



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 : AYKS01022

Faculty Details

Teacher Code Reference No. :	TCRA000052818
Applicant Name :	Dr. ASHWINI B THUBE
Gender :	Female
Date Of Birth :	08/Jul/1987
Father's Name :	BHALCHANDRA
Mother's Name :	ANURADHA
Teacher Code :	AYKS01022



Ashwini

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 :	9066631667
Teacher's Email Id :	craveendra123@gmail.com
PAN Number :	ALRPT0869L

Present Address Details

Address Line 1 :	Alagura RC Vijapur Road Jamakhadn
State :	Karnataka
City :	Bagalkot
Pin Code :	587301

Permanent Address Details

Address Line 1 :	E305, PALM ACRES, CHE LIMITED
Address Line 2 :	MAHATMA PHULE ROAD, MULUND EAST, MUMBAI
State :	Maharashtra

City : **Mumbai**
Pin Code : **400081**

Notice Period

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

UG Qualification

System of Medicine : **Ayurveda**
State/UT from where the qualifying degree was obtained : **MAHARASHTRA**
Name of University/Board or medical Institution : **Maharashtra University of Health Sciences, Nashik**
Name of Institution : **Bhartiya Sanskriti Darshan Trust Ayurved Mahavidyalaya**
Name of the obtained recognized Medical Qualification : **Ayurvedacharya (Bachelor of Ayurvedic Medicine & Surgery)**
Nomenclature of qualification : **B.A.M.S.**
Year of Passing : **2009**

PG Qualification

PG Qualification
PG Degree/PG Diploma : **M.D.**
State from which Addl. Degree obtained : **MAHARASHTRA**
Name of the University : **Maharashtra University of Health Sciences, Nashik**
Institution Name : **Yashwant Ayurved Mahavidyalaya, Post Graduate Training and Research Center, Kodoli.**
Specialization : **Ayurveda Vachaspati - M.D. (Kriya Sharir)**
Year of Passing : **2022**

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 : **Kriya Sharir**
From Date : **14/Nov/2022**
Do you want to change Department? : **No**

Registration Details

State Board Registration No : **I-63228-A**
State Board Name : **Maharashtra Council of Indian Medicine, Mumbai, Maharashtra**
HPR Number : **3277064634438**

Previous Experience Details

Date of initial appointment: **14/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	Kriya Sharir	Assistant Professor/Lecturer	14/Nov/2022	Till Date

Any gap in between your Job experience?:

No

Checklist(Documents to be Verified)

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

To view 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/Transfer 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.](#)

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