



National Commission for Indian System of Medicine

Faculty Registration Details


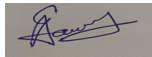
Note: The Commission/Marbism holds full authority to reject/withdraw any teacher code or to take appropriate action as per rules, if any discrepancy is found in the profile of the teacher.

Show Application History

Show Profile Updation History

Application Type: Appointment Of Teacher
Assigned TO: TO000092
Current Owner: Teacher
Assigned Teacher Code : AYSS02270

Faculty Details

Teacher Code Reference No. :	TCRA000060474	 
Applicant Name :	Dr. KUNAL ARUNRAO GAWANDE	
Gender :	Male	
Date Of Birth :	14/Dec/1994	
Father's Name :	ARUNRAO	
Mother's Name :	VIJAYA	
Teacher Code :	AYSS02270	

Institute Details

Joining Institution Id :	AYU0173
Joining Institution Name :	Radhakisan Toshniwal Ayurved Mahavidyalaya
Joining Institute State :	Maharashtra

Contact Details

Teacher's Mobile Number :	8408865017
Teacher's Email Id :	kunalgawande.kg@gmail.com
PAN Number :	DFUPG0483P

Present Address Details

Address Line 1 :	BORGAON KHURD
State :	Maharashtra
City :	Akola
Pin Code :	444407

Permanent Address Details

Address Line 1 :	BORGAON KHURD
State :	Maharashtra
City :	Akola
Pin Code :	444407

Notice Period

Duration Of Notice period (In days) **30**

Joining Institute Details

State of Institution Currently Joining :
District of Institution Currently Joining : **Akola**
Name of Institution Currently Joining :

UG Qualification

System of Medicine : **Ayurveda**
State/UT from where the qualifying degree was obtained : **MAHARASHTRA**
Name of University/Board or medical Institution : **Maharashtra University of Health Sciences, Nashik**
Name of Institution : **Radhakisan Toshniwal Ayurved Mahavidyalaya**
Name of the obtained recognized Medical Qualification : **Ayurvedacharya (Bachelor of Ayurvedic Medicine & Surgery)**
Year of Passing : **2019**

PG Qualification

PG Qualification
PG Degree/PG Diploma : **M.D.**
State from which Addl. Degree obtained : **MAHARASHTRA**
Name of the University : **Maharashtra University of Health Sciences, Nashik**
Institution Name : **Radhakisan Toshniwal Ayurved Mahavidyalaya**
Specialization : **Ayurveda Vachaspati - M.D. (Samhita)**
Year of Passing : **2025**

Current Job Details

Current Designation : **Assistant Professor/Lecturer**
Current Department : **Ayurved Samhita & Siddhant**
From Date : **06/Feb/2026**
Do you want to change Department? : **No**

Registration Details

State Board Registration No : **I-98087-A**
State Board Name : **Maharashtra Council of Indian Medicine, Mumbai, Maharashtra**
HPR Number : **11608483062888**

Previous Experience Details

Date of initial appointment: **04/Jun/2025**

Row No.	State of the Institution	District of the Institution	Name of the Institution	Department(Subject)	Designation	From	To
1	Maharashtra	Akola	Dr.Rajesh Ramdasji Kambe Ayurved college & hospital, Gat. No. 08 at Turkhed, Tq. Murtizapur, Dist. Akola, Pincode- 444107	Ayurved Samhita & Siddhant	Assistant Professor/Lecturer	04/Jun/2025	05/Feb/2026
2	Maharashtra	Akola	Radhakisan Toshniwal Ayurved Mahavidyalaya	Ayurved Samhita & Siddhant	Assistant Professor/Lecturer	06/Feb/2026	Till Date

Any gap in between your Job experience?:

No

Checklist(Documents to be Verified)

To view document for Relieving/Resignation by teacher. [Click here.](#)

To view document for Acceptance of Relieving/Resignation by college. [Click here.](#)

To view document for date of birth. [Click here.](#)

To view State Registration Certificate [Click here.](#)

To view UG Qualification Degree certificate [Click here.](#)

To view PG Qualification Degree certificate [Click here.](#)

To view Appointment Order/Transfer Order [Click here.](#)

To view Joining Letter [Click here.](#)

To view Experience Certificates [Click here.](#)

To view Certified copy of relieving certificate from previous Institution [Click here.](#)

To view scanned copy of PAN Card. [Click here.](#)

To view NTET Eligibility certificate/Score card. [Click here.](#)