

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

Name of the subject: Radiology
Phone/Mobile no.: 022-28207234
Name of College/Institute: U.S.R. Medical College & Dr. R.N. Cooper Hospital

ANNEXURE-VI.C

Sl. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject-Specialty	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Appointed (If UG)	Teaching Experience (in Years/Month)		Teaching Recognition (Yes/No)		Designation Letter Date Issued by University	No. of PG Students Enrolled last 3 years	Date of Birth	Email ID	Mobile No.	Aadhar Card No.	If Disposed (Yes/No)	Sign. of Teacher
							PG	UG	PG	UG								
1	Dr. SUNITA TIBREWALA	PROFESSOR AND HEAD	(Radiodiagnosis)	REGULAR	D.MRD, MD (Radiodiagnosis)	UGC, MUHS/UG/E-1/53/1133/2186/2018 DATE: 01/05/2018	33 YRS 10 MONTH	YES	YES	PG- MUHS/PG/E-1/1103/009/08 DATE: 17/07/2008		15-08-1963	sunita15@gmail.com	9820270607	84576899441	NO	<i>S. Tibrewala</i>	
2	Dr. DULEEP DAGDOO BHONSALE	PROFESSOR	(Radiodiagnosis)	REGULAR	D.MRD, MD (Radiodiagnosis)	UGC, MUHS/UG/E-1/53/1133/2186/2018 DATE: 23/01/2018	29 YRS 1 MONTH	YES	YES	PG- MUHS/PG/E-1/1102/656/2009 DATE: 09/11/2009		09-08-1963	diddhonsale@gmail.com	9766974157	738954336828	NO		

S. Tibrewala

[Signature]

Signature of HOD

Dr. Sunita Tibrewala

Professor & Head

Department of Radiology

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Dr. SHAMRESH C. MOHITE
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DR. R. N. COOPER HOSPITAL