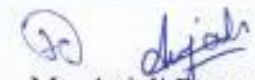


Annexure – “G”

Information of Co - ordinator of Training Centre

Sr. No.	Particular	-	Information to be filled
01.	Name of Director	:	Ms. Anjali Ratnam
02.	Date of Birth	:	14.12.1988
03.	Address	:	Plot No, 29, Survey No 47/3/2, Shri Krishna Housing Soceity, Chandan Nagar, Kharadi, Pune
04.	Tel. No./ Mob. No.	:	9921537256
05.	e-mail id	:	academics@rubyhall.com
06.	Nationality	:	Indian
07.	Qualification in details : (attached documentproof)	:	M.Com
08.	Teaching experience/Medical:Profession experience / Consultant/Mentor(attached document proof with signature of Head)	:	-
09.	Present Appointment	:	MUHS - Co-ordinator
10.	Publications (List & Proof)	:	-
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	-
12.	Any other relevant information	:	--

Date : 20.05.22


Ms. Anjali Ratnam
Signature of Co-ordinator


DR. NITIN PAI
HEAD OF THE DEPARTMENT


DR. D.N. BHALERAO
DIRECTOR ACADEMICS (ADMIN)

Date : 20.05.22



DR. D. N. BHALERAO
MBBS, DHM, PGDLMs, ACCR, BCC
DIRECTOR - ACADEMICS (ADMIN)
DIRECTOR - RESEARCH

