

I Dr. ASHISH CHAMPALAL PITALE aged 41 Years, S/o CHAMPALAL PITALE joined in this BAPU AYURVEDIC MEDICAL COLLEGE EVAM HOSPITAL LADANPUR KOPAGANJ MAU on 04/12/2017 and the details of my qualification and experience are mentioned below.

S. No.	Information of Teacher	To be filled up by Teacher				
1.	Name of the Teacher	DR. ASHISH CHAMPALAL PITALE				
2.	Teacher's code	AYDG00952				
3.	Date of Birth (dd /mm/yyyy)	19/02/1982				
4.	UG Qualification	Name of Degree	B.A.M.S.			
		Passing Year	2005			
		University	BHARTI VIDYAPEETH PUNE			
5.	PG Qualification	Name of Subject	AYURVEDA VACHASPATI -M.D. (DRAVYA GUNA VIGYANA)			
		Passing Year	2008			
		University	BHARTI VIDYAPEETH (DEEMED UNIVERSITY)PUNE			
6.	Additional qualification P.G.Diploma /Ph.D.	Subject				
		Passing Year				
		University				
7.	Post wise details of Experience in chronological order from the date of initial appointment	Duration		Department (Subject)	Designation	Name of the college
		From date (dd/mm/yyyy)	To date (dd/mm/yyyy)			
		01/07/2010	28/02/2014	AGAD TANTRA AVAM VIDHI VAIDYAKA	ASSISTANT PROFESSOR/LECTURER	JAMMU INSTITUTE OF AYURVEDA & RESEARCH
		11/09/2014	27/12/2014	DRAVYAGUNA VIGYANA	ASSISTANT PROFESSOR /LECTURER	AYUJYOTI AYURVEDIC COLLEGE & HOSPITAL
		01/01/2015	30/12/2015	AGAD TANTRA AVAM VIDHI VAIDYAKA	ASSISTANT PROFESSOR /LECTURER	PACIFIC COLLEGE OF AYURVEDA & RESEARCH CENTRE
		01/01/2016	29/01/2016	AGAD TANTRA AVAM VIDHI VAIDYAKA	ASSOCIATE PROFESSOR /READER	PACIFIC COLLEGE OF AYURVEDA & RESEARCH CENTRE
		30/01/2016	30/11/2017	AGAD TANTRA AVAM VIDHI VAIDYAKA	ASSOCIATE PROFESSOR /READER	JAMMU INSTITUTE OF AYURVEDA & RESEARCH
04/12/2017	TILL DATE	AGAD TANTRA AVAM VIDHI VAIDYAKA	ASSOCIATE PROFESSOR /READER	BAPU AYURVEDIC MEDICAL COLLEGE & HOSPITAL		
8.	Presently working Department (Subject)	AGAD TANTRA AVAM VIDHI VAIDYAKA				
9.	Present Designation	ASSOCIATE PROFESSOR/READER				
10.	Nature of present appointment (regular/contract/deputation)	REGULAR				
11.	Permanent Residential Address	SHRI VIDYA PARK, 2031 SADASHIV PEETH PUNE TILAK ROAD MAHARASHTRA 411030				
12.	Local Residential Address	Prakash Hospital, NH-29, Bramhsthan, Sahadatpura-Mau 275101				
13.	State Board / Council Registration details	Registration Number	I47154 A1/ A0021462/ 10020122			
		Name of State Board	Maharashtra Council of Indian Medicine, Mumbai, Maharashtra (NOC taken), (Applied in Board of Ayurvedic & Unani, Tibbi Chikitsa Board- Applicant Id : 10020122)			
14.	Mobile Number	9923292035				
	Email ID	pitaleashish@gmail.com				
15.	Name of the Principal of college	DR. N.K. JAISWAL				

