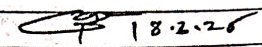
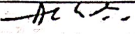
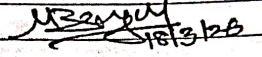


Part-I

Maharashtra University of Health Sciences, Nashik
Inspection Committee Report for Academic Year 2026 - 2027
Faculty of Medicine
(For Grant of Continuation / Extension of Affiliation for affiliated
UG/PG/Fellowship/Certificate Course/Ph.D. Colleges/Institutes & Hospitals)

Date of Establishment of College : 02/09/2022

Date of Inspection :

Name & Designation of Inspectors :		Signature
1) Dr. Ghuge Ganesh Daxopad	Chairman	
2) Dr. Ashok A. Chougale	Member	
3) Dr. D. A. Bapat	Member	
4)	Member	

1	Name of the College / Institute	: GOVERNMENT MEDICAL COLLEGE, RATNAGIRI
a	Name of Society / Trust	: GOVERNMENT
b	Address	: Hodekar Road, Patwardhanwadi, Udyam Nagar, Ratnagiri 415 612
c	Email Address	: dean@ratnagiri@gmail.com
d	Fax No.(s)	: -
e	Telephone No.(s)	: 02352 244355
f	Website	: https://gmcratnagiri.in/
g	College Code	: 101205
h	Status	: Government / Corporation / Private
i	Letter of permission by Medical Council of India (UG)	: Letter No. UGMEB/2023-24/655 Dated 16/07/2025 Intake:100
j	Stage of Renewal	: -
k	Details of the Dean/Principal	: -
2	Name of the Dean/ Principal	: Dr. Jaiprakash B. Ramanand
a	Nature of Appointment	: Permanent / Temporary / Officiating
b	Mobile No.	: 9822256722
c	Office Landline	: 02352 244355
d	E-mail Address	: dean@ratnagiri@gmail.com

1. Details of the College are available on the College Website, in the prescribed format (Part II)?

Yes/No

2. Whether the information is complete in all respect.

Yes/No

3. If incomplete information, please write the points from prescribed format (part II) regarding unavailable/insufficient information, (LIC to physically verify) the infrastructure/available facilities regarding those points and write the observation below-

Sr. No.	Points Number in prescribed format	Particulars of the point	Observations of the LIC

Dean

Government Medical College, Ratnag

4. LIC to randomly choose the 10 points of concern, which will help improve the quality of medical education and students life on the campus.

Sr. No.	Points Number in prescribed format	Particulars of the point	Observations of the LIC
1)		Anti ragging notice to B.M. not seen	Not available
2)		Vishalakar committee not seen	Not seen
3)		Hostel cleanliness is poor	Not available
4)		Hostel security not available	Not available
5)			

5. LIC to visit all departments and physically verify the availability of teaching staff and residents in the department (Please attach the Biometric attendance of all departments over previous 06 months.) Annexure- "II".

6. Curricular Activities in the College-

a. Whether Master Time Table is available.

Yes/No

b. Whether the lectures, Practicals, Clinical Sessions etc. are conducted as per the master time table?

(LIC to randomly choose at least 10 dates over past 03 months' lectures, Practicals, clinical sessions, PG activities, (if PG course available) etc. from master time table and physically verify the conduction of these sessions) and attached copies to the report.

LIC to randomly choose at least 10 dates over past 03 months of all departments from Clinical side all departments Pre/Para Clinical Departments. LIC to verify past record of teaching activities (UG & PG) of these departments. (Please mention the findings in below) and attached copies to the report.

7. Ongoing Research Activities in the college including PG thesis (LIC to submit all records and the relevant details of all ongoing research activities such as Ethics Committee Approval, status of data collection, data analysis etc.

8. MUHS Faculty Evaluation Status:

Faculty Evaluation carried out at College level	Total No. of Teachers	Total evaluation carried out	Remaining pending with reasons

9. Status of NAAC Accreditation: Accredited

If Yes, Grade & Date of last Inspection:

If No, what is current status/ progress of work

Yes / No / Not Applicable

10. Status of Online Boarding: None

11. Services for person with Disability: Available Yes

12. Availability of Freeship/ Scholarship for category Students: Available Yes

13. Students Feedback

Sr. No.	Particulars to be verified	Details on College Website Yes/No	Adequate/ Inadequate
1	Hostel facility: Boys (UG)		Adequate
2	Boys (PG)		
3	Girls (UG)	Yes/No	
4	Girls (PG)	Yes/No	Adequate
5	Interns	Yes/No	
6	Residents	Yes/No	Adequate
7	Canteen Facility [Note: Verify Canteen Facility is monitored as per MUHS Circular No.18/2019 dated 19/03/2019].	Yes/No	Adequate
8	Warden/ Rector	Yes/No	Adequate
9	Hygiene	Yes/No	Adequate
10	Vending Machine	Yes/No	Adequate
11	Toilets / Washroom Facilities (Cleanness & Hygiene maintain)	Yes/No	Adequate
12	Housekeeping at Hostel	Yes/No	Adequate
13	Drinking Water Facilities	Yes/No	Adequate
14	Security Services	Yes/No	Adequate

14. Fees Details:

Sr. No.	Continuation / Extension of Affiliation Fees Details:				
	Course (s)	Paid / Not paid	Amount	Outstanding (if any)	Reasons of Non-payment
	NOT APPLICABLE				

[Handwritten signatures]

15. Any Other Fees Details:

Sr. No.	Type of Fee	Paid / Not paid	Amount	Outstanding (if any)	Reasons of Non-payment
				NIL	

16. Date of college data uploaded on web portal (<http://aishe.gov.in>) regarding "All India Survey on Higher Education (AISHE)".
 Yes/No

Date of Uploading : 09/10/2025

17. Summary and other observation of LIC: (If required separate sheet to be attached).

- 1) College premises and hospital building are separate and within three kilometers
- 2) C.P.D and I.P.D is adequate
- 3) Laboratory investigations and services are adequate
- 4) Library books are 2500 and hard copy of any journals not available
- 5) Examination hall and unit not available
- 6) Infrastructure is adequate
- 7) overall faculty deficiency 75.60%
- 8) Nsh teaching & paramedical staff adequate
- 9) MVHS manual is not updated & uploaded on site
- 10) U.T.D record not available

15.3.20

Act.

[Signature]

[Signature]

Dean

Government Medical College, Ratnag

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
Information to be provided by the College for verification of Local Inquiry Committee.

LIST OF ANNEXURE FOR LIC

No. of Annexures	Particulars	Verified by Committee	Remark
ANNEXURE-I- A& I-B	Approved Teaching Staff & Total Teaching Staff (Approved + Not approved) Information as per MSR 1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.	Yes/No	-
ANNEXURE-II	LIC to visit all departments and physically verify the availability of teaching staff and residents in the department (Please attach the attendance sheet duly signed by teachers and residents) 1. Hard copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website	Yes/No	-
ANNEXURE-III	Intake Capacity/ Seat Matrix 1. Hard copy, & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.	Yes/No	-
ANNEXURE-IV	Total Subject-wise Teacher Staff List (Approved + Not approved) 1. Hard copy & soft copy of this Annexure must be submitted to the University. 2. The information must be made available on the College website.	Yes/No	-
ANNEXURE-V	Total Ancillary Staff Information The information must be made available on the College website.	Yes/No	-
ANNEXURE-VI	Total Non-Teaching Staff Information The information must be made available on the College website.	Yes/No	-
ANNEXURE-VII	Examination Related Information Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College website.	Yes/No	-
ANNEXURE-VIII	Form for Fellowship/Certificate Course(s) Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College/Training Centre website.	Yes/No	-
ANNEXURE-IX	Form for Ph.D Courses Hard copy & soft copy of this Annexure must be submitted to the University). The information must be made available on the College/Training Centre website.	Yes/No	-
ANNEXURE-X	Declaration by the Dean / Principal of the College / Institute Original copy of this Annexure must be submitted to the University.	Yes/No	-

IMPORTANT INSTRUCTIONS & DECLARATIONS:

1. Our College is fully aware that our college is responsible to fulfil and maintain norms including the infrastructure both physical and human resources, teaching faculty and clinical material throughout Academic Year as per MSR/Council norms/University norms. In case false/wrong declaration or fabricated documents is submitted for purpose of Affiliation of the University by the College and if it is found by the University at any stage, then our college is fully aware that affiliation will be withdrawn by the University with immediate effect with penal action.
2. It is certified that our college has uploaded all above Annexures on our college website and it will be kept ready for verification of Local Inquiry Committee (LIC). Our college is fully aware that University will not grant Continuation of Affiliation, in case if required information, is not uploaded on college website.
3. Our College hereby undertake that all Annexures information will be made available on college website for a period of next 05 years. Year-wise information of all Annexures will be made available on college website for a period of 05 years from time to time. In case if any information (Annexurewise) is called-for by the University in intermittent period, our college will furnish required information to the University immediately.

Date :

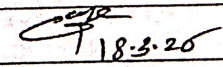
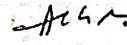
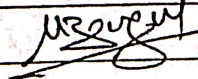
Signature of Dean/Principal

Place :

Name of the Signatory- (with Seal of the College / Institute)

DECLARATION BY LIC

We hereby certify that, the College has uploaded Annexures as prescribed by University on College Website and it is duly verified by our Committee. Details of Information of Annexure/s which is not uploaded on College Website is mentioned in LIC Report.

Name of Inspectors		Signature of Inspectors
1)	Dr. Ghuge Ganesh Dadasaheb	Chairman  18.3.20
2)	Dr. Ashok A. Chougale	Member 
3)	Dr. D. G. Bapat	Member 
4)		Member

Date:

Short Report

To,
The Registrar
M.U.H.S., Nashik

Sub: - Short Report of Local Inquiry Committee for Continuation of Affiliation for the Academic Year 2026-27.

Sir,

With reference to above mentioned subject and letter we are visiting **GOVERNMENT MEDICAL COLLEGE, RATNAGIRI** College on dated and sending a **Short Report** regarding present Teaching Staff and IPD in your prescribed format as follows at 11.00 a.m.

1. Number of Teaching Staff present: 20
2. Number of IPD patients on Bed: 430.

(Photocopy of Attendance of Teacher and IPD at the time 11:00 a.m.)

1)
(Name & Sign of LIC Member)

2)
(Name & Sign of LIC Member)

3)
(Name & Sign of LIC Member)

4)
(Name & Sign of LIC Chairman)

Maharashtra University of Health Sciences, Nashik

Name of College/Institute:- GOVERNMENT MEDICAL COLLEGE, RATNAGIRI

Intake Capacity: 100 Recognized/Permitted:- Permitted. If permitted, Stage of renewal: 4th**APPROVED TEACHING STAFF AVAILABLE**

Departments	Requirement (A)			Available (b)			Deficiency (A-b)= (C)			Remark
	Prof	Asso. Prof	Asst. Prof.	Prof	Asso. Prof	Asst. Prof.	Prof	Asso. Prof	Asst. Prof.	
Anatomy	1	1	2	0	1	1	1	0	1	Total Req = 80 Availab = 20 Def. = 60
Physiology	1	1	2	0	0	2	1	1	0	
Biochemistry	1	1	2	0	1	0	1	0	2	
Pharmacology	1	1	2	1	1	0	0	0	2	Percentage of Def. 75.60%
Pathology	1	2	3	0	0	0	1	2	3	
Microbiology	1	1	2	0	1	0	1	0	2	
Forensic Medicine	1	1	1	0	0	1	1	1	0	
Community Medicine	1	2	4	0	0	1	1	2	3	
Gen. Medicine	1	2	3	0	0	0	1	2	3	
Pediatrics	1	1	2	0	0	0	1	1	2	
Skin & VD	0	1	1	0	0	0	0	1	1	
Psychiatry	1	1	1	0	0	0	1	1	1	
Gen. Surgery	1	3	3	0	1	3	1	2	0	
Orthopedics	1	1	2	0	0	1	1	1	1	
Otorhinolaryngology	1	1	1	0	1	1	1	0	0	
Ophthalmology	1	1	1	0	0	0	1	1	1	
Obst. & Gynae.	1	1	2	0	0	1	1	1	0	
Anaesthesia	1	2	3	0	0	0	1	2	3	
Radio-diagnosis	1	1	1	0	0	0	1	1	1	
Dentistry	0	1	1	0	0	1	0	1	0	
Total	18	26	39	0	6	12	17	19	26	

- Requirement is to be calculated as per MCI/NMC norms as the case may be, and considering the stage of renewal.
- Staff requirement should also include requirement for any running PG course in the institute.
- Extra teacher on higher post can compensate deficiency of teacher on lower post in same department.
- Deficiency of SR cannot be compensated by extra teacher.

Deficiency in faculty % = (Total deficiency of approved faculty) * 100 / (Total Required faculty)

Available approved faculty % = 100 - Deficiency % = 75.60%

(Faculty includes Professors, Associate Professors and Assistant Professors)

Data Verified by the Committee members

Member

Member

Member

Chairman

ANNEXURE- I-B

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

Name of College/Institute:- GOVERNMENT MEDICAL COLLEGE, RATNAGIRI

Intake Capacity: 100

Recognized/Permitted:- Permitted If permitted, Stage of renewal: 4th

TOTAL (APPROVED + NOT APPROVED) TEACHING STAFF AVAILABLE:

Departments	Requirement (A)			Available (b)			Deficiency (A-b)= (C)			Remark
	Prof	Asso. Prof	Asst. Prof.	Prof	Asso. Prof	Asst. Prof.	Prof	Asso. Prof	Asst. Prof.	
Anatomy	1	1	2	0	1	1	1	0	1	
Physiology	1	1	2	0	1	2	1	0	0	
Biochemistry	1	1	2	0	1	0	1	0	2	
Pharmacology	1	1	2	1	1	0	0	0	2	
Pathology	1	2	3	0	1	0	1	1	3	HS per 5-11 Appointed by Govt.
Microbiology	1	1	2	0	1	0	1	0	2	
Forensic Medicine	1	1	1	0	0	1	1	1	0	
Community Medicine	1	2	4	0	0	1	1	2	3	
Gen. Medicine	1	2	3	0	0	0	1	2	3	
Pediatrics	1	2	2	0	0	1	1	2	1	
Skin & VD	0	0	1	0	0	0	0	0	1	
Psychiatry	1	0	1	0	0	0	1	2	0	
Gen. Surgery	1	3	3	1	1	3	1	2	0	
Orthopedics	1	1	2	0	0	1	1	1	2	
Otorhinolaryngology	1	1	1	0	1	1	1	0	0	
Ophthalmology	1	1	1	0	0	0	1	1	1	
Obst. & Gynae.	1	1	2	0	0	1	1	1	1	
Anaesthesia	1	2	3	0	0	0	1	2	3	
Radio-diagnosis	1	1	1	0	0	0	1	1	1	
Dentistry	0	1	1	0	0	1	0	1	0	
Total										

- Requirement is to be calculated as per MCI/NMC norms as the case may be, and considering the stage of renewal.
- Staff requirement should also include requirement for any running PGcourse in the institute.
- Extra teacher on higher post can compensate deficiency of teacher on lower post in same department.
- Deficiency of SR cannot be compensated by extra teacher.

Deficiency in faculty % = (Total deficiency of approved faculty) * 100 / (Total Required faculty)
 Available approved faculty % = 100 - Deficiency % =
 (Faculty includes Professors, Associate Professors and Assistant Professors)

Data Verified by the Committee members:

Member

Member

Member

Chairman

Name of College/Institute:- GOVERNMENT MEDICAL COLLEGE, RATNAGIRI

Name of the Department:

Sr. No.	Name of the Teacher	Designation	MUHS Approved Designation	Signature
DEPARTMENTWISE ANNEXURE-II is ATTACHED				

Summary -

Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor			
3	Assistant Professor			
4	Senior Resident			
5	Junior Resident			

Approved + Non Approved Staff

Sr. No.	Designation	Required	Available	Deficiency
1	Professor			
2	Associate Professor			
3	Assistant Professor			
4	Senior Resident			
5	Junior Resident			

*Attached separate
Dept. wise*

Data Verified by the Committee members

Member

Member

Member

Chairman

Dean
Government Medical College, Ratnagiri.

Intake capacity/ Seat Matrix

Name of College/Institute:- GOVERNMENT MEDICAL COLLEGE, RATNAGIRI

UG Degree/PG Degree/ Diploma Courses/Super Specialty	Intake as per Council		Status of Council				Max. Seats Permitted by MUHS as per Teacher: Student Ratio	
			Degree		Diploma			
	Degree	Diploma	Recognized	Permitted	Recognized	Permitted	Degree	Diploma
UG Degree								
MBBS	100	Not Applicable	0	100	Not Applicable		Not Applicable	
PG Degree / Diploma & SuperSpecialty								
NOT APPLICABLE								

Any Other, Please Specify: C.C.M.P. 50 SEATS AND FELLOWSHIP COURSE IN CRITICAL CARE MEDICINE 4 SEATS

Attached separately,

Data Verified by the Committee members:

Member

Member

Member

Chairman

Dean

Government Medical College, Ratnagiri

ANNEXURE-IV

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, MASHIK
 DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Not Approved)

Name of the Dept. : UG Degree/ PG Degree/ Super Speciality AS ON: / /

Name of the College : GOVERNMENT MEDICAL COLLEGE, RATNAGIRI College Code : 101205 Intake Capacity: 100
 Subject: Whether UG.../UG+PG.../UG+PG+SuperSpeciality.....

Sr. No.	Subject	Name of Teacher	Designation	Mob. No.	E-mail ID	DOB	Whether belongs to Reserved category (if Yes, specify category)	Date of appointment at College	Teaching Experience			Total Teaching Experience in years of PG	Type of Appointment Temp./ Regular/ Contractual	University Approval Status (Yes/No)	Temporary Approval	Details of PG Recognition	MET Workshop attended in last 5 years	Photo graph with Signature
									UG(Yrs.)	Asst. Prof.	Prof.							
DEPARTMENTWISE ANNEXURE-IV IS ATTACHED																		

Note: The College shall submit one hard copy & a soft copy (in Excel Format) of the list in Pen Drive to the LIC Committee.

Attached security

Data Verified by the Committee members:

[Signature] Member

[Signature] Member

[Signature] Chairman

[Signature]

Dean
 Government Medical College, Ratnagiri,

ANNEXURE-V

Name of the College / Institute: Ancillary staff
G.M.C. Ratnagiri

Unit	Post	Requrod	EXT.	DEF.
Central Record Section	Medical Record Officer Statistician Coding Clerks Recording Clerks Drafteries Peon Steno-Typist			
Central Animal House	Veterinary Officer Animal Attendant Technicians for Animal Operation Room Sweepers	1 2 1 2	0 0 0 2	1 2 1 0
Central Library	Librarian with Degree in Lib. Sci. Deputy Librarian Documentalist Cataloguer Library Assistant Dafteries Peons	1 2 1 1 4 2 2	1 2 0 0 0 2 2	0 0 1 1 4 2 0
Central Photographic cum Audio Visual Unit	Photographer Artist Modelleur Dark Room assistant Audio Visual Technician Storekeeper cum Clerk Attendant	1 1 1 1 1 1	1 0 0 0 0 0	0 1 1 1 1 1
Medical Education Unit	Officer Incharge (Principal/Dean) Co-Ordinator (Head of Deptt. nominated by Principal / Dean) Faculty college faculty on part time basis. Supporting Staff: Stenographer Computer Operator Tech. in Audio Visual Photograph & Artist			
Central Sterilization Services Dept.	Matron Staff Nurse Technical Asst. Technician Ward Boy Sweeper			
Laundry	Supervisor Dhobi/Washerman/woman Packer			
Blood Bank	Professor/Reader Lecturer Technician Lab Attendants Storekeepers Record Clerk	1 1 6 6 6 2	0 0 9 0 0 1	1 1 0 6 6 1
Central Casualty Service	Casualty Medical Officers Operation Theatre staff Stretcher bearers Recept. cum Clerk Ward Boys Nursing and Para Medical staff Clinical staff for casualty beds			
Central Workshop	Superintendent who shall be qualified Engineer Senior Technician Junior Technicians Carpenter Black Smith Attendants			

MSR

Dean
Government Medical College, Ratnagiri

ANNEXURE-VII-A

EXAMINATION RELATED INFORMATION FOR A.Y. 2026-2027**For Online Transmission of Question Papers:**

Sr. No.	Infrastructure facilities at College	Yes /No
Strong Room :		
1	It must have Single Door Entry/Exit (with Safety Door/Grill for windows)	Yes
2	Minimum Area shall be 20 x 20 sq. ft.	Yes
3	Adequate Steel Almirah/Cupboard for storage of Answer Books.	Yes
4	C.C.T.V. Camera with recording facility that covers entire area or Downloading and Printing of online transmission of Question Paper process.	Yes
5	Latest version Computer (Minimum 4) and Printer (Minimum 4) with Inverter facility, MS Office, PDF Reader, Winrar or Winzip.	Yes
6	Dual Internet service, Primary with 1:1 dedicated line of 100 mbps speed by class 'A' ISP, and alternate line with 1 : 1 dedicated line of 50 mbps speed, by an another Class 'A' ISP to ensure uninterrupted downloading facility, with 2(two) static IP's, Internet Dongle.	Yes
7	Adequate Number of Paper Rims for printing Question Papers.	Yes
8	One Photocopy Machine, UPS Backup.	Yes
Scanning Room :		
9	Separate Scanning Room for scanning Answer Books after end of Examination Session under CCTV Surveillance. (Laptops and Scanners will be provided by the University Appointed Agency)	Yes
10	Dual Internet service, Primary with 1:1 dedicated line of 100 mbps speed by class 'A' ISP, and alternate line with 1 : 1 dedicated line of 50 mbps speed, by an another Class 'A' ISP to ensure uninterrupted downloading facility, with 2(two) static IP's, Internet Dongle.	Yes

To Set Up DEC for Onscreen Evaluation of Answer Books :

Sr. No.	Infrastructure facilities at College	Yes /No
1	Computers (20) with latest licensed Operating System Software (OSS) with antivirus and firewalls to provide all lock, work station with Computer charts and key board tray.	Yes
2	Wiring and Networking (with Raw Power Supply and UPS) and one Printer per DEC	Yes
3	Air conditioners, Bio metric system, CCTV installation, Rest rooms and 24 x 7 security.	Yes
4	Collapsible gate for the main entrance with Name board and locking facility.	Yes
5	Dual Internet service, Primary with 1:1 dedicated line of 100 mbps speed by class 'A' ISP, and alternate line with 1 : 1 dedicated line of 50 mbps speed, by an another Class 'A' ISP to ensure uninterrupted downloading facility, with 2(two) static IP's.	Yes
6	Appointment of one Professor as a Examination Co-ordinator to Co-ordinate this Online process.	Yes
7	Separate Evaluation Room for Evaluating the Answer Books under CCTV Surveillance	Yes

Data Verified by the Committee members:

Member

Member

Member

Chairman

Dean
Government Medical College, Ratnagiri

Departments	Technical Assistant/ Technician			Storekeeper/Record Keeper cum Clerk cum Computer Operator			Laboratory Attendant			Steno Typist cum Computer Operator			Sweeper			Others		
	MCI	Ext	Def	MCI	Ext	Def	MCI	Ext	Def	MCI	Ext	Def	MCI	Ext	Def	MCI	Ext	Def
ENT	1	0	1	1	0	1	1	0	1	1	0	1	0	1	0	1	0	1
Ophthalmology - Obst. & Gynaec.																		
Radiology Radio-Therapy - (optional)																		
Anesthesia Physical Medicine & Rehabilitation																		
Dentistry TOTAL																		

Data Verified by the Committee members:

[Signature]
Member

[Signature]
Member

[Signature]
Chairman

[Signature]

Dean
Government Medical College, Ratnagiri.

ANNEXURE-VII

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
 SUBJECTWISE ELIGIBLE EXAMINERS LIST (UG Courses)
 GOVERNMENT MEDICAL COLLEGE, RATNAGIRI

Name of the College:
 Phone/Mobile No :
 Name of the Subject :

Sr. No.	College Name	Subject	Full name of the Teacher (First/Middle/Last)	Designation	Date of Joining	UG Qualification & year of Passing	PG Qualification & Year of Passing	Teaching Experience after PG passing	MUHS Approval (Yes/No)	If Yes MUHS Approval Letter & Date	Adhar No.	Pan No.	Date of Birth (Age in years)	Latest Email Address	Contact No. (Mob.)	Debarred Yes/No
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

DEPARTMENTWISE ANNEXURE-VII-B IS ATTACHED

Data Verified by the Committee members:

Member



Member



Chairman



Dean

Government Medical College, Ratnagiri:

ANNEXURE-VII-C

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
SUBJECTWISE ELIGIBLE EXAMINERS LIST (PG Courses)

Name of the College : GOVERNMENT MEDICAL COLLEGE, RATNAGIRI

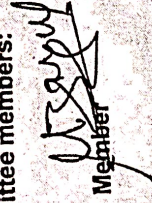
Phone/Mobile No. :

Name of the Subject :

Sr. No.	Name of Teacher (Last Name First Name Middle Name)	Designation	Subject/Speciality	Type of Appointment (Regular/Temp./Honorary)	Qualification	University Approx at (UG)	PG Teaching Experience (in Years) after PGM	PG Teacher Recognition Yes/No	Recognition Letter Date issued by University	No. of PG Students Guided last 5 year	Date of Birth	E-mail ID	Mobile No.	Aadhar Card No	If Debarred (Yes/No)	Sign. of Teacher
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17

DEPARTMENTWISE ANNEXURE-VII-C is ATTACHED

Data Verified by the Committee members:


Member


Member


Chairman

Member



Dean

Government Medical College, Ratnagiri.

Information to be submitted with respect to newly appointed mentors**Professional Teaching Experience Certificate for Fellowship/Certificate Courses
Director/Mentor**

Title of the Course applied for:-

This to Certify that Dr..... has
worked in the Department of Training Centre as per
following details**A) General Experience**

Designation	From	To	Total period Year/Months	

**B) Actual experience in the subject of concerned Fellowship/Certificate Course
applied for :-**

Designation	From	To	Total period Year/Months	

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the
Subject of concerned Fellowship/Certificate Course)Sign & Stamp
Head of the Department
Date : / /Sign & Stamp
Dean/Principal/Head of Institute
Date: / /

Name of Inspectors		Signature of Inspectors
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

ANNEXURE- VIII

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 2026-2027.

(As per provisions of the Maharashtra University of Health Sciences Act, 1998 and University Rule / Guidelines)

Date of Inspection : 18/03/2026

1. Name(s) of the Fellowship/Certificate Course(s)

Sr. No.	Name of the Fellowship/Certificate Course	Course Started from the Academic Year	Intake Capacity Sanctioned by the University	Name of Mentor and Contact Details
01	Fellowship Course in Critical Care Medicine	2025-26	04	Dr. Sadiq Sayyad 9421123505
02				
03				
04				
05				
06				
07				

(Attach separate List if necessary)

2. Year-wise number of students admitted to Fellowship/ Certificate course during last 5 years

Sr. No.	Academic Year	Name of Fellowship / Certificate Course	Intake Capacity	No. of Students Admitted (In figure only)
1	A.Y. 2025 – 2026	Fellowship Course in Critical Care Medicine	4	0
2	A.Y. 20..... – 20....	NA	NA	NA
3	A.Y. 20..... – 20....	NA	NA	NA
4	A.Y. 20..... – 20....	NA	NA	NA
5	A.Y. 20..... – 20....	NA	NA	NA

Ach

M. Sayyad

C. S.

D.

Dean

Government Medical College, Ratnagiri.

HW-035-2010

- i) Date of Composition:
 - ii) Total Number of Members:
 - iii) Number of meetings held in previous year:
 - iv) Whether Records of proceedings are maintained properly? **Yes / No**
 - v) Is Human and Animal Ethics Committee, registered under the appropriate authority? **Yes / No**
- 8. Details of Research Advisory Committee: (Attach Annexure "C")**
- i) Date of Composition:
 - ii) Total number of Members:
 - iii) Number of meetings held in previous year:
 - iv) Whether records of proceedings are maintained properly? **Yes / No**
- 9. Is Doctoral Committee constituted in the lines of RAC?** **Yes / No**
- i) If Yes, Date of Composition:
 - ii) Total number of Members:
 - iii) Name of External Subject Expert:
- 10. Is Plagiarism detection software facility available?** **Yes / No**
If Yes, Name of the Software:
- 11. Is attendance of the Ph.D. Scholar maintained properly?** **Yes / No**
- 12. Whether Research Centre is registered under MPCB provisions?** **Yes / No**
- 13. Whether BMW facility is available?** **Yes / No**
- 14. Any other important thing related to Research/Department/Facilities, which will be helpful to carry out good quality research under this department:**

.....

DECLARATION BY LIC

We, the LIC Members, hereby certify that, we have thoroughly inspected and verified the Department/College/Research Centre, the available other facilities, required instruments and equipment, available at the research centre. The overall observations of the Inspection Committee are as follows: -

.....

Name of Inspectors		Sign. of Inspectors with Date
1)	Chairman	
2)	Member	
3)	Member	
4	Member	

FOR Ph.D COURSE(S) FOR A.Y. 20.....-20.....

(Please submit separate report for each subject)

Date of Inspection	:	
--------------------	---	--

Faculty: Subject/Specialty:

1. Name & Address of the College/Research Centre: -

.....

Name of Head of the Department: -

Designation:

2. Department / Subject wise details of available PhD Guides: -
 (Attach Annexure "A")

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1							
2							
3							
4							
5							

4. Details of available infrastructure for Research:

i) Adequate number of Computers with Internet facility is available?

Yes / No

ii) Adequate number of Books / Journals are available?

Yes / No

iii) Any other specific thing available at the Department:

5. Details of Central Research Laboratory:

i) Available Area (in sq. ft):

ii) Is Drugs/Medicines/Chemicals etc. are available for research?

Yes / No

iii) Is Adequate number of Instruments are available?

Yes / No

iv) Is Records of Stock book available?

Yes / No

6. Details of Central Animal House:

i) Available Area in sq. ft:

ii) Functioning Central Animal House? Yes / No

7. Details of Institutional Ethical Committee: (Attach Annexure "B")

College Letter Head

Details of Institutional Ethical Committee

A) Details of Institutional Ethical Committee

Sr.No.	Name of Ethical Committee Member	Designation
1		
2		
3		
4		
5		

Date:

Data Verified by the Committee members:

Member

Member

Member

Chairman

College Letter HeadList of Ph.D. Guides Available at Ph.D. Research Centre

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
1	Dr. Karan pujari	Associate professor	21/06/1979	30/06/2043	05	Yes	NO. MUHS/UDC/P h. D/c- 1/872/2017, Date 3/7/2017

Date:

Data Verified by the Committee members:

Member

Member

Member

Chairman