

Annexure-XIV (C)

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)**

Name of College : Occupational therapy School And Centre , Government Medical College , Nagpur.

Phone no./Mobile no. : 0712-2701684

Name of subject : M.O.TH. (Neuroscience)

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years after PGM)	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University.)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	Dr.(Mrs) Leena A. Deshpande	Associate Professor	Neurosciences	Regular	B. Th. O. (1994) D.R.O.T.(1997) M.Th.O.(2004) PhD OT (2019)	MUHS/E-6/651-A/871Dt.05/03/2007	20 Years	YES	MUHS/E-6/PG/PGTRC/1508/2010 Dt-28/07/2010	10	23/12/1973	leenadeshpande23otgmc@gm ail.com	9422443263	3735 8132 2722	NO	
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प्रमुख व प्राध्यापक (अ) का
व्यवसायोपचार शाळा व केंद्र,
शासकीय वैद्यकीय महाविद्यालय
नगर

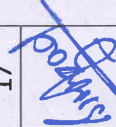
Annexure-XIV (C)

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Course)**

Name of college: Occupational Therapy School and Centre, Government Medical College, Nagpur

Phone no/ Mobile no: 0712-2701684

Name of subject: Occupational Therapy (Musculoskeletal Sciences)

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/ Speciality	Type of Appointment (Regular/ Temp. / Honorary)	Qualification	University Approval (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	(Recognition Letter Date issued by University.)	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/ No)	Sign.. of Teacher
1	Dr.(Mrs) Sofia H. Azad	Principal & Prof. (Addl. Charge)	Musculoskeletal	Regular	B. Th. O. (1989) M.Sc. O.T (1995) PhD OT (2019)	UG - MUHS/E-6/651-A/871Dt.05/03/2007 PG - MUHS/PG/E-1878 Dt.27/08/2011	25 Years	YES	MUHS/PG/E-6/PGTRC/1878 Dt.27/08/2011	06	25/09/1968	sofiaazad2012@gmail.com	9823060144	8302 4499 8372	NO	



प्राचार्य वैश्यापक (Addl.Chg)
 व्यवसायोपचार शाळा व केंद्र,
 शासकीय वैद्यकीय महाविद्यालय
 नागपूर