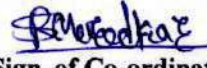


ANNEXURE – “G”**Information of Co-coordinator of Training Centre**

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. Snehal Marodkar
02.	Date of Birth	: 23/04/1991
03.	Address	: Kalpana Nagar ,VMV Road Amravati
04.	Mob. No.	: 9420147302
05.	E-mail id	: drsnehalmarodkar@gmail.com
06.	Nationality	: Indian
07.	Qualification in details : (attach documentary proof)	: BAMS, MD (Kayachikitsa)
08.	Present Appointment	: Associate Professor
09.	Any other relevant information	-

Date: 23/05/2022


Sign. of Co-ordinator


Sign & Stamp
Head of the Department

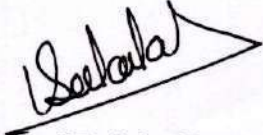
Date: 23/05/2022
H.O.D.

Panchakarma

Dr. Rajendra Gode Ayurved College,
Hospital & Research Center, Amravati

Training Centre Round Seal




Sign & Stamp
Dean/ Principal/ Director of Training Centre

Date: 23/05/22
Principal
Rajendra Gode Ayurved College,
Hospital & Research Center, Amravati