

ANNEXURE – “F”

Information of Mentor 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 Faculty/Teacher	:	Dr. Hemant Bhandari
02.	Date of Birth	:	13/12/1962
03.	Address	:	501/502, Vindhiachal, A Wing, Mount Mary Rd, Bandra, Mumbai - 400050
04.	Tel. No./ Mob. No.	:	9821550550
05.	e-mail id	:	hemantbhandari@hotmail.com
06.	Nationality	:	Indian
07.	Qualification in details (attach documentary proof)	:	MBBS, MS (Ortho)
08.	Teaching experience/ Profession experience (attached document proof with signature of Head)	:	29 years
09.	Present Appointment	:	Asstt. Professor
10.	Publications (List & Proof)	:	
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	29 years
12.	Any other relevant information	:	

Date: 15-06-2022

Hemant Bhandari
Name and Sign. of Mentor

For the use of affiliating Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.

Parag Munshi

Sign & Stamp
Head of the Department
Date 29.06.2022

DR. PARAG MUNSHI
MS.Orth(Bom), D.Orth(Bom), DNB Orth, Mch Orth (UK)
FRCS Gen. Surg. (UK), FRCS Orth (UK), CCST (UK)
Consultant Orthopaedic &
Joint Replacement Surgeon
Reg.No. 63862.

S. V. Khadilkar

Sign & Stamp
Dean/Principal/Director of Training Centre
Date: 29.06.2022

Dr. S. V. Khadilkar
MD DM DNRE FIAN FICP
FAMS FRCP (London)
Dean
Bombay Hospital
Institute of Medical Sciences
12, New Marine Lines,
Mumbai - 400 020



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Information of Mentor 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 Faculty/Teacher	:	Dr. Hetal Chiniwala
02.	Date of Birth	:	30/09/1972
03.	Address	:	301, Rajlaxmi, Ramchandra Lane, Malad (W) Mumbai
04.	Tel. No./ Mob. No.	:	9819894840
05.	e-mail id	:	hchiniwala@yahoo.com
06.	Nationality	:	Indian
07.	Qualification in details (attach documentary proof)	:	MS, DNB, D. Ortho
08.	Teaching experience/ Profession experience (attached document proof with signature of Head)	:	22 years.
09.	Present Appointment	:	Associate Professor, Bombay Hospital
10.	Publications (List & Proof)	:	
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	20 years
12.	Any other relevant information	:	

Date: 15.06.2022


Name and Sign. of Mentor

For the use of affiliating Training Center:

I have verified the eligibility of the above Mentor as per the criteria of eligibility prescribed by the University vide clause no.7 of the University Direction No. 05/2017 (Amended) and University Circular No. MUHS/UDC/FCCC/736/2019 dated 30/09/2019.


Sign & Stamp
Head of the Department
Centre

Date 29.06.2022
DR. PARAG MUNSHI
MS.Orth(Bom), D.Orth(Bom), DNB Orth, Mch Orth (UK)
FRCS Gen. Surg. (UK), FRCS Orth (UK), CCST (UK)
Consultant Orthopaedic &
Joint Replacement Surgeon
Reg.No. 63962.


Sign & Stamp
Dean/Principal/Director of Training

Date: 29.06.2022

Training Centre Round Seal

Dr. S. V. ...
Dean
Bombay Hospital
Institute of Medical Sciences
12, New Marine Lines,
Mumbai - 400 020