| S.<br>No. | Information of Teacher  |   |   |        |                       |                                     |   |  |
|-----------|---|---|---|--------|-----------------------|-------------------------------------|---|--|
| 1.        | Name of the Teacher   | Dr. Ravinder  |   |        |                       |                                     |   |  |
| 2.        | Teacher's code  | AYPK01453   |   |        |                       |                                     |   |  |
| 3.        | Date of Birth (dd /mm/yyyy)   | 06/06/1993  |   |        |                       |                                     |   |  |
| 4.        | UG Qualification  | Name of B.A.M.S. Degree   |   |        |                       |                                     |   |  |
|           |   | Passing Year  |   |        |                       |                                     |   |  |
|           |   | University  | Pt. Bhagwat Dayal Sharma, University of Health Sciences, Rohtak,<br>Haryana |        |                       |                                     |   |  |
| 5.        | PG Qualification  | Name of<br>Subject  | M.D. Panchakarma  |        |                       |                                     |   |  |
|           |   | Passing Year  | 2024  |        |                       |                                     |   |  |
|           |   | University  | Rajiv Gandhi University of Health Sciences, Bangalore                       |        |                       |                                     |   |  |
| 6.        | Additional  | Subject   | NA  |        |                       |                                     |   |  |
|           | qualification   | Passing Year  | r NA  |        |                       |                                     |   |  |
|           | P.G.Diploma/Ph.D.   | University  | NA  |        |                       |                                     |   |  |
| 7.        | Post wise details of  |   | ition   |        | Department            | Designation                         | Name of the college   |  |
|           | Experience in<br>chronological order<br>from the date of<br>initial appointment | From date<br>(dd/mm/yyyy)<br>26/02/2024                               | To d<br>(dd/mm<br>Till Date   | /уууу) | (Subject) Panchakarma | Assistant<br>Professor/<br>Lecturer | Jeevan Jyoti<br>Ayurvedic Medical<br>College & Hospital,<br>Aligarh |  |
| 8.        | Presently working Department (Subject)  | Panchakarma   |   |        |                       |                                     |   |  |
| 9.        | Present Designation   | Assistant Professor   |   |        |                       |                                     |   |  |
| 10.       | Nature of present appointment (regular/contract/de putation)                    | Regular   |   |        |                       |                                     |   |  |
| 11.       | Permanent<br>Residential Address  | 496/7, Shyam Nagar, Patiala Chowk, Jind, Haryana, Pin- 126102         |   |        |                       |                                     |   |  |
| 12.       | Local Residential<br>Address  | Kunjalpur, Melrose Bypass, Koil, Aligarh (Uttar Pradesh), Pin- 202001 |   |        |                       |                                     |   |  |
| 13.       | State Board / Council   | Registration Nu   |   |        |                       |                                     |   |  |
|           | Registration details  | Name of State E   | oard Council of Indian Medicine, Haryana                                    |        |                       |                                     | nchkula   |  |