

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049 / 9420812816

Name of the Subject

Kulliyat

Sr. No.	College Name	Subject	Name of the Teacher (Last Name First Name Middle Name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No. (Mob.)	Whether Debarred from examination Yes / No
1	YFUMC	Kulliyat	Rubeena Lukhman Saudagar	Professor	30-12-2013	BUMS 2007	-		Yes	Under Process	818635830721	GCJPS9594G	16-05-1986	rubinasaudagar86@gmail.com	7387863887	No
2	YFUMC	Arabic & Manriqque, Falsafa	Mid Farooque Ashraf Khan	Assistant Professor	02-02-2009	FAZIL 2003	-		No	-	416699778147	DTHPK4560E	15-07-1976	khanfarooque2016@gmail.com	8806157430	No

Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431183

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049 / 9420812816

Name of the Subject

Tashreeh-ul-Badan

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Tashreeh-ul- Badan	Masarat Begum Mohammad Kamaluddin Farooqui	Professor	06-02-2020	BUMS 2004	-		Yes	MUHS/E-3/UG PG/5401/83/2021 08/01/2021	346349408151	AASP6504G	03-05-1983	masaraj123@g mail.com	8123605481	No
2	YFUMC	Tashreeh-ul- Badan	Shaikh Md. Feroz Shaikh Ayyub	Associate Professor	06-02-2020	BUMS 1995	-		Yes	MUHS/E-3/UG PG/5401/83/2021 08/01/2021	595406029187	CLLP57425P	12-10-1967	shakhtifroz2882 @gmail.com	7387737382	No
3	YFUMC	Tashreeh-ul- Badan	Shahid Alam Jalaluddin Ahmed	Professor	23-04-2021	BUMS 1996	-		No	-	718654439141	AJGPA3792C	27-08-1973	dralamspathab @gmail.com	9823495185	No

Principal

Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431193



ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049 / 9420812816

Name of the Subject

Munafe-ul-Aza

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualification on and Year of passing	PG - Qualification on and Year of passing	Teaching experience After PG	MUHS Approval (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Disbarred from examination Yes / No
1	YFUMC	Munafe-ul-Aza	Husain Vazir Shaikh	Professor	17-08-2015	BUMS 1992	-		Yes	MUHS/UG/E-3/134101/117 Date 26.06.2024	769928330209	BIHPS2356D	01-06-1966	hs22834@gmail.com	9970069047	No
2	YFUMC	Munafe-ul-Aza	Imran Alam Sadi Qutubuddin Ahmed	Assistant Professor	23-04-2021	BUMS 1999	-		Yes	MUHS/UG/E-3/134101/117 Date 26.06.2024	706605546766	AYOPSS9074L	17-02-1975	shobi_ahmed50@yahoo.com	9960014159	No



Principal

Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431163

ANNEXURE-VII
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkhedra Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049/ 9420812816

Name of the Subject

Tahffuzi wa Samaji Tib

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG - Qualificati on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Tahffuzi wa Samaji Tib	Ateequr Raheman Gulam Sultani Ansari	Professor	06-02-2020	BUMS 2002	MD 2012		Yes	MUHS/E-3/UG & PG/5401/2427 16/12/2020	278283136304	FPPPS7086F	01-06-1975	ateeeque.rahman10@gmail.com	8983020230	No
2	YFUMC	Tahffuzi wa Samaji Tib	Sadequa Parveen Abdul Irfan Ansari	Assistant Professor	13-10-2015	BUMS 2000	MD 2013		Yes	MUHS/E-3/UG/2912 27.07.2017	676767601350	CCCPA1991E	22-02-1978	ansarihaqdis@gmail.com	8905541720	No
3	YFUMC	Tahffuzi wa Samaji Tib	Zakir Mannan Shaikh	Assistant Professor	30-12-2020	BUMS 2006	-		Yes	MUHS/UG/E-3/134101/117 Date 26.06.2024	794510367876	CJZPS4868Q	01-06-1982	shaikhzakir164@gmail.com	9637061781	No

Principal

Yunus Fazlani Unani Medical College &
 Al-Fazlani Unani Hospital, Kunjkhedra
 Tal-Kannad Dist-Aurangabad 431103

ANNEXURE-VII**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049/ 9420812816

Name of the Subject

Ilmul Advia

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approval (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Ilmul Advia	Mohd Shoeb Mohd Iqbal Shah	Associate Professor	03.06.2024	BUMS 2008	-		Yes	MUHS/UG/E- 3/134101/17 Date 26.06.2024	960870114877	DSFPS5081D	12-09-1985	dr.shoebshah899@gmail.com	9370621399	No
2	YFUMC	Ilmul Advia	Dr. Shagufta Naaz MD Ishityaque	Assistant Professor	20-12-2025	BUMS 2009	MD 2025		NO		531687583075	FEHPM1472Q	26-12-1997	dr.shagufta.naaz.2026@gmail.com	7820865486	No

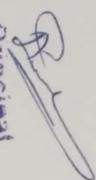

PrincipalYunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal:Kannad Dist:Aurangabad 431183

ANNEXURE-VII**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College **Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad**
Phone/Mobile No. **02435-228034 / 228049 / 9420812816**

Name of the Subject **Ilmul Saidla**

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificait on and Year of passing	PG - Qualificait on and Year of passing	Teaching experience After PG	MUHS Approval (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Ilmul Saidla	Malik Tauheed Ahmed Abdul Hamid	Professor	06-02-2020	BUMS 2004	-		Yes	MUHS/E-3/UG Pg/5401/83/2021 08/01/2021	655057725531	ASOPM1072E	01-06-1980	drmallktauheed@gmail.com	9272845547	No
2	YFUMC	Ilmul Saidla	Tahseena Md Zahoor	Assistant Professor	02.05.2024	UG 2019	MD 2024		No	-	469458392120	ADHPZ4066D	23.06.1994	tasso23694@gmail.com	9307015170	No


Principal

Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431902

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049 / 9420812816

Name of the Subject

Mahiyatul Amraz

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Mahiyatul Amraz	Imran Khan Ghulam Ghaus Khan Pathan	Professor	05-10-2015	BUMS 2006	-		Yes	MUHS/UG/E-3/134101/117 Date 26.06.2024	459989581369	BRWPK3550P	12-06-1984	imran.hutchinson@gmail.com	9420812816	No
2	YFUMC	Mahiyatul Amraz	Shaikh Mohaddis Sagir	Assistant Professor	01-04-2010	BUMS 2003	-		Yes	MUHS/E-3/UG/5401/120415. 03.2016	740508819502	BMPPS6798P	09-07-1976	dmohaddis1976@gmail.com	8975353779	No


PrincipalYunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431192

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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Name of the College

02435-228034 / 228049/ 9420812816

Phone/Mobile No.

Moalajat

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualification on and Year of passing	PG- Qualification on and Year of passing	Teaching experience After PG	MUHS Approval (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Moalajat	Pathan Abdul Cayyum Khan Abdul Hameed Khan	Professor	03.06.2024	BUMS 2006	-		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	779035306084	DMLPK7725N	13-05-1983	abdulcayyumkhan87@gmail.com	9420240835	No
2	YFUMC	Moalajat	Dr. Mahboob Alam	Professor	15.12.2025	BUMS 2006	-		No		597753963207	BJVPK5830M	14-12-1972	drmahboobalamkhan15@gmail.com	8291718777	No
3	YFUMC	Moalajat	Jameelur Rehman Gulam Sultani	Associate Professor	03.06.2024	BUMS 2001	MD 2013		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	447383280211	CYPSS3367D	15-12-1978	drjameel03@gmail.com	9545069541	No
4	YFUMC	Moalajat	Shaikh Irfan Shaikh Mukhtar	Assistant Professor	18-04-2023	BUMS 2014	MD 2019		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	535141648670	EAVPS7870H	01-06-1992	drirfanqureshi647@gmail.com	9763175221	No
5	YFUMC	Moalajat	Khan Ameer Kauser Khan	Assistant Professor	03.06.2024	BUMS 2017	MD 2023		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	589401932469	HFVFK1864	06.02.1994	drameerkhan621994@gmail.com	9156565451	No

Principal

Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431999



ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No. 02435-228034 / 228049/ 9420812816

Name of the College Amraz e Niswan wa Qabalat

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Amraz e Niswan wa Qabalat	Ansari Shadya Tahseen Md Yunus	Professor	28-11-2017	BUMS 1992	-		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	731345695141	BQUPA4861N	01-06-1970	shadyaansari1970@gmail.com	7558411801	No
2	YFUMC	Amraz e Niswan wa Qabalat	Masim Shah Mushtaque Shah	Assistant Professor	04-04-2022	BUMS 2006	-		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	654765995370	AYWP/PC6312K	25-10-1984	dmwshah92@gmail.com	9225715194	No



Yunus Fazlani Unani Medical College
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431183

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College: Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad
 Phone/Mobile No.: 02435-228034 / 228049 / 9420812816

Name of the Subject: Ilaj Bit tadbeer

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After Pg	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debbarid from examination Yes / No
1	YFUMC	Ilaj Bit tadbeer	Shakeel Ahmad Rahmatulla Shaikh	Associate Professor	25-02-2017	BUMS 2002	-		Yes	MUHS/E-3/UG/2912 27.07.2017	791129512270	GCJPS9595H	26-01-1979	umarshakeel671@gmail.com	9637476203	No
2	YFUMC	Ilaj Bit tadbeer	Atshan Sayed Mohsin Nazeer	Assistant Professor	25-02-2017	BUMS 2007	MD 2016		Yes	MUHS/E-3/UG/2912 27.07.2017	309779484046	HHLPS0867Q	28-04-1983	afzalsiddiqui14@gmail.com	9975100159	No
3	YFUMC	Ilaj Bit tadbeer	Pathan Anjad Khan Saleem Khan	Professor	03.06.2024	BUMS 2005	-		Yes	MUHS/UG/E- 3/134101/117 Date 26.06.2024	634192547078	ATNPP5614B	01-07-1982	dkhanamjad4u@gmail.com	9623399366	No


Principal

Yunus Fazlani Unani Medical College &
 Al-Fazlani Unani Hospital, Kunjkheda
 Tal-Kannad Dist-Aurangabad 431550

ANNEXURE-VII**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)**

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049 / 9420812816

Name of the Subject

Ilmul Aftal

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificait on and Year of passing	PG - Qualificait on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age In Year)	Latest Email Address	Contact No.s (Mobile)	Whether Disbarred from examination Yes / No
1	YFUMC	Ilmul Aftal	Sameena Nasreen Jafar Khan Pathan	Associate Professor	27-02-2017	BUMS 2004	-		Yes	MUHS/E-3/UG/2912 27.07.2017	373833155264	DRVPP9409K	21-06-1982	sameenanasreen ck@gmail.com	9420266853	No
2	YFUMC	Ilmul Aftal	Lamat-Ur-Noor Sayed Hasham Ali	Assistant Professor	05-10-2015	BUMS 2001	-		Yes	MUHS/E-3/UG/5401/4026 12.11.2018	837675606274	CYFPP5045A	21-04-1979	dfamat03@gmail.com	8378965566	No



Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 431101

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjikheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049 / 9420812816

Name of the Subject

Jarahiyat

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approval (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Deboarded from examination Yes / No
1	YFUMC	Jarahiyat	Nadeem Akhtar Mohd Nazhar	Associate Professor	04-04-2022	BUMS 2007	-		Yes	MUHS/UG/E- 3/13410/1/17 Date 26.06.2024	425394432507	GALPS6188C	21-04-1985	dr.nadimakhtar@gmail.com	8087511287	No
2	YFUMC	Jarahiyat	Dr. Arhama Jasmeen Shaikh Akbar Shaikh	Assistant Professor	07-08-2025	BUMS 2019	MS 2024		No		747263491715	DLQPA7202G	17-01-1997	skarhamajasmee n@gmail.com	9762147478	No



Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjikheda
Tal-Kannad Dist-Aurangabad 431505

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Name of the College

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Phone/Mobile No.

02435-228034 / 228049/ 9420812816

Name of the Subject

Ain-Uzn-Anf-Halaq wa Asnan

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualificati on and Year of passing	PG- Qualificati on and Year of passing	Teaching experience After PG	MUHS Approva l (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debarred from examination Yes / No
1	YFUMC	Ain-Uzn-Anf-Halaq wa Asnan	Abdul Rehman Sabir Shaikh	Professor	06-02-2020	BUMS 2004	-		Yes	MUHS/E-3/UG PG/6401/83/2021 08/01/2021	420000681284	BSYPS0147K	20-07-1982	rafmaan12@gmail il.com	9823928317	No
2	YFUMC	Ain-Uzn-Anf-Halaq wa Asnan	Khan Nafisa Qibriya	Assistant Professor	01-06-2022	BUMS 2014	MD 2020		Yes	MUHS/UG/E- 3/134101/17 Date 26.06.2024	651097844752	DXW/PK9539Q	28-04-1989	knafisa157@gmail il.com	9823920038	No

Yunus Fazlani Unani Medical College
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad 43116

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)

Yunus Fazlani Unani Medical College & Al-Fazlani Unani Hospital Kunjkheda Tal- Kannad Dist- Aurangabad

Name of the College

02435-228034 / 228049/ 9420812816

Phone/Mobile No.

Amraze Jild wa Tazeeniyat

Sr. No.	College Name	Subject Name	Full Name of the Teacher (First name, middle name and last name)	Designation	Date of Joining	UG- Qualification on and Year of passing	PG - Qualification on and Year of passing	Teaching experience After PG	MUHS Approval (Yes/No)	If Yes, MUHS Approval letter & Date	AdharNo	PAN No.	Date of Birth (Age in Year)	Latest Email Address	Contact No.s (Mobile)	Whether Debbarred from examination Yes / No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
1	YFUMC	Amraze Jild wa Tazeeniyat	Zaheda Begum Abdul Jabbar	Associate Professor	06-02-2020	BUMS 1998	-	-	Yes	MUHS/E-3/UG PG/540183/2021 08/01/2021	713563215393	AYZPB3031H	01-05-1972	drzaheda01@gmail.com	9860218810	No

Principal

Yunus Fazlani Unani Medical College &
Al-Fazlani Unani Hospital, Kunjkheda
Tal-Kannad Dist-Aurangabad A.

