



National Commission for Indian System of Medicine

Faculty Registration Details

Note: The Commission/Marbism holds full authority to reject/withdraw any teacher code or to take appropriate action as per rules, if any discrepancy is found in the profile of the teacher.

[Show Application History](#)[Show Profile Updation History](#)

Application Type: Fresh Teacher
Assigned TO: TO000075
Current Owner: Institute
Assigned Teacher Code : AYRS01334

Faculty Details

Teacher Code Reference No. :	TCRA000052914
Applicant Name :	Dr. MAHALAPPA REVANSIDDHA MEHTRE
Gender :	Male
Date Of Birth :	26/Jan/1988
Father's Name :	REVANSIDDHA
Mother's Name :	SUNANDA
Teacher Code :	AYRS01334



Institute Details

Institution Id :	AYU0763
Institution Name :	AGM Ayurvedic Medical College & Hospital, Algur RC Jamkhandi-Bagalkot-587301, Karnataka
State :	Karnataka

Contact Details

Teacher's Mobile Number :	9158166871
Teacher's Email Id :	shriveer123@gmail.com
PAN Number :	BXLPM8408B

Present Address Details

Address Line 1 :	C/O MARUTI DONDIBA PHALKE AT / P ALGUR
Address Line 2 :	JAMKHANDI
State :	Karnataka
City :	JAMKHANDI
Pin Code :	587301

Permanent Address Details

Address Line 1 :	S/O REVANSIDDHA MEHTRE AT/P HULJANTI
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Address Line 2 : **MANGALWEDDA**
State : **Maharashtra**
City : **Mangalwedha**
Pin Code : **430003**

Notice Period

Duration Of Notice period (In days) **90**

UG Qualification

System of Medicine : **Ayurveda**
State/UT from where the qualifying degree was obtained : **KARNATAKA**
Name of University/Board or medical Institution : **Rajiv Gandhi University of Health Sciences, Bangalore**
Name of Institution : **Taluka Shikshana Prasarak Sahakara Mandal Ayurvedic College sindagi**
Name of the obtained recognized Medical Qualification : **Ayurvedacharya (Bachelor of Ayurvedic Medicine & Surgery)**
Nomenclature of qualification : **B.A.M.S.**
Year of Passing : **2011**

PG Qualification

PG Qualification 1
PG Degree/PG Diploma : **M.D.**
State from which Addl. Degree obtained : **MAHARASHTRA**
Name of the University : **Bharati Vidyapeeth (Deemed University) Pune**
Institution Name : **Bharati Vidyapeeth (Deemed University) Pune**
Specialization : **Ayurveda Vachaspati - M.D. (Rachana Sharir)**
Year of Passing : **2015**

Current Job Details

Name of the Current Institution : **AGM Ayurvedic Medical College & Hospital, Algur RC Jamkhandi-Bagalkot-587301, Karnataka**
Current Designation : **Assistant Professor/Lecturer**
Current Department : **Rachana Sharir**
From Date : **08/Nov/2022**
Do you want to change Department? : **No**

Registration Details

State Board Registration No : **29664**
State Board Name : **Karnataka Ayurvedic & Unani Practitioner's Board, Bangalore, Karnataka**
HPR Number : **32770536134305**

Previous Experience Details

Date of initial appointment: **08/Nov/2022**

Row No.	State of the Institution	District of the Institution	Name of the Institution	Department(Subject)	Designation	From	To
1	Karnataka	JAMKHANDI	AGM Ayurvedic Medical College & Hospital, Algur RC Jamkhandi-Bagalkot-587301, Karnataka	Rachana Sharir	Assistant Professor/Lecturer	08/Nov/2022	Till Date

Any gap in between your Job experience?:

Yes

S.NO	From Date	To Date	Reason
1	05/Jan/2016	07/Nov/2022	Gap Approved of Row 1

Checklist(Documents to be Verified)

To view document for date of birth. [Click here.](#)

To view Registration Certificate (Central or State Registration Certificate) [Click here.](#)

To view UG Qualification Degree certificate [Click here.](#)

To view PG Qualification Degree certificate [Click here.](#)

To view Appointment Order [Click here.](#)

To view Joining Letter [Click here.](#)

To view Promotion Order [Click here.](#)

To view Experience Certificates [Click here.](#)

To view Certified copy of relieving certificate from previous Institution [Click here.](#)

To view scanned copy of PAN Card. [Click here.](#)