



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: Appointment Of Teacher
Assigned TO: TO000075
Current Owner: TO
Assigned Teacher Code : AYSK01244

Faculty Details

Teacher Code Reference No. :	TCRA000056788
Applicant Name :	Dr. SAVITRI B SAUNSHIMATH
Gender :	Female
Date Of Birth :	17/Apr/1996
Father's Name :	BASAYYA
Mother's Name :	GANGAMBIKE
Teacher Code :	AYSK01244



Institute Details

Joining Institution Id :	AYU0052
Joining Institution Name :	KLE University Shri.BM Kankanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum
Joining Institute State :	Karnataka

Contact Details

Teacher's Mobile Number :	7204460302
Teacher's Email Id :	savitrisaunshimath9@gmail.com
PAN Number :	NYTPS1643K

Present Address Details

Address Line 1 :	MIG 275 MYAGERI BUILDNING NAVANAGAR HUBLI
Address Line 2 :	HUBLI
State :	Karnataka
City :	Hubballi(Hubli)
Pin Code :	580025

Permanent Address Details

Address Line 1 : **MIG 275 MYAGERI BUILDNING NAVANAGAR HUBLI**
Address Line 2 : **HUBLI**
State : **Karnataka**
City : **Hubballi(Hubli)**
Pin Code : **580025**

Notice Period

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

Joining Institute Details

State of Institution Currently Joining :
District of Institution Currently Joining : **Belagavi(Belgaum)**
Name of Institution Currently Joining :

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 : **Ayurved Mahavidyalaya & Hospital**
Name of the obtained recognized Medical Qualification : **Ayurvedacharya (Bachelor of Ayurvedic Medicine & Surgery)**
Year of Passing : **2019**

PG Qualification

PG Qualification 1
PG Degree/PG Diploma : **M.S.**
State from which Addl. Degree obtained : **KARNATAKA**
Name of the University : **Rajiv Gandhi University of Health Sciences, Bangalore**
Institution Name : **SRI SRI COLLEGE OF AYURVEDIC SCIENCE AND RESEARCH**
Specialization : **Ayurveda Vachaspati - M.S(Shalakyatantra)**
Year of Passing : **2024**

Current Job Details

Current Designation : **Assistant Professor/Lecturer**
Current Department : **Shalakya Tantra**
From Date : **12/Jul/2024**
Do you want to change Department? : **No**

Registration Details

State Board Registration No : **41634**
State Board Name : **Karnataka Ayurvedic & Unani Practitioner's Board, Bangalore, Karnataka**
HPR Number : **71-5556-1401-8767**

Previous Experience Details

Date of initial appointment:

23/Feb/2024

Row No.	State of the Institution	District of the Institution	Name of the Institution	Department(Subject)	Designation	From	To
1	Karnataka	Hubballi(Hubli)	Jain Agm Ayurveda Medical College And Hospital, Varur	Shalakya Tantra	Assistant Professor/Lecturer	23/Feb/2024	11/Jul/2024
2	Karnataka	Belagavi(Belgaum)	KLE University Shri.BM Kankanawadi Ayurveda Mahavidyalaya Post Graduate Studies and Research Centre Belgaum	Shalakya Tantra	Assistant Professor/Lecturer	12/Jul/2024	Till Date

Any gap in between your Job experience?:

No**Checklist(Documents to be Verified)**

To view document for Resignation by teacher. [Click here.](#)

To view document for Acceptance Of resignation by college. [Click here.](#)

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

To view Registration Certificate (Central or 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 [Click here.](#)

To view Joining Letter [Click here.](#)

To view Experience Certificates [Click here.](#)

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