

S. No.	Information of Teacher	To be filled up by Teacher				
1.	Name of the Teacher	DR. PRATHIBHA PRAKASH				
2.	Teacher's code	AYSK01130				
3.	Date of Birth (dd /mm/yyyy)	26/07/1995				
4.	UG Qualification	Name of Degree	BAMS			
		Passing Year	2018			
		University	RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES			
5.	PG Qualification	Name of Subject	M.S. SHALAKYA			
		Passing Year	2022			
		University	KLE UNIVERSITY, BELGAUM			
6.	Additional qualification P.G.Diploma/Ph.D.	Subject	NA			
		Passing Year	NA			
		University	NA			
7.	Post wise details of Experience in chronological order from the date of initial appointment	Duration		Department (Subject)	Designation	Name of the college
		From date (dd/mm/yyyy)	To date (dd/mm/yyyy)			
		22/11/2022	12/01/206	SHALAKYA TANTRA	ASSISTANT PROFESSOR	MANGALAYATAN AYURVEDA MEDICAL COLLEGE AND RESEARCH CENTER, ALIGARH
		13/01/2026	TILL DATE	SHALAKYA TANTRA	ASSISTANT PROFESSOR	JEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE,ALIGARH.
8.	Presently working Department (Subject)	SHALAKYA TANTRA				
9.	Present Designation	ASSISTANT PROFESSOR				
10.	Nature of present appointment (regular/contract/deputation)	REGULAR				
11.	Permanent Residential Address	KUMBLAMTHADATHIL HOUSE, PERIYAPPURAM PO, ERNAKULAM (KERLA)				
12.	Local Residential Address	STAFF QUARTER, JEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE CAMPUS, 10 TH KM MILE STONE, LODHA, ALIGARH, 202140				
13.	State Board/ Council Registration details	Registration Number	39565			
		Name of State Board	KARNATAKA AYURVEDIC & UNANI PRACTITIONER'S BOARD KARNATAKA			