

महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

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Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Offg. Registrar

प्र. कुलसचिव

No. MUHS/UG/E4/FL/39/4405/2636/2017

Date: 12 /07/2017

Continuation / Extension of Affiliation letter for Academic Year 2017-18 (Issued under provision No. 05 & 13 of University Direction No. 02/2016)

To,

The Principal

K. S. P. M. Vasantrao Kale Homoeopathic

Medical College,

P-12, M.I.D.C., Barshi Road,

Dist. Latur - 431 531

Sub.

Continuation / Extension of Affiliation for the A.Y. 2017-18.

Sir / Madam,

- 1. With reference to the subject cited above, I am directed to communicate that as per the provision under Section 68 of Maharashtra University of Health Sciences Act, 1998, the Academic Council has taken a decision in its meeting held on 09/05/2017, vide its resolution No. 76/2017 to grant conditional Continuation/Extension of Affiliation to your college to run the **Homoeopathy** (BHMS) course for the A.Y. 2017-18, subject to following conditions:
 - (a) The intake capacity of students shall be 75
 - (b) Grant of permission from Central Govt. / Central Council of Homoepathy and / State Government, (as applicable).
 - (c) Fulfillment of following deficiencies strickly within Three months from date of this letter:
 - (i) <u>Teaching Staff (Full Time)</u>:

Sr. No	Name of the Departments	Professor			Professor Or Asso. Prof. / Reader					Asso. Prof. / Reader			Asst. Prof / Lecturer			Total		
		Re q.	Ext.	De f.	Re q.	Prof	Asso. Prof. / Reader	Total	De f.	Re q.	Ext.	D ef	Re q.	Ext	Def	Re q.	Ext.	D ef
01	Anatomy				1				1				1	1		2	1	1
02	Physio. Incl. Bio.				1	1		1					1	1		2	2	
03	Organon of Medicine	1	1							1	1		1	1+1		3	3+1	
04	Homoeopathic Pharmacy				1	1	1	1+1					1	1		2	2+1	
05	HMM	1	1							1	1		1	1+1		3	3+1	
06	Patho. & Micro.				1	1		1					1	1		2	2	
07	FMT				1		1	1					1	1		2	2	
08	Practice of Medicine	1	1	1						1	1		1	1		3	3	
09	Surgery				1	1	1	1+1					1	1		2	2+1	
10	OBGY				1		1	1					1	1		2	2	
11	Community Medicine				1		1	1					1	1		2	2	
12	Repertory	1	1							1	1		1	1		3	3	
	Total	4	4	1	8	4	5	7+2		4	4		12	12+2	7	28	27+4	1

Req.: indicates no. of required teaching staff as per Council norms.

Ext. : indicates no. of Existing approved teaching staff.

Def.: indicates no. of deficit teaching staff as per Council norms.

- (ii) Other:
 - a) Deficit teaching staff to be get appointed and approved.
- (d) The information of all the college Teachers should be updated on the University website.
- 2. You are requested to comply with the above mentioned deficiencies within the stipulated time without fail and submit compliance report.
- 3. Kindly note the above and do the needful scrupulously.

<u>Important Notes</u>: Although Continuation / Extension of Affiliation is granted to your college for the A.Y. 2017-18, you are not allowed to admit students for First year BHMS Course Batch without receipt of permission of the Central Council of Homoeopathy, New Delhi.

Thanking you,

Offg. Registrar

Copy to:

- 1. The Secretary, Central Council of Homoeopathy, New Delhi
- 2. The Additional Chief Secretary, Medical Education & Drugs Department, Mumbai
- 3. The Secretary, Pravesh Niyantran Samiti, Mumbai
- 4. The Director, Directorate of Medical Education & Research, Mumbai
- 5. The Director, Directorate of Ayush, Govt. of Maharashtra, Mumbai
- 6. The Competent Authority, CET cell, DMER, Mumbai
- 7. The Competent Authority, AMPUDC, Mumbai
- 8. The Controller of Examinations, M.U.H.S., Nashik
- 9. Eligibility Department, M.U.H.S., Nashik
- 10. Special Cell, MUHS, Nashik.