



National Commission for Indian System of Medicine

College T...

You can review the information submitted in this College Teaching Staff Details form below before closing.

 Edit Information

 Close

Institution Details

Institution Id : **AYU0763**
 Institution Name : **AGM Ayurvedic Medical College & Hospital, Algur RC Jamkhandi-Bagalkot-587301, Karnataka**
 Institution Course : **Ayurveda**
 Visitation Id : **A06393**

Personal Information

Part Time Department : **Not Applicable**
 Salutation : **Mr.**
 Teacher First Name : **DOULATH**
 Teacher MiddleName Name : **UDAYA**
 Teacher SurName Name : **KUNDANAGARA**
 Teacher's Code Number : **AYSN00628**
 Nature of present appointment : **Regular**
 Date Of Birth : **10/Oct/1999**
 Father Name : **UDAYA**
 Email ID : **dhruvauk1010@gmail.com**
 Mobile Number : **7619144082**
 Gender : **Male**
 Mother Name : **RANI**
 PAN Number : **GJYPK4120G**



Current Address

Address Line 1 : **SHANTINAGAR**
 State : **Karnataka**
 City : **JAMKHANDI**
 Pincode : **587301**

Permanent Address

Address Line 1 : **Patel Galli bijapur**
 State : **Karnataka**
 City : **Vijayapura(Bijapur)**
 Pincode : **586101**

Education Details

UG Qualification

State/UT from where the qualifying degree was obtained : **KARNATAKA**
Name of University/Board or medical Institution : **Others**
Other University/Board or medical Institution : **KARNATAKA SANSKRIT UNIVERSITY**
Name of Institution : **Bangalore University, Bangalore**
Name of the obtained recognized Medical Qualification : **Others**
Other obtained recognized Medical Qualification : **B A SANSKIT**
Year of Passing : **2020**

PG Qualification

PG Qualification 1

PG Degree/PG Diploma : **Others**
State from which Addl. Degree obtained : **KARNATAKA**
Name of the University : **Others**
Other University : **KARNATAKA SANSKRIT UNIVERSITY**
Institution Name : **Bangalore University, Bangalore**
Specialization : **M.A. (Sanskrit)**
Year of Passing : **2022**

Details of Experience

State of Institution	District of Institution	Name of the college	Department(Subject)	Designation	
Karnataka	JAMKHANDI	AGM Ayurvedic Medical College & Hospital, Algur RC Jamkhadi-Bagalkot-587301, Karnataka	Ayurved Samhita & Siddhant	Assistant Professor/Lecturer	13/

Any gap in between your Job experience?: **No**

Current Job Details

Name of state board : **Not Applicable**
Department : **Ayurved Samhita & Siddhant**
(Subjects)
Language Teacher : **Sanskrit Teacher**
State Board Registration Number: **30200085**
Designation : **Assistant Professor/Lecturer**
From Date : **13/Apr/2023**

Bank Account Details

Salary Account Number : **41563889515**
Name of Bank & Branch : **SBI BLDE BRANCH VIJAYAPURA**

Uploaded Documents

- [Please click here. to download UG certificate](#)
- [Please click here. to download PG certificate](#)
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Please click here. to download copy of Appointment order

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