



Shri Baliraja Shikshan Sanstha, Someshwar's

RAMRAO PATIL AYURVED MAHAVIDYALAYA & RUGNALAYA

BUS STAND ROAD, PURNA-431511 TQ.PURNA DIST. PARBHANI
Mob: 7620515721, 8055870777 / Ph : (02452) 254725 / Fax : (02452) 255088
Email : rpampp@gmail.com / www.rpayurvedcollege.org

1) Recognized by NCISM, New Delhi

2) Affiliated to Maharashtra University of Health Sciences, Nashik

Annexure X For Fellowship Teaching Certificate

Information to be submitted with respect to newly appointed mentors
Professional Teaching Experience Certificate for Fellowship/Certificate Courses Director/Mentor

Title of the Course applied

This to Certify that Dr. has worked in the Department of
..... Training Centre as per following details

A) General Experience

Designation	From	To	Total period Year/Months

NOT APPLICABLE

B) Actual experience in the subject of concerned Fellowship/Certificate Course applied for :-

Designation	From	To	Total period Year/Months

NOT APPLICABLE

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)

Sign & Stamp
Head of the Department
Date : / /

Sign & Stamp
Dean/Principal/Head of Institute
Date: / /

Name of Visitors
Chairman
Member
Member
Member

Signature of Visitors

Sd/-
Principal
RPAM & R Purna