



National Commission for Indian System of Medicine

Faculty Registration Details

Note: The Commission/Marbhism 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 : AYKC04457

Faculty Details

Teacher Code Reference No. :	TCRA000063471
Applicant Name :	Dr. PRAMOD KUTAKOLI
Gender :	Male
Date Of Birth :	01/Jun/1995
Father's Name :	CHIDANAND
Mother's Name :	RATNA
Teacher Code :	AYKC04457



P.kutakoli

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 :	9113859118
Teacher's Email Id :	drpammukutakoli@gmail.com
PAN Number :	QLWPK6436D

Present Address Details

Address Line 1 :	S/O Chidanand,220 KEB Colony, ward no 22
Address Line 2 :	Mahalingapur, 587312
State :	Karnataka
City :	JAMKHANDI
Pin Code :	587312

Permanent Address Details

Address Line 1 :	S/O Chidanand,220 KEB Colony, ward no 22
Address Line 2 :	Mahalingapur, 587312

State : **Karnataka**
City : **JAMKHANDI**
Pin Code : **587312**

Notice Period

Duration Of Notice period (In days) **30**

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 : **Shri Dharmasthala Manjunatheshwara Institute of Ayurveda and Hospital**
Name of the obtained recognized Medical Qualification : **Ayurvedacharya (Bachelor of Ayurvedic Medicine & Surgery)**
Nomenclature of qualification : **B.A.M.S.**
Year of Passing : **2018**

PG Qualification

PG Qualification
PG Degree/PG Diploma : **M.D.**
State from which Addl. Degree obtained : **KARNATAKA**
Name of the University : **Rajiv Gandhi University of Health Sciences, Bangalore**
Institution Name : **Shri Shivayogeshwar Rural Ayurvedic Medical College**
Specialization : **Ayurveda Vachaspati - M.D. (Kayachikitsa)**
Year of Passing : **2025**

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 : **Kayachikitsa**
From Date : **22/May/2026**
Do you want to change Department? : **Yes**
Changed Designation : **Assistant Professor/Lecturer**

Registration Details

State Board Registration No : **41425**
State Board Name : **Karnataka Ayurvedic & Unani Practitioner's Board, Bangalore, Karnataka**
HPR Number : **71783868877130**

Previous Experience Details

Date of initial appointment: **22/May/2026**

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	Kayachikitsa	Assistant Professor/Lecturer	22/May/2026	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 Experience Certificates [Click here.](#)

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

To view NTET Eligibility certificate/Score card. [Click here.](#)

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