

S. No.	Information of Teacher	To be filled up by Teacher				
1.	Name of the Teacher	DR. AMAR SINGH TIWARI				
2.	Teacher's code	AYSV00188				
3.	Date of Birth (dd /mm/yyyy)	26/06/1984				
4.	UG Qualification	Name of Degree	BAMS			
		Passing Year	2010			
		University	PANDIT RAVISHANKAR SHUKLA UNIVERSITY RAIPUR			
5.	PG Qualification	Name of Subject	M.D. SWASTHA VRITTA			
		Passing Year	2017			
		University	BARKATULLA UNIVERSITY BHOPAL			
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	<b>Duration</b>		<b>Department (Subject)</b>	<b>Designation</b>	<b>Name of the college</b>
		<b>From date (dd/mm/yyyy)</b>	<b>To date (dd/mm/yyyy)</b>			
		03/03/2017	07/03/2022	SWASTHA VRITTA	ASSISTANT PROFESSOR	JEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE, ALIGARH.
08/03/2022	TILL DATE	SWASTHA VRITTA	ASSOCIATE PROFESSOR	JEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE, ALIGARH.		
8.	Presently working Department (Subject)	SWASTHA VRITTA & YOGA				
9.	Present Designation	ASSOCIATE PROFESSOR				
10.	Nature of present appointment (regular/contract/deputation)	REGULAR				
11.	Permanent Residential Address	MIG 19 (S) PHASE-2, KABIR NAGAR, HIRAPUR ROAD, RAIPUR, CHATTISHGARH, 492099				
12.	Local Residential Address	A-2, STAFF QUARTER, JEEVAN JYOTI AYURVEDIC MEDICAL COLLEGE CAMPUS, 10 <sup>TH</sup> KM MILE STONE, LODHA, ALIGARH, 202140				
13.	State Board/ Council Registration details	Registration Number	CG01860AYURVED			
		Name of State Board	CHATTISHGARH AYURVEDIC AND UNANI CHIKITSA PADHATHI AVUM PRAKRITIK CHIKITSA BOARD RAIPUR			
		Central Registration	AY/CG/0000111 (CENTRAL COUNCIL OF INDIAN MEDICINE NOTIFICATION 21st November 2019)			
14.	Mobile Number	8602000090				
	Email ID	DRAMARSINGHTIWARI@GMAIL.COM				
15.	Name of the Principal of college	Dr. Rabi Narayan Mahanta				