

**Annexure XII**  
**LIST 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 6 days Research Methodology Workshop? Yes/No	Ph.D. Recognition No. and Date
1							
2							
3	<b>NOT Applicable</b>						
4							
5							

Date:



Signature, Name and stamp of Dean/Principal/Director

*[Handwritten Signature]*  
**Principal**  
 Jupiter Ayurved Medical College  
 Nagpur.

Signature of Member

Signature of Member

Signature of Chairman