

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**SUBJECT WISE TEACHER LIST**

Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Physiotherapy in Community

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Physiotherapy in Community	Dr. Rabik Khan	Professor/Principal	01 April 2022	BPTH The Tamil Nadu Dr. M.G.R. Medical University Chennai -1998	MD The Tamil Nadu Dr. M.G.R. Medical University Chennai 2002	21 years 4 Months	Yes	MUHS/UG/E-6/2177/2022 DATE :07/11/2022	583663525290	ALBPR4353F	28-09-1975	rabikphysio@gmail.com	9764860163	No



*[Signature]*  
Principal  
Anand College of Physiotherapy  
Vaijapur Dist. Aurangabad

ANNEXURE - XIV(B)

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK  
SUBJECT WISE TEACHER LIST

Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Neuro Physiotherapy

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Neuro Physiotherapy	Dr. Ashwini Kale	Professor	01 February 2024	BPTH NTR University 2010	MPTH MGMV University 2013	12 Years 11 Month	No	-	561907250595	BTLPK0436M	25-02-1986	ashwinikalept@yahoo.co.in	72638 91882	No



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Principal  
Anand College of Physiotherapy  
Dist. Aurangabad

ANNEXURE - XIV(B)

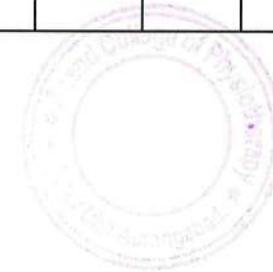
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK  
SUBJECT WISE TEACHER LIST

Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Musculoskeletal Physiotherapy

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Musculoskeletal Physiotherapy	Dr. Tabish Fahim	Professor	01 September 2023	BPTH Hamdard University 2011	MPTH Hamdard University 2013	10 Years 2 Month	No	-	989544176571	ABLPF3077G	08-01-1987	drtabishfahim@gmail.com	8368148230	No



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Principal  
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Nashik, Maharashtra

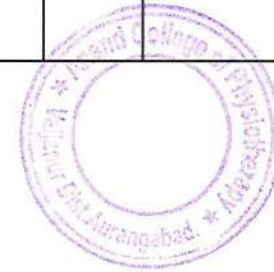
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Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Neuro Physiotherapy

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1	ANAND COLLEGE OF PHYSIOTHERAPY	Neuro Physiotherapy	Dr. Aditi Ashok Katkar	Associate Professor	01 January 2024	BPTH MUHS University 2007	MPTH KIMS University 2020	12 Years	No	-	904500659492	BLFPP0580H	01-12-1985	dr.aditi11285@gmail.com	9860695337	No



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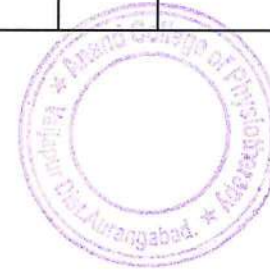
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Name of Subject : Musculoskeletal Physiotherapy

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1	ANAND COLLEGE OF PHYSIOTHERAPY	Musculoskeletal Physiotherapy	Dr. Khan Rakshanda Tazeen	Associate Professor	01 October 2023	BPTH MUHS Nashik University 2010	MPTH Deemed Unuversity2014	7 Years 4 Month	No	-	854134376876	BIEPK4978G	21-05-1987	rakhshandatz@gmail.com	7263891882	No



  
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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
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Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Kinesiotherapy & Physical Diagnosis

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Kinesiotherapy & Physical Diagnosis	Dr. Amol Malkhan Padwal	Asst professor	2-May-22	BPTH MUHS Nashik Unicersity 2019	MPTH Rajiv Gandhi University of Health Science Banguuru -2022	1 Year 8 Months 20 Days	Yes	MUHS/UG/E-6/2262/2022 DATE: 16/11/2022	847498850269	CBRPP9386C	10-12-1993	amolpadwal91@gmail.com	9604081599	No



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**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
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Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Community in Physiotherapy

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Community in Physiotherapy	Dr. Sampada Dinkar Daphane	Asst professor	2-May-22	BPTH MUHS Nashik Unicersity 2019	MPTH MUHS Nashik Unicersity 2022	1 Year 8 Months 20 Days	Yes	MUHS/UG/E-6/2262/2022 DATE: 16/11/2022	470419357044	DXBPD8460E	25-01-1996	sampadadaphane@gmail.com	8999808684	No



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Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Electrotherapy & Electrodiagnosis

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year)	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Electrotherapy & Electrodiagnosis	Dr. Farrooque Moinuddin Hafiz	Asst professor	02 May 2022	BPTH KLE Academy of Higher Education & Research University 2019	MPTH Rajiv Gandhi University of Health Science Banguuru -2021	3 Years 2 Month	Yes	MUHS/UG/E-6/2263/2022 DATE: 16/11/2022	730223048345	ABNPF0065C	31-11-193	moinf@gmail.com	9021756646	No



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Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Musculoskeletal Physiotherapy

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Musculoskeletal Physiotherapy	Dr.Ibitkar Rahul Ramesh	Asst. Professor	10 January 2024	BPTH MUHSUniversity 2018	MPTH Rajiv Gandhi Unicersity of Health Science 2023	1 Month	No	-	556098610206		05-06-1993	ibitkarrahul@gmail.com	9503814631	No



  
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College Phone No. : 9922177705

Name of Subject : Neuro Physiotherapy

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Neuro Physiotherapy	Dr. Prakash Subhash Borade	Asst. Professor	26 January 2024	BPTH MGM University 2018	MPTH MUHS University 2021	8 Month 7 Days	No	-	574288805067	CDJPB5384C	04-02-1996	prakashborade6@gmail.com	9762549596	No



  
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Aurangabad

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College Phone No. : 9922177705

Name of Subject : Electrotherapy & Electro Daignosis

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year o Passing	PG Qualification & Year o Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Electrotherapy & Electro Daignosis	Dr. Tanmay Milind Sathe	Asst. Professor	01 July 2023	BPTH MUHS University 2015	MPTH Manipal University,2019	2 Year 8 Days	No	-	568947501899	EFWPS9433C	30-05-1993	tanmaysathe30593@gmail.com	9673133198	No



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SUBJECT WISE TEACHER LIST

Name of the College : ANAND COLLEGE OF PHYSIOTHERAPY

College Phone No. : 9922177705

Name of Subject : Cardiovascular and Respiratory Physiotherapy

S. N	CollegeName	Subject	Full Name of the Teaching Staff (First, Middle, Surname)	Designation	Date of Joining	UG Qualification & Year of Passing	PG Qualification & Year of Passing	Teaching Exp. After PG Passing	MUHS Approval (Yes / No)	If MUHS Approval Letter & Date	Addhar No.	Pan No.	Date of Birth ( Age in Year )	E-mail ID	Contact No.	Debarred ( Yes / No)
1	ANAND COLLEGE OF PHYSIOTHERAPY	Cardiovascular and Respiratory Physiotherapy	Dr.Zoha Badiuzzam Alvi	Asst. Professor	01 September 2023	BPTH MGM University 2018	MPTH MUHS University 2021	5 Month 7 Days	No	-	861953102584	BRCPA4632A	13-05-1997	zoalvi8087@gmail.com	8459982240	No



  
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Vailasur Dist. Aurangabad