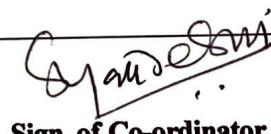


Information of Co-ordinator of Training Centre
It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Co-ordinator	: Dr. Raviraj Pardeshi
02.	Date of Birth	: 01-Jun-1975
03.	Address	: Shrikrishna Hrudayalaya and Critical Care Centre, Tikekar Road, Congress Nagar Square, Dhantoli, Nagpur. PIN code: 440012
04.	Mob. No.	: Phone No. (O) : 0712 2444434, Mobile No- 09890331553
05.	E-mail id	: raviraj.pardeshi@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: BAMS,MD-Ayurveda Physiology, PGD-Medical Law and Ethics PGD-Healthcare and Quality Management
08.	Present Appointment	: Consultant in Clinical Trials and Healthcare & Quality Management
09.	Any other relevant information	----


Sign. of Co-ordinator**Date:** 03/12/22


Sign & Stamp
Head of the Department
Date: 03/12/22

DR. MAHESH C. FULWANI
MD.(MED), DM.(CARD)
DNB.(CARD), FCCP.(PED.CARD)
DHANTOLI, NAGPUR-12.
REG. No.: 67796

Training Centre Round Seal

Sign & Stamp
Dean/ Principal/ Director of Training Centre
Date: 03/12/22

Dr. Deepak San
MD (Med) DNB (Cardio)
Reg. No. 67857