

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	S	U	M	E	E	T		T	R	I	P	A	T	H	I
Designation	P	R	O	F	E	S	S	O	R	&	H	E	A	D	
Deptt Name	P	H	Y	S	I	O	L	O	G	Y					
Education (UG/MD/MS)	MBBS , MD (PHYSIOLOGY)														
CGMC Reg. No	CGMC - 461/2005														



If Contractual Define Period
HOD Sign.

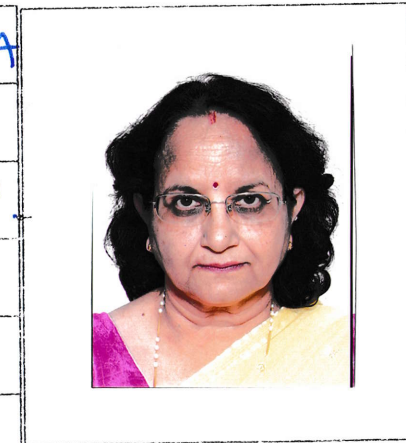
Not Applicable

Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	D	R		K	A	V	I	T	A		S		E	U	P	T	A
Designation	A	S	S	O	C	I	A	T	E		P	R	O	F	F		
Deptt Name	P	H	Y	S	I	O	L	O	G	Y							
Education (UG/MD/MS)	M.D																
CGMC Reg. No	C.E.M.C./671/2007																



If Contractual Define Period
HOD Sign.

since 2009.

Emp Signature

Kavita Shrivastava

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	D	R.		N	A	M	I	T	A						
				S	H	R	I	V	A	S	T	A	V	A	
Designation	A S S O C I A T E P R O F.														
Deptt Name	P H Y S I O L O G Y														
Education (UG/MD/MS)	MBBS, MD														
CGMC Reg. No	CGMC/776/2007														



If Contractual Define Period
HOD Sign. *[Signature]*
Department of Physiology
Medical College, Raipur (C.G.)

Namit Ghivastava
Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	D	R.		D	I	P	T	I		B	H	A	T	T	
Designation	A S S O C I A T E P R O F.														
Deptt Name	P H Y S I O L O G Y														
Education (UG/MD/MS)	MD														
CGMC Reg. No	365/05														



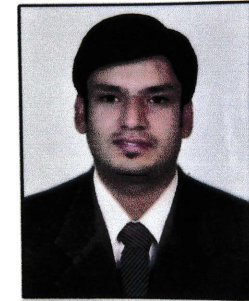
If Contractual Define Period
HOD Sign. *[Signature]*
Department of Physiology
Medical College, Raipur (C.G.)

Bharti
Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	D	R.	A	N	K	I	T	S	H	A	R	M	A
Designation	A	S	S	I	S	T	A	N	T	P	R	O	F.
Deptt Name	P	H	Y	S	I	O	L	O	G	Y			
Education (UG/MD/MS)	MBBS, MD												
CGMC Reg. No	6817/2016												



If Contractual Define Period-----

HOD Sign.

[Signature]
 Head of the Department
 Department of Physiology
 Government Medical College, Raipur (C.G.)

[Signature]
 Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	D	R.	N	I	L	A	B	H										
	G	H	R	I	T	L	A	H	R	E								
Designation	A	S	S	I	S	T	A	N	T	P	R	O	F	E	S	S	O	R
Deptt Name	P	H	Y	S	I	O	L	O	G	Y								
Education (UG/MD/MS)	M.D. PHYSIOLOGY																	
CGMC Reg. No	C.G.M.C. - 5176/2014																	



If Contractual Define Period-----

HOD Sign.

[Signature]
 Head of the Department
 Department of Physiology
 Government Medical College, Raipur (C.G.)

[Signature]
 Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letters)

Name	D	I	R	H	U	T	A	N	D	H	A	B	R	E
Designation	D	E	M	O	N	S	T	R	A	T	O	R		
Deptt Name	P	H	Y	S	I	O	L	O	G	Y				
Education (UG/MD/MS)	M.B.B.S.													
CGMC Reg. No	C.G.M.C. - 2740/2009													



If Contractual Define Period
HOD Sign.

*Head of the Department
Department of Physiology
J.N.M. Medical College, Raipur (C.G.)*

@vibe
Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letters)

Name	K	A	V	I	T	A	D	A	L	P	A	T	I	
Designation	D	E	M	O	N	S	T	R	A	T	O	R		
Deptt Name	P	H	Y	S	I	O	L	O	G	Y				
Education (UG/MD/MS)	M.D.													
CGMC Reg. No	1882/2008													



If Contractual Define Period
HOD Sign.

*Head of the Department
Department of Physiology
J.N.M. Medical College, Raipur (C.G.)*

Dalpat
Emp Signature

Details of Faculty for NMC

(Please fill in CAPITAL Letteres)

Name	L	E	E	N	A	K	D	S	U	R	U			
Designation	D	E	M	O	N	S	T	R	A	T	O	R		
Deptt Name	P	H	Y	S	I	O	L	O	G	Y				
Education (UG/MD/MS)	M.D.													
CGMC Reg. No	2302/2009													



If Contractual Define Period
 HOD Sign. *[Signature]*
 Head of the Department
 Department of Physiology
 Medical College, Raipur (C.G.)

[Signature]
 Emp Signature