

# ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore

4th T Block, Jayanagar, Bangalore - 560 041

RGU/AYUSH/ Pre-Ex /Teach-Panel /02/2019-20

Date: 22.04.2019

#### **CIRCULAR**

To, The Principals All Ayurveda Colleges affiliated to RGUHS

Sir/Madam,

**Sub**: Updating the examination teachers panel of UG & PG Ayurveda -2019-20

With reference to the subject cited above, this is to inform you that the university is completely revamping the existing panel of examiners list, hence, you are hereby informed to submit the list of all eligible teaching faculty members (Who have minimum 3 years teaching experience at collegiate level [BAMS/MD/MS] after getting results of their BAMS/MD/MS) of your Institution as per the proforma enclosed along with relevant self attested supportive documents.

Please note the above details should reach to the University in Hard form (along with relevant documents) by speed post / registered post without fail within 10th May, 2019.

#### Note:

- 1. The Principal will be responsible for any false or incorrect information. In such instances disciplinary action will be taken as per RGUHS Norms
- 2. All relevant documents with self attested copy should be enclosed
- 3. Teachers email id is mandatory.
- 4. If the teachers' name from your institution are not sent within the last date that is 10/05/2019, thereafter none of the teachers names will be included in the panel of examiner list belonging to your institution till March-2020.

#### KINDLY TREAT THIS AS MOST URGENT

Thanking you,

By Order,

Sd/-

Registrar (Evaluation)

## Rajiv Gandhi University of Health Sciences, Karnataka

List of Eligible UG & PG Ayurveda Teachers for inclusion of their names in the Panel of Examiners for the year 2019-20

Name & Address of the College								College Code				
Course offered:					Department							
SL No	Name of Faculty with Designation,	TIN No	Date of Birth and age	Qualification with specialization	Date, Month & Year of Passing (Result)		CCIM Registration n No. & Date of Renewal	Date of Joining present institution	Teaching experience at Collegiate level after passing (results) BAMS/MD/MS		PAN No E- Mail ID & Mobile No	
					UG Avurveda	PG Ayurveda	Others (Specify)			UG Course	PG course	
					- 27 02 7 000	-1, 011 (044				Course	course	

#### Declaration by the teacher:

- 1. I declare that the information furnished above are true to the best of my knowledge and I commit myself to take up the any assignment given by university in the above Regard. If I am not able to take any assignment, I will justify/ support it with relevant document for example: Medical Certificate in case of sickness.
- 2. I also take the responsibility to inform the Registrar (Evaluation), RGUHS, Bangalore, by speed post/registered post, if I leave this institution, within two days of getting relieved from the institution along with copy of the relieving letter.
- 3. I am fully aware that failure to comply with above conditions will lead to deletion of / non inclusion of the my name in the panel.

#### **Signature of the Teacher**

### Certification by the Principal:

- 1. Certified that the information furnished above are true to the best of my knowledge and are according to the records maintained in our college.
- 2. Certified that that only the faculty members (Old & new entrants) who have 3 years and more teaching experience at collegiate level after results of BAMS/MD/MS are included.
- 3. Certified that that the self attested copies of Degree (UG & PG), CCIM registration, all experience certificates, form no.16 & copy of PAN card and appointment order, joining report, relieving letter from previous institution (if applicable) of all the above teaching faculty are attached herewith.
- 4. I also take the responsibility to inform the Registrar (Evaluation), RGUHS, Bangalore, by speed post/registered post, if the above teacher leave this institution, within two days of his/her getting relieved from the institution along with copy of the relieving letter.
- 5. I hereby declare that I am fully aware that if I don't send the teachers name from my institution within the last date that is 10/05/2019, thereafter none of the teachers name will be included in the panel of examiner list belonging to this institution till March 2020.

Signature & Seal of the Principal