

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (APPROVED + NON APPROVED)
 PG Degree As On :

Faculty: Nursing
 Name of College: Tehmi Grant Institute of Nursing Education

Subject: Mental Health Nursing
 College Code: 6207003

Intake Capacity: B.Sc Nursing- 40 , M.Sc. Nursing-18

S.N.	Name of the Teaching Staff	Designation	Mobile No.	E-mail ID	Date of Birth	Whether belongs to Reserved category (If Yes, specify)	Date of Appointment	Teaching Experience UG (yrs)							Total Teaching Experience in years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status (Yes/No)	Details of PG teacher recognition by MUHS (Yes/No)		Photograph with Signature
								Tutor/ C.I.	Asst. Prof.	Asso. Prof.	Prof.	Vice principal	Principal	Total				Temp/Regular	Letter No. & date	
1	Dr. Shubhada Kale	Professor Cum Principal	9822251374 9850733428	shubhadakale2003@yahoo.com	25/12/1973	No	06/02/05	6 yrs	3 yrs	6 yrs	7.8 yrs	N.A.	4.8 yrs	26 yrs	15 yrs	Regular	Yes	Regular	MUHS/E-6/PGT/327/2009 dated 7/3/2009 MUHS/PG/E-6/6207/2460/13 dated 30/8/2013	

Shale
 Signature of Dean / Principal

Principal
 GMF's Tehmi Grant Institute of Nursing Education
 13, Tadiwala Road, Opp. Mers Hotel,
 Pune - 411001, Maharashtra, India



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (APPROVED + NON APPROVED)
 PG Degree As On :

Faculty: Nursing
 Name of College: Tehmi Grant Institute of Nursing Education

Subject: Child Health Nursing
 College Code: 6207003

Intake Capacity: B.Sc Nursing- 40 , M.Sc. Nursing-18

S.N.	Name of the Teaching Staff	Designation	Mobile No.	E-mail ID	Date of Birth	Whether belongs to Reserved category (If yes, specify category)	Date of Appointment	Teaching Experience							Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of UG teacher recognition by MUHS (Yes/No)		Photograph with Signature
								Tutor/ C.I.	Asst. Prof.	Asso. Prof.	Prof.	Vice principal	Principal	Total				Temp/Regular	Letter No. & date	
1	Dr. Sreelekha Rajesh	Professor Cum Vice Principal	9890312519	sreelrajesh@gmail.com	30/5/1974	No	25/5/2005	3 yrs	3 yrs	6 yrs	7.8 yrs	4.8	N.A.	23 yrs	15 yrs	Regular	Yes	Regular	MUHS/E-6/PGT/327/2009 dated 7/3/2009 MUHS/PG/E-6/5207/2460/13 dated 30/8/2013	
2	Dr. Agnes Arun Swamy	Associate Professor	9922883400	agnesarun@gmail.com	17/2/1976	No	25/5/2005	1 yr	3 yrs	15 yrs	N.A.	N.A.	N.A.	19 yrs	15 yrs	Regular	Yes	Regular	MUHS/E-6/PGT/327/2009 dated 7/3/2009 MUHS/PG/E-6/M.Sc(Nursing)/3264/12 dated 3/12/2012	


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DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (APPROVED + NON APPROVED)
PG Degree As On :

Faculty: Nursing
Name of College: Tehmi Grant Institute of Nursing Education

Subject: Medical Surgical Nursing
College Code: 6207003

Intake Capacity: B.Sc Nursing- 40 , M.Sc. Nursing-18

S.N.	Name of the Teaching Staff	Designation	Mobile No.	E-mail ID	Date of Birth	Whether belongs to Reserved category (If Yes, specify category)	Date of Appointment	Teaching Experience						UG (yrs)	Total Teaching Experience in years of PG	Type of Appointment	University Approval Status (Yes/No)	Details of UG teacher recognition by MUHS (Yes/No)		Photograph with Signature
								Tutor/ C.I.	Asst. Prof.	Asso. Prof.	Prof.	Vice Principal	Principal					Total	Temp./Regular	
1	Ms. Mini Shibu	Associate Professor	9860081900	mini_shibu123@yahoo.co.in	04/07/74	No	07/03/06	5.5 yrs	4 yrs	13 yrs	N.A.	N.A.	N.A.	22.5 yrs	15 yrs	Regular	Yes	Regular	MUHS/E-6/PGT/327/2009 dated 7/3/2009 MUHS/PG/E-6/6207/2460/13 dated 30/8/2013	
2	Ms. Meenakshi. K	Lecturer	9822697896	meenu79@gmail.com	06/01/79	No	09/03/12	3.1 yrs	9 yrs	N.A.	N.A.	N.A.	N.A.	12 yrs	11 yrs	Regular	Yes	Regular	MUHS/PG/E-6/2284/2018 dated 17/12/2018	


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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (APPROVED + NON APPROVED)
 PG Degree As On :

Faculty: Nursing
 Name of College: Tehmi Grant Institute of Nursing Education

Subject: Obstetrics & Gynecological Nursing
 College Code: 6207003

Intake Capacity: B.Sc Nursing- 40 , M.Sc. Nursing-18

S.N.	Name of the Teaching Staff	Designation	Mobile No.	E-mail ID	Date of Birth	Whether belongs to Reserved category (if Yes, specify category)	Date of Appointment	Teaching Experience UG (yrs)							Total Teaching Experience in years of PG	Type of Appointment Temp/Regular/Contractual	University Approval Status (Yes/No)	Details of UG teacher recognition by MUHS (Yes/No)		Photograph with Signature
								Tutor/ C.I.	Asst. Prof.	Asso. Prof.	Prof.	Vice Principal	Principal	Total				Temp/Regular	Letter No. & date	
1	Ms. Annie Mathew	Associate Professor	9881460063	findannie_111@yahoo.co.in	05/01/84	No	08/02/10	1 yr	9 yrs	4 yrs	N.A.	N.A.	N.A.	14 yrs	13 yrs	Regular	Yes	Regular	MUHS/PG/E-6/NA Sc(Nursing)/3254/12 dated 3/12/2012	
2	Ms. Yashashri Pore	Lecturer	9167391451	pore.yashashri@gmail.com	15/12/1983	No	03/02/11	3.8 yrs	10.8 yrs	N.A.	N.A.	N.A.	N.A.	14.4 yrs	12.6 yrs	Regular	Yes	Regular	MUHS/PG/E-6/2284/2018 dated 17/12/2018	


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