

**SUBJECT WISE ELIGIBLE EXAMINERS LIST (UG Courses)**  
**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

Name of the College : Ojas College of Physiotherapy

Phone/Mob, No. 8005933361

Name of the Subject : Cardiovascular & Respiratory Physiotherapy

| Sr. No. | College Name                         | Subject                                    | Full Name of The Teacher (First Name Middle Name Last Name.) | Designation         | Date of Joining | UG - Qualification & Year of Passing | PG - Qualification & Year of Passing    | Teaching Experience | MUHS Approval (Yes/No) | If Yes MUHS Approval Letter & Date       | Adhar No.      | Pan No.    | Date of Birth (Age in year) | Latest Email Address   | Contact No.(Mob) | Debarred Yes/No |
|---------|--------------------------------------|--|--|---------------------|-----------------|--------------------------------------|---|---------------------|------------------------|--|----------------|------------|-----------------------------|------------------------|------------------|-----------------|
| 1       | Ojas College of Physiotherapy, Jalna | Cardiovascular & Respiratory Physiotherapy | Dr. Mohammedsohel Rashidmiya Quadri                          | Associate Professor | 20-06-23        | Bachelor of Physiotherapy (BPT) 2008 | Master of Physiotherapy (MPT. MSK) 2012 | 10 Years            | Yes                    | MUHS/UG/E-6/164111/2613/2021/30 /12/2022 | 9637 8211 5200 | AAGPQ4752R | 22-12-1974 (47 Years)       | sohel_quadri@yahoo.com | 9049356235       | No              |



*Kuldeep*  
**PRINCIPAL**

**Ojas College of Physiotherapy**  
 Revgaon Road, Rohanwadi, Jalna

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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

Name of the College : Ojas College of Physiotherapy 8005933361  
Phone/Mob. No. : 8005933361

Name of the Subject : Kinesiotherapy & Physical Diagnosis

| Sr. No. | College Name                               | Subject                                   | Full Name of The Teacher<br>(First Name, Middle Name<br>Last Name.) | Designation            | Date of<br>Joining | UG -Qualification<br>& Year of Passing     | PG -Qualification<br>& Year of Passing           | Teaching<br>Experience | MUHS<br>Approval<br>(Yes/No) | IF Yes MUHS<br>Approval Letter &<br>Date      | Adhar No.      | Pan No.     | Date of<br>Birth (Age<br>in year) | Latest Email Address    | Contact<br>No.(Mob) | Debarred<br>Yes/No |
|---------|--|---|---|------------------------|--------------------|--|--|------------------------|------------------------------|---|----------------|-------------|-----------------------------------|-------------------------|---------------------|--------------------|
| 1       | Ojas College of<br>Physiotherapy,<br>Jalna | Kinesiotherapy &<br>Physical<br>Diagnosis | Dr. Pavan Kumar Ramasheshanna<br>Bannalakurva                       | Associate<br>Professor | 20-04-22           | Bachelor of<br>Physiotherapy (BPT)<br>2005 | Master of<br>Physiotherapy (MPT.<br>Cardio) 2009 | 12 Year                | Yes                          | MUHS/UG/E-<br>6/163107/1036/2022<br>08/062022 | 5198 7335 9228 | BBZPPB3848N | 01-07-1983<br>(39 Year)           | pavanbhphysio@gmail.com | 9834101231          | No                 |



*P. Ramasheshanna*  
Principal  
**Ojas College of Physiotherapy**  
Revgaon Road, Rohanwadi, Jalna

**SUBJECT WISE ELIGIBLE EXAMINERS LIST (UG Courses)  
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

Name of the College : Ojas College of Physiotherapy  
Phone/Mob. No. 8005933361

Name of the Subject : Electrotherapy & Electro Diagnosis

| Sr. No. | College Name                         | Subject                           | Full Name of The Teacher (First Name Middle Name Last Name.) | Designation             | Date of Joining | UG - Qualification & Year of Passing | PG - Qualification & Year of Passing       | Teaching Experience | MUHS Approval (Yes/No) | IF Yes MUHS Approval Letter & Date       | Adhar No.      | Pan No.     | Date of Birth (Age in year) | Latest Email Address    | Contact No.(Mob) | Debarred Yes/No |
|---------|--------------------------------------|-----------------------------------|--|-------------------------|-----------------|--------------------------------------|--|---------------------|------------------------|--|----------------|-------------|-----------------------------|-------------------------|------------------|-----------------|
| 1       | Ojas College of Physiotherapy, Jalna | Electrotherapy & Electro Dignosis | Dr. Krishna Kumar Damodhar Prasad Singh                      | Principal cum Professor | 09-11-20        | Bachelor of Physiotherapy (BPT) 2002 | Master of Physiotherapy (MPT, MSK) 2006    | 15 Years            | Yes                    | MUHS/UG/E-6/16411/12613/2021/30 /12/2022 | 7692 6863 9688 | BHOPSR8619B | 22-12-1974 (47 Years)       | physiooktsingh@yahoo.in | 8005933361       | No              |
| 2       | Ojas College of Physiotherapy, Jalna | Electrotherapy & Electro Dignosis | Dr. Vijender Saraiya Naddunuri                               | Associate Professor     | 24-10-21        | Bachelor of Physiotherapy (BPT) 2007 | Master of Physiotherapy (MPT, Ortho.) 2015 | 05 Year 08 Month    | Yes                    | MUHS/UG/E-6/16411/12613/2021/30 /12/2022 | 7565 4526 3807 | ALBPN6544J  | 10-08-1982 (40 Years)       | Viju25physio@gmail.com  | 9770990930       | No              |



*Vijender Saraiya*  
**PRINCIPAL**  
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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

Name of the College : Ojas College of Physiotherapy 8005933361  
Phone/Mob. No. : 8005933361

Name of the Subject : Neurosciences Physiotherapy

| Sr. No. | College Name                         | Subject                     | Full Name of The Teacher<br>(First Name Middle Name Last Name.) | Designation         | Date of Joining | UG -Qualification<br>& Year of Passing | PG -Qualification<br>& Year of Passing    | Teaching Experience | MUHS Approval<br>(Yes/No) | If Yes MUHS Approval Letter & Date | Adhar No.      | Pan No.     | Date of Birth (Age in year) | Latest Email Address       | Contact No.(Mob) | Debarred Yes/No |
|---------|--------------------------------------|-----------------------------|---|---------------------|-----------------|--|---|---------------------|---------------------------|------------------------------------|----------------|-------------|-----------------------------|----------------------------|------------------|-----------------|
| 1       | Ojas College of Physiotherapy, Jalna | Neurosciences Physiotherapy | Dr. Lokesh Ramavantar Sharma                                    | Professor           | 01-06-23        | Bachelor of Physiotherapy (BPT) 2005   | Master of Physiotherapy (MPT. Neuro) 2008 | 15 Year             | Yes                       |                                    | 4807 4987 1924 | FXHPS7648P  | 04-02-1984<br>(39 Year)     | lokeshsharma2001@gmail.com | 9834101231       | No              |
| 1       | Ojas College of Physiotherapy, Jalna | Neurosciences Physiotherapy | Dr. Ashish Kshirabdhhi Tanaya                                   | Associate Professor | 01-06-23        | Bachelor of Physiotherapy (BPT) 2009   | Master of Physiotherapy (MPT. Neuro) 2013 | 09 Year             | Yes                       |                                    | 7672.0106 9839 | AUPPT13172P | 23-06-1986<br>(37 Year)     | tanayashukla@gmail.com     | 9439583654       | No              |



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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

Name of the College : Ojas College of Physiotherapy 8005933361  
Phone/Mob. No. : 8005933361

Name of the Subject : Physiotherapy in Community Health

| Sr. No. | College Name                         | Subject                           | Full Name of The Teacher<br>(First Name Middle Name Last Name.) | Designation         | Date of Joining | UG -Qualification & Year of Passing  | PG -Qualification & Year of Passing                   | Teaching Experience | MUHS Approval (Yes/No) | If Yes MUHS Approval Letter & Date | Adhar No.      | Pan No.    | Date of Birth (Age in year) | Latest Email Address | Contact No.(Mob) | Debarred Yes/No |
|---------|--------------------------------------|-----------------------------------|---|---------------------|-----------------|--------------------------------------|---|---------------------|------------------------|------------------------------------|----------------|------------|-----------------------------|----------------------|------------------|-----------------|
| 1       | Ojas College of Physiotherapy, Jalna | Physiotherapy in Community Health | Dr. Pranjali Meghasham Gosavi                                   | Associate Professor | 20-06-23        | Bachelor of Physiotherapy (BPT) 2013 | Master of Physiotherapy (MPT. Community Health.) 2016 | 05 Year             | Yes                    |                                    | 7965 4702 7436 | CCIPG8406J | 24-04-1991 (32 Year)        | pranjal24@gmail.com  | 8446575499       | No              |



*Pranjal Meghasham Gosavi*  
Principal

**Ojas College of Physiotherapy**  
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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

Name of the College : Ojas College of Physiotherapy 8005933361

Phone/Mob. No. : 8005933361

Name of the Subject : Physiotherapy in Musculoskeletal Sciences

| Sr. No. | College Name                               | Subject   | Full Name of The Teacher<br>(First Name Middle Name<br>Last Name.) | Designation            | Date of<br>Joining | UG -Qualification<br>& Year of Passing     | PG -Qualification<br>& Year of Passing           | Teaching<br>Experience | MUHS<br>Approval<br>(Yes/No) | If Yes MUHS<br>Approval Letter &<br>Date | Adhar No.      | Pan No.    | Date of<br>Birth (Age<br>in year) | Latest Email Address           | Contact<br>No.(Mob) | Debarred<br>Yes/No |
|---------|--|---|--|------------------------|--------------------|--|--|------------------------|------------------------------|--|----------------|------------|-----------------------------------|--------------------------------|---------------------|--------------------|
| 1       | Ojas College of<br>Physiotherapy,<br>Jalna | Physiotherapy in<br>Musculoskeletal<br>Sciences | Dr. A Mani Muthu Annamalai   | Associate<br>Professor | 01-06-23           | Bachelor of<br>Physiotherapy (BPT)<br>2007 | Master of<br>Physiotherapy (MPT.<br>Ortho.) 2010 | 06 Year                | Yes                          |  | 3687 76142281  | BLOPM8111N | 21-06-1983<br>(39 Year)           | manimuthukutty@gmail.com       | 7022838424          | No                 |
| 1       | Ojas College of<br>Physiotherapy,<br>Jalna | Physiotherapy in<br>Musculoskeletal<br>Sciences | Dr. Manojkumar Laxman Das<br>Jadaya                                | Assistant<br>Professor | 01-04-22           | Bachelor of<br>Physiotherapy (BPT)<br>2016 | Master of<br>Physiotherapy (MPT.<br>Sport.) 2018 | 05 Year                | Yes                          |  | 4658 4135 8836 | ALCRJ3079D | 28-06-1990<br>(33 Year)           | dr.manojkumardasjaya@gmail.com | 8195004176          | No                 |



*Manojkumar*  
Dean/Principal  
**PRINCIPAL**

**Ojas College of Physiotherapy**  
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