 Days

Additional Post Held	MUHS Approved UG Teacher	MUHS Recognised PG Teacher	PG	MUHS PHD Guide	For	Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)	If Debarred, Specify	Debaired Letter Ref. No.	Debarred From	Debarred Till	Attended Date In MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date	Latest MUHS PG Recognition Letter No.	Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter No.	Latest MUHS PHD Approva Letter Date
	Yes	No	No	No				Physiotherapy	Physiotherapy	MUHS Approved	Temp. For One Year For One Year Against Resserve Category	03-11-2023		No				4	MUHS/UG/E-6/2261/2022		16-11-2022			

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#### **Transfer Details**

Mode of Transfer	Type of Transfer	Course Level	Transfer Date

### Previous Experience Details (Approved / Unapproved)

No.	Exp. Level	Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date
	Post Graduate Degree	Physiotherapy	TIRUMALA COLLEGE OF PHYSIOTHERAPY,NIZAMABAD	KALOJI NARAYANA RAO UNIVERSITY OF HEALTH SCIENCES	Reader / Associate Professor	Physiotherapy	Permanent	01-07-2015	31-05-2022	06 Y - 11 M - 00 D	Yes	30-11-0001

### **Total Experience Summary (Previous Experience + Current Experience)**

Sr No.	Course Level	Experience	Designations .		
No.	Course Level	Туре	Reader / Associate Professor	GRAND TOTAL	
		Approved	07 Y - 00 M - 25 D	07 Y - 00 M - 25 D	
1	Post Graduate Degree	Not Approved	00 Y - 00 M - 00 D	00 Y - 00 M - 00 D	
	Degree	Total	07 Y - 00 M - 25 D	07 Y - 00 M - 25 D	
	GRAND TOTAL		07 Y - 00 M - 25 D	07 Y - 00 M - 25 D	

### **Publication Details**

No. Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication
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### **Conference Details**

No. Name Level Date Venue Registration No. Participated As

Print Date:28-12-22 02:35:08 PM



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### **Bank Details**

No.	Bank Name	Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
1	State Bank of India	Kukatpally Branch, Tulsinagar, Pragathinagar Road, Hyderabad	20406890356	SB	SBIN0018848		ASVPK4906A	Komatireddy Vishnuvardhan Reddy

### **Document Upload**

No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	UIDAI, India	04-12-2013
2	Income Tax PAN Card	Intax Department, India	02-12-2006
3	Date of Birth Certificate / 10th Passing Certificate	Board of secondary Education, Andhra Pradesh	01-01-0001
4	UG Degree Certificate tobe scanned from original	RGUHS, Karnataka	23-03-2005
5	PG Degree Certificate tobe scanned from original	Dr NTR University of Health Sciences, Andhra Pradesh	14-05-2010
6	All Teaching Experience Certificates	Principal - TIRUMALA COLLEGE OF PHYSIOTHERAPY	31-05-2022
7	Lastest Appointment Order given by the College	Principal - Horizon College of Physiotherapy	03-11-2022
8	Latest College Joining Report	In-Person	03-11-2022
9	MUHS UG Approval Letter	MUHS - Nashik - Maharashtra	16-11-2022
10	State-Board / State-Council Registration Certificate	Indian Association of Physiotherapists	28-03-2006



Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Category	Pincode	Name Before Marriage:	Permanent Residential Address	Current Working College
DR.	VANI KUMARI		ТНОТА	05-08-1981	9494390033	670953059841	Female	OPEN	431606			Horizon College of

### **Qualification Details**

Sent Control								
Faculty	Qualification	Type Year Col		College	University	Country	Recognised (Central	
Physiotherapy	Bachelor of Physiotherapy	Graduate	2002	P. U.S.V.	and the state of t	,	Council)	
	747.		2003	Pragathi College of Physiotherapy	Dr. NTR University of Health Sciences	INDIA	Yes	
Physiotherapy	PHYSIOTHERAPY PHYSIOTHERAPY	Post Graduate Degree	2017	LVTG College of Physiotherapy	Dr. NTR University of Health Sciences	INDIA	Yes	
]	Physiotherany	Physiotherapy Bachelor of Physiotherapy	Physiotherapy Bachelor of Physiotherapy Graduate  Physiotherapy M.P.T. IN CARDIOVASCULAR AND RESPIRATORY Post Graduate	Physiotherapy Bachelor of Physiotherapy Graduate 2003  Physiotherapy M.P.T. IN CARDIOVASCULAR AND RESPIRATORY Post Graduate	Physiotherapy Bachelor of Physiotherapy Graduate 2003 Pragathi College of Physiotherapy Physiotherap	Physiotherapy Bachelor of Physiotherapy Bachelor of Physiotherapy Bachelor of Physiotherapy Physioth	Physiotherapy Bachelor of Physiotherapy Bach	

### Other Qualification Details

Computer Knowledge		Council P.	egistration Details		
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	O CONTROL TO THE CONTROL THE CONTROL TO THE CONTROL THE CONTROL TO THE CONTROL TH	
Yes	L-34491	3	Renewal Date	Central Council Reg. No.	Date

### **Current Academic Details**

Designation Heads	P 1		
	Designations	Date Of Joining	Current Experience
Post Graduate Degree	Lecturer / Assistant Professor		
		01-06-2022	0 Years - 6 Months - 26 Days

Additional Post Held	MUHS Approved UG Teacher	MUHS Recognised PG Teacher	PG	MUHS PHD Guide	PHD Guide For Total Student	Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)	If	Debarred Letter Ref. No.	Debarred From	Debarred Till	Attended Date In MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date	Latest MUHS PG Recognition Letter No.	Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter No.	Latest MUHS PHD Approval Letter Date
	Yes	No	No	No				Physiotherapy	Physiotherapy	MUHS Approved	Temporary For Two Years	03-11-2024		No					MbHS/UG/E-6/2260/2022					Date

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### **Transfer Details**

Mode of Transfer	Type of Transfer	Course Level	Transfer Date

### Previous Experience Details (Approved / Unapproved)

No.	Exp. Level	Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date
1	Graduate	Physiotherapy		Dr NTR University of Health Sciences	Lecturer / Assistant Professor	Physiotherapy	Permanent	01-09-2004	15-03-2013	08 Y - 06 M - 14 D	No	30-11-0001
2	Post Graduate Degree	Physiotherapy	TIRUMALA COLLEGE OF PHYSIOTHERAPY	dr NTR University of Health Sciences	Lecturer / Assistant Professor	Physiotherapy	Permanent	01-12-2017	31-12-2021	04 Y - 01 M - 00 D	No	30-110001

### **Total Experience Summary (Previous Experience + Current Experience)**

Sr No.	Course Level	Experience	Designations		
No.		Туре	Lecturer / Assistant Professor	. 4	GRAND TOTAL
		Approved	00 Y - 00 M - 00 D		00 Y - 00 M - 00 D
1	Graduate	Not Approved	08 Y - 06 M - 14 D		08 Y - 06 M - 14 D
		Total	08 Y - 06 M - 14 D		08 Y - 06 M - 14 D
		Approved	00 Y - 06 M - 26 D		00 Y - 06 M - 26 D
2	Post Graduate Degree	Not Approved	04 Y - 01 M - 00 D		04 Y - 01 M - 00 D
	<b>3</b>	Total	04 Y - 07 M - 26 D		04 Y - 07 M - 26 D
	GRAND TOTAL	L	13 Y - 02 M - 10 D		13 Y - 02 M - 10 D

### **Publication Details**

No.	Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication

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### **Conference Details**

	AT-	17000000		77.5 K	Total Control of the			
r	NO.	Name	Level	Date	Venue	Registration No.	Participated As	

### **Bank Details**

No. Bank N	Name	Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
1 Bank of I	f India	Nizamabad	869610110013392	SB	BKID0008696		CCLPG7620R	Vanikumari Guntuka

### **Document Upload**

No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	UIDAI	01-01-0001
2	Income Tax PAN Card	Incometax Department of India	01-01-0001
3	PG Degree Certificate tobe scanned from original	Dr NTR University of Health Sciences	27-06-2018
4	UG Degree Certificate tobe scanned from original	Dr NTR University of Health Sciences	25-09-2004
5	Date of Birth Certificate / 10th Passing Certificate	Board of Secondary Education	23-05-1996
6	All Teaching Experience Certificates	Principal - Pragati College of Physiotherapy	18-03-2013
7	All Teaching Experience Certificates	Principal - Tirumala College of Physiotherapy	31-12-2022
8	Lastest Appointment Order given by the College	Principal - Horizon College of Physiotherapy	19-05-2022
9	Latest College Joining Report	In-Person	01-06-2022
10	MUHS UG Approval Letter	MUHS - NASHIK - MAHARASHTRA	16-11-2022



Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Category	Pincode	Name Before Marriage:	Permanent Residential Address	Current Working College
DR.	BARGAJE	PALLAVI	VITTHAL	05-01-1994	9604632895	748822995472	Female	NT-D (NT-3)	431606		Horizon College of Physiotherapy, Near SRTM University, Off Latur Road, Vishnupuri, Nanded	Horizon College of Physiotherapy, Vishnupuri, Nanded

### **Qualification Details**

No.	Faculty	Qualification	Туре	Year	College	University	Country	Recognised (Central Council)
1	Physiotherapy	M.P.T. IN COMMUNITY PHYSIOTHERAPY	Post Graduate Degree	2022	VSPMS COLLEGE OF PHYSIOTHERAPY	MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES	INDIA	Yes
2	Physiotherapy	Bachelor of Physiotherapy	Graduate	2016	Sancheti Institute of College of Physiotherapy	Maharashtra University of Health Sciences	INDIA	Yes

### **Other Qualification Details**

Computer Knowledge		Council Reg	jistration Details		
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	Central Council Reg. No.	Date
Yes	2018/09/PT/00753	04-09-2018	04-09-2023		

### **Current Academic Details**

Designation Heads	Designations	Date Of Joining	Current Experience		
Post Graduate Degree	Lecturer / Assistant Professor	01-04-2022	0 Years - 8 Months - 26 Days		

Additional Post Held	MUHS Approved UG Teacher	MUHS Recognised PG Teacher	PG	MUHS PHD Guide	PHD Guide For Total Student	Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)	If Debarred, Specify	Debarred Letter Ref. No.	Debarred From	Debarred Till	Attended Date In MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date	Latest MUHS PG Recognition Letter No.	Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter No.	Latest MUHS PHD Approval Letter Date
	No	No	No	No				Physiotherapy	Physiotherapy	MUHS Approved	Temporary For Two Years	03-11-2024		No					MUHS/UG/E-6/2261/2022		16-11-2022			

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### **Transfer Details**

Mode of Transfer	Type of Transfer	Course Level	Transfer Date

### Previous Experience Details (Approved / Unapproved)

100												
No.	Exp. Level	Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date
											THE RESERVE OF THE PARTY OF THE	31 ( )

### **Total Experience Summary (Previous Experience + Current Experience)**

Sr No.	Course Level	Level Experience		Designations			
No.	Course Level	Туре		Lecturer / Assistant Professor	1-21-1-21	GRAND TOTAL	
		Approved		00 Y - 08 M - 26 D		00 Y - 08 M - 26 D	
1	Post Graduate Degree	Not Approved		00 Y - 00 M - 00 D		00 Y - 00 M - 00 D	
	Dograd	Total		00 Y - 08 M - 26 D	. 4	00 Y - 08 M - 26 D	
	GRAND TOTA	L,	·	00 Y - 08 M - 26 D		00 Y - 08 M - 26 D	

### **Publication Details**

No.	Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication
1	RESEARCH	Perception of junior college students about Physiotherapy as a profession	National	1 : Pallavi Vitthal Bargaje, 2 : Nilima S. Bedekar, 3 : Savita Rairikar	The Journal of Indian Association of Physiotherapists	11	1		The Journal of Indian Association of Physiotherapists	2017	10.4103/PJIAP.PJIAP_6_17	Lecturer / Assistant Professor

### **Conference Details**

No.	Name	Level	Date	Venue	Registration No.	Participated As
1	GERICON PT 2022	International	27-09-2022	NANDED COLLEGE OF PHYSIOTHERAPY		Participant

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### **Bank Details**

No.	Bank Name	Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
1	BANK OF INDIA	VISHNUPURI,SAHAYOG COMPLEX,HONAJI ESTATE, VISNUPURI,NANDED 431606	065516310000025	SB	BKID0000655		BJIPB0763R	PALLAVI VITTHAL BARGAJE

### **Document Upload**

No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	UIDAI	Not Applicable
2	Date of Birth Certificate / 10th Passing Certificate	MAHARASHTRA STATE BOARD OF SECONDARY AND HIGHER S	25-06-2009
3	Caste Certificate	SUBDIVISIONAL OFFICER BEED	13-06-2018
4	Caste Validity Certificate	MAHARASHTRA STATE	30-09-2011
5	State Domicile Certificate	EXECUTIVE MAGISTRATE, SHIRUR KASAR	08-07-2009
6	MUHS MET Certificate of Participation in Research Methodology Workshop	MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES	25-02-2020
7	Non Creamy Layer Certificate	SUBDIVISIONAL OFFICER BEED	19-05-2022
8	Research Papers Published	РЈІАР	21-07-2017
9	State-Board / State-Council Registration Certificate	MAHARASHTRA STATE COUNCIL FOR OCUPATIONAL THERAPY AND PHYSIOTHERAPY	04-09-2018
10	PG Degree Certificate tobe scanned from original	MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES	01-04-2022
11	UG Degree Certificate tobe scanned from original	MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES	02-05-2017
12	Income Tax PAN Card	INCOME TAX	Not Applicable
13	Latest College Joining Report	PRINCIPAL OF HORIZON COLLEGE OF PHYSIOTHERAPY	01-04-2022
14	Lastest Appointment Order given by the College	PRINCIPAL OF HORIZON COLLEGE OF PHYSIOTHERAPY NANDED	14-03-2022
15	MUHS UG Approval Letter	MUHS - Nashik - Maharashtra	16-11-2022



Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Gender Category Pinco		Name Before Marriage:	Permanent Residential Address	Current Working College
DR.	DHONGADE	POOJA	RAJESH	21-10-1995	9763984090	229290773736	Female	Schedule Caste	431606		Horizon College of Physiotherapy, Near SRTM University, Off Latur Road, Vishnupuri, Nanded	Horizon College of Physiotherapy, Vishnupus Nanded

### **Qualification Details**

No.	Faculty	Qualification	Туре	Year	College	University	Country	Recognised (Central Council)
1	Physiotherapy	Bachelor of Physiotherapy	Graduate	2017	PT School and Centre, GMC, Nagpur	Maharashtra University of Health Sciences	INDIA	Yes
2	Physiotherapy	M.P.T. IN MUSCULOSKELETAL PHYSIOTHERAPY	Post Graduate Degree	2022	THE RESERVE OF THE PROPERTY OF	maharashtra university of health sciences, Nashik	INDIA	Yes

### **Other Qualification Details**

Computer Knowledge		Council Reg	jistration Details		
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	Central Council Reg. No.	Date
Yes	2019/02/PT/007912	23-02-2019	23-02-2024	3	

### **Current Academic Details**

esignation Heads	Designations	Date Of Joining	Current Experience		
st Graduate Degree	Lecturer / Assistant Professor	01-04-2022	0 Years - 8 Months - 26 Days		
and the second s	2500dfol / 12525tdfft 1101c5501	01-04-2022			

dditional ost Held	MUHS Approved UG Teacher	MUHS Recognised PG Teacher	PG	MUHS PHD Guide	For	Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)	D. III	Debarred Letter Ref. No.	Debarred From	Till	Attended Date In MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date	Latest MUHS PG Recognition Letter No.	Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter No.	Latest MUHS PHD Approval Letter Date
	Yes	No	No	No				Physiotherapy	Physiotherapy	MUHS Approved	Temporary For Two Years	03-11-2024		No				25-02-2022	MUHS/UG/E-6/2261/2022		16-11-2022			

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### **Transfer Details**

Mode of Transfer	Tr. CTP. C			
Table of Italioiei	Type of Transfer	Course Level	Transfer Date	

### Previous Experience Details (Approved / Unapproved)

N	o.	Exp. Level	Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date	

## **Total Experience Summary (Previous Experience + Current Experience)**

Sr No.	Course Level	Experience		Designations		
140.		Туре		Lecturer / Assistant Professor		GRAND TOTAL
		Approved		00 Y - 08 M - 26 D		00 Y - 08 M - 26 D
1	Post Graduate Degree	Not Approved		00 Y - 00 M - 00 D		00 Y - 00 M - 00 D
		Total	<u> </u>	00 Y - 08 M - 26 D	. *	00 Y - 08 M - 26 D
17	GRAND TOTAL			00 Y - 08 M - 26 D		00 Y - 08 M - 26

### **Publication Details**

No.	Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication
1	RESEARCH	EFFECT OF PROPRIOCEPTIVE NEUROMUSCULAR FACILITATION VERSUS KALTENBORN MOBILIZATION TECHNIQUE TO IMPROVE RANGES IN FROZEN SHOULDER PATIENTS AGED 40-60 YEARS – A RANDOMIZED CONTROLLED TRIAL	International	1 : Dr.pooja sunanda (dhongade), 2 : Dr.kiran mendhe , 3 : Dr.shilpa v. Chourasia	International journal of recent scientific research	13	09(B)	2320 - 2325	International journal of recent scientific research	2022	0976-3031	Lecturer / Assistant Professor

Print Date:28-12-22 02:55:14 PM



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No.	Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication
2	RESEARCH	Effect of wall slide and ground-based push up exercises on scapular alignment and shoulder range of motion in a greater tubercle fracture of humerus with brachial plexus injury - A case study.	International	1 : Pooja Sunanda (dhongade), 2 : Kiran mendhe	International journal of physiotherapy and research	10 (4)	10.16	4291 - 4294	International journal of physiotherapy and research	2022	2321-1822	Lecturer / Assistant Professor

### **Conference Details**

No.	Name	Level	Date	Venue	Registration No.	Participated As
1	3rd state level research conference-2020	National	18-01-2020	V.S.P.Ms College of Physiotherapy, Nagpur		Organizer

### **Bank Details**

No.	Bank Name	Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
1	Bank of India	Vishnupuri, sahayog complex, honaji estate, vishnupuri nanded,MH, Maharashtra,431606	065516310000031	SB	BKI00000655	431013510	BXZPD0564M	Pooja Rajesh dhongade

### **Document Upload**

No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	India	Not Applicable
2	Caste Certificate	Sub-divisional officer, Nagpur	03-04-2008
3	State-Board / State-Council Registration Certificate	Maharashtra state council for physiotherapy and occupational therapy, Mumbai	23-02-2019
4	Date of Birth Certificate / 10th Passing Certificate	Maharashtra state board, Nagpur division	21-03-2011
5	State Domicile Certificate	State of Maharashtra	12-06-2013
6	Caste Validity Certificate	Deputy collector, Nagpur	04-07-2013
7	MUHS MET Certificate of Participation in Research Methodology Workshop	Registrar MUHS, nashik	25-02-2020
8	UG Degree Certificate tobe scanned from original	Vice chancellor MUHS, nashik	10-12-2018
9	Income Tax PAN Card	Income tax department,GOI	Not Applicable
10	PG Degree Certificate tobe scanned from original	Vice chancellor MUHS, nashik	04-07-2022

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Document Name	Issued By	Issue Date
Research Papers Published	International journal recent scientific research	28-09-2022
Research Papers Published		11-08-2022
Latest College Joining Report		01-04-2022
Lastest Appointment Order given by the College		14-03-2022
MUHS UG Approval Letter	MUHS - Nashik - Maharashtra	16-11-2022
	Research Papers Published  Latest College Joining Report  Lastest Appointment Order given by the College	Research Papers Published International journal recent scientific research Research Papers Published International journal physiotherapy and research Latest College Joining Report Principal , horizon college of physiotherapy Lastest Appointment Order given by the College Principal, horizon college of physiotherapy, vishnupuri, Nanded



Initial	First Name	Middle Name	Last Name	Date of Birth	Mobile Number	Aadhaar Number	Gender	Category	Pincode	Name Before Marriage:	Permanent Residential Address	Current Working College
DR.	SONTAKKE	SAYALI	NANDKISHOR	26-08-1996	9823674405	911588820574	Female	OPEN	431606		Horizon College of Physiotherapy, Near SRTM University, Off Latur Road, Vishnupuri, Nanded	Horizon College of Physiotherapy, Vishnupuri, Nanded

### **Qualification Details**

No.	Faculty	Qualification	Туре	Year	College	University	Country	Recognised (Central Council)
1	Physiotherapy	M.P.T. IN CARDIOVASCULAR AND RESPIRATORY PHYSIOTHERAPY	Post Graduate Degree	2022	V.S.P.M.S College Of Physiotherapy, Nagpur	Maharashtra University Of Health Sciences, Nashik	INDIA	Yes
2	Physiotherapy	Bachelor of Physiotherapy	Graduate	2018	V.S.P.M.S College of Physiotherapy, - Nagpur	Maharashtra University Of Health Sciences, Nashik	INDIA	Yes

### **Other Qualification Details**

Computer Knowledge		Counc	il Registration Details		
Computer Knowledge Basic	State Council Reg. No.	Registration Date	Renewal Date	Central Council Reg. No.	Date
Yes	2019/09/PT/008194	17-09-2019	17-09-2024	IAP- L-54428	08-08-2022

### **Current Academic Details**

oining	Current Experience
:022	0 Years - 7 Months - 27 Days
2	2022

Additional Post Held	MUHS Approved UG Teacher	PC:	MUHS PG Guide	PHD	PHD Guide For Total Student	Course	Course Level	Department	Subject	University Approval Status	Type Of Appointment	Approval Till Date	Central Council Teacher Id (For Ayurved & Unani Only)	If	Debarred Letter Ref. No.	Debarred From	Debarred Till	Attended Date In MUHS Research Methodology Workshop	Latest MUHS UG Approval Letter No.	Latest MUHS UG Approval Letter Date	Latest MUHS PG Recognition Letter No.	Latest MUHS PG Recognition Letter Date	Latest MUHS PHD Approval Letter No.	Latest MUHS PHD Approval Letter Date
	Yes	No	No	No				Physiotherapy		MUHS Approved	Temporary For Two Years	03-11-2024		No				-	MUHS/UG/E-6/2260/2022		16-11-2022			

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### **Transfer Details**

Mode of Transfer			
Mode of Transfer	Type of Transfer	Course Level	Transfer Date

## Previous Experience Details (Approved / Unapproved)

No.	Exp. Level Faculty	C-11	TT 1 1		F						
140.	Exp. Level Faculty	College	University	Designation	Subject	Appt. Type	Exp. From	Exp. Till	Exp. Total	Approved Exp.	Exp. Letter No. & Date
				19	4.5				-		Exp. Letter 110. & Date

# Total Experience Summary (Previous Experience + Current Experience)

Sr No.	Course Level	Experience	Designations	
NO.		Туре	Lecturer / Assistant Professor	GRAND TOTAL
		Approved	00 Y - 07 M - 27 D	00 Y - 07 M - 27 D
1	Post Graduate Degree	Not Approved	00 Y - 00 M - 00 D	
		Total	00 Y - 07 M - 27 D	00 Y - 07 M - 27 D
T.	GRAND TOTAL		00 Y - 07 M - 27 D	00 Y - 07 M - 27

### **Publication Details**

No.	Article / Book Type	Title Of Article / Book	Article Type	Name Of Authors	Name Of Journal	Volume No.	Issue No.	Page No.	Name Of Publication	Year Of Publication	Publication Number (ISSN No. / ISB No.)	Designation At Publication
1	RESEARCH	Correlation of Disability with Pain and Catastrophizing in Housewives with Chronic Low Back Pain Aged Between 35 To 60 Years		1 : Dr. Kartik D. Shah, 2 : Dr. Sayali Sontakke	IJHS&R	09	07	169 - 173	IJHS&R	2019	2249-9571	Lecturer / Assistant Professor

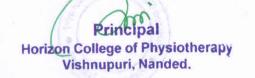
### **Conference Details**

No	Name								
140.	Name	Level	Date	Venue	Registration No.	Participated As			
1	International Conference Of COMHAD And CHPA 2015	International	05-12-2015	Nagpur	registration 140.				
2	Medinspire An International Multidisciplinary Medical Summit			DY Patil Deemed To Be University Navi Mumbai		Participant			
				The state of the s		Participant			

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No.	Name	Level Date		Venue	Registration No.	Participated As
3	Gericon PT 2022	International	27-09-2022	Nanded Physiotherapy College And Research Center, Nanded	3	Participant

### **Bank Details**

Bank Name Branch Name	Account No.	Туре	IFSC Code	MICR Code	PAN No.	Account Holder Name
Bank Of India Vishnupuri And Sahayog Complex, Honaji Estate, Vishn Maharashtra	puri, Nanded, 065516310000033	SB	BKID0000655	431013510	KPSPS4959K	Miss Sayali Nandkishor Sontakke

### **Document Upload**

No.	Document Name	Issued By	Issue Date
1	Aadhar Card issued by UIDAI	UIDAI	
2	Lastest Appointment Order given by the College	principal, Horizon College of physiotherapy	Not Applicable
3	Date of Birth Certificate / 10th Passing Certificate	Maharashtra State Board Of Secondary And Higher Secondary Education, Pune	21-04-2022
4	State Domicile Certificate	Executive Magistrate Karanja	13-06-2012 01-02-2010
5	MUHS MET Certificate of Participation in Research Methodology Workshop	Maharashtra University Of Health Sciences	25-02-2020
6	Income Tax PAN Card	Income Tax Department Government Of India	Not Applicable
7	PG Degree Certificate tobe scanned from original	Maharashtra University Of Health Sciences	01-04-2022
8	Research Papers Published	International Journal Of Health Sciences and research	09-07-2019
9	State-Board / State-Council Registration Certificate	Maharashtra State Council For Occupational Therapy And Physiotherapy	17-07-2019
10	UG Degree Certificate tobe scanned from original	Maharashtra University Of Health Sciences	03-06-2019
11	Latest College Joining Report	Principal of Horizon College Of Physiotherapy, Nanded	
12	MUHS UG Approval Letter	MUHS - Nashik - Maharashtra	01-05-2022 16-11-2022

