## **Particulars of Principal:**

Name	Qualifications with year & Name of awarding authority	Regn.No. with date and name of Council /Board	Teaching Experience with name of college where such experience is gained	Admini strative Experie nce	Nature (Regular/ Temp. /Officiati ng] & date of appointm ent	Other (if any)
Dr.Mr. Jaykumar Bhanuse	M.D. [Hom] Dec2011 MUHS Nashik	25457,dated 05.07.1997 MCH Mumbai	1.Demonstrator — (Anatomy)1 yr 01 months —P.D.Y. Patil Homoeopathic College,Pune.  2.Lecturer- (Anatomy). 9 yrs & 5 months— L.M.F's Homoeopathic College, Chichwad Pune.  3.Professor — (Anatomy) 3 yrs Anantrao Kanase Homoeopathic College, A/p- Alephata Tal. Junnar, Pune	1.NSS program officer (1 yr.& 6 months) at L.M.F's H.M.C. Chichwa d.  2. Worked as Centre Incharge for Univercity exam.	Regular	====
			<b>4.Professor-</b> (Anatomy) 1 yr & 6 months.			

	Sai homoeopathic	3.
	Medical College,	Worked
	Bhivandi.	as
	( D: 1 0	Centre
	6. Principal & HOD(anatomy)	Observe
		r for
	Since 01 Aug. 2017	Univerci
	Till Today	ty exam.
	Hon.R.R.Patil HMC,	
	Sangli	
	Total Experiance – 16 yrs	

## **DETAILS OF PRINCIPAL**

- Name: Dr. Jaykumar V. Bhanuse
- **Age** :- 45 years (16/05/1974)
- Qualification :- M.D. (Homoeopathy), F.C.A.H.
- \* Registration NO.:- 25457 (MCH)
- ❖ Address: C/o Dr. Ghatage Multispecialty Hospital, Pune Bypass Road, Sangli
- ❖ Contact No.:- 1) College Office :- 0233-2377275
  - 2) Mobile No.:- 9850950191
  - 3) Mobile No.:- 9226579649
  - Email ID:- drghatagehospital@rediffmail.com jaykumar.bhanuse@yahoo.com
  - ❖ Date Of Joining :- 3 May 2017