



Godavari Foundation's

# Dr. Ulhas Patil Medical College & Hospital

Recognised by Medical Council of India, Approved by Central Govt. of India, New Delhi,  
and Affiliated to Maharashtra University of Health Science, Nashik

N.H.6 (Jalgaon- Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon

Ph. No. (0257) 2366657 Fax : 2366648 E-Mail : dupmcj@yahoo.in

2366657

2366648

GF/DUPMC&H/S.W/2017-18/129

Date: 28/08/2017

To,

**The Registrar,**

Maharashtra University of Health Sciences,

Nashik- 422004.

**Subject: - Constitution of College Student's Council.**

**Reference: - MUHS/SW/CUL/4.6/1644/2017 Date 19/07/2017.**

Sir,

with reference to above subject we have formed college student's council of Dr. Ulhas Patil Medical College, Jalgaon.

Nominations are done as per the guidelines issued by you.

Thanking you



Yours truly,

**DEAN**

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.

**Name of the College :** Dr. Ulhas Patil Medical College, Jalgaon.

**College Student Council - 2017-18**

(a)	Dean / Principal - ( Chairman )	Dr. N.S. Arvkar		
(b)	One teacher; nominated by the Dean / Principal	Dr. A.A. Mahajan		
(c)	Program Officer of NSS ( if available )	N.A		
(d)	Director Sports / Physical Education Instructor	Mr. Surendra Gawande		
(e)	Officer in charge of Cultural activities	Dr. M.N. Arvkar		
(f)	One student of each class (UG/PG) nominated by the Dean/Principal provided that the principal shall nominate student under clause (f) who is engaged in full - time studies / training in the college and have secured highest number of marks in the preceding annual examination.	i) 1 <sup>st</sup> Yr. : <u>Mitesh Damle</u> ii) 2 <sup>nd</sup> Yr. : <u>Mansi Madan</u> iii) 3 <sup>rd</sup> Yr. : <u>Pratik Chhajed</u> iv) Final : <u>Pranali Toshniwal</u> v) Intern : <u>Pournima Kale</u>		
(g)	One student nominated by the Dean /Principal, who has shown outstanding performance, from following activities : ( i ) Sports ; ( ii ) National Service Scheme; (iii) National Cadet Corps; (iv) Cultural Activities; (V) Research or other extra curricular activities.	<b>Activity</b>	<b>Name of Student</b>	<b>Year</b>
		Sports	<u>Vrushabhkumar Patel</u>	<u>III/II MBBS</u>
		NSS	<u>N.A</u>	
		NCC	<u>N.A</u>	
		Cultural	<u>Dheeraj Zore</u>	<u>III/I MBBS</u>
Research	<u>Murhekar Siddhartha M.</u>	<u>III/II MBBS</u>		
(h)	Two lady students nominated by the Dean / Principal, who have shown outstanding performance, in Sports, NSS, NCC and Cultural Activities.	( i ) <u>Sports : Prachi Mali</u> ( ii ) <u>Jagnuti Vasukar</u>		
Provided that, two of the students from clauses (g) and (h) shall be those belonging to the Scheduled Castes, Scheduled Tribes. De - notified Tribes (Vimukta Jatis), Nomadic Tribes or other Backward Classes.				
Name of the Student Secretary		: <u>Siddhartha Murhekar</u>		
Elected from amongst Student Members other than The students' of first year, interneers and PG :				

**Date:** 16/8/2017

**Place:** Jalgaon.



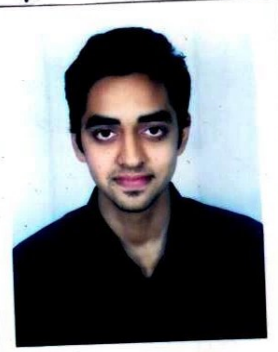
*(Signature)*

**Dean/Principal Signature**  
**College Stamp**  
**Dean**  
**Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.**



MUHS

1. Name of College: Dr. Ulhas Patil Medical College & Hospital
2. Postal Address : Flat NO 402, 'Himgiri' wing, Himalaya Valley Condominium, Hindustan colony, Amravate Road, Nagpur
3. Name of the Secretary: Siddhartha Mushetkar
4. Date of Birth: 03.05.1996
5. Caste & Category: Open, Brahmin
6. Contact details: Resi No. 0712-255955 Mobile No. 9168904479  
E-mail siddhastharmushetkar@gmail.com
7. Present Class: 1<sup>st</sup> Yr. / 2<sup>nd</sup> Yr. / 3<sup>rd</sup> Yr. / Final Yr. 8. Course: MBS
9. College Establishment Year: \_\_\_\_\_



10. Last University examination passed Along with month & year of passing And percentage of marks (Please attach attested Photo Copy)

Year of Passing	Percentage
2016	73

11. Participation in NSS/NCC activities : Yes / No (if yes Year of activities) -  
(Please attach attested Photo Copy)
12. Participation in Sports / Cultural : Yes / No (if yes Year of activities) 2016  
(Please attach attested Photo Copy)
13. Participation in Research/social work: Yes / No (if yes Year of activities) 2016  
(Please attach attested Photo Copy)

**Note: Incomplete or Application without necessary Photo copies will be rejected.**

*Siddhartha Mushetkar*

Date: 16.08.2017

Signature of the Student Secretary

**CERTIFICATE FROM THE DEAN / PRINCIPAL**

I hereby certify that the above information has been verified personally from the office record and it is correct to the best of my knowledge and belief.

Date : 16-8-2017

Place : Jalgaon



*[Signature]*  
Dean / Principal  
Signature & stamp  
College Stamp  
Dean  
Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



**GF/DUPMC&H/S.W/2018-19/168**

**Date: 21/08/2018**

To,  
**The Registrar,**  
Maharashtra University of Health Sciences,  
Nashik- 422004.

**Subject: - Constitution of College Student`s Council.**

**Reference: - MUHS/SW/CUL/973/2018 Date:- 03/07/2018.**

Respected sir,

with reference to above subject we have formed college student`s  
council of Dr. Ulhas Patil Medical College, Jalgaon.

Nominations are done as per the guidelines issued by you.

Thanking you



**DEAN**

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK.****Name of the College :- Dr. Ulhas Patil Medical College & Hospital Jalgaon.****College Student Council – 2018 – 19.**

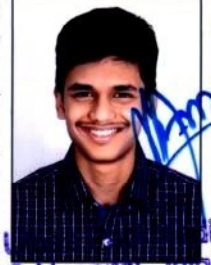
a)	Dean / Principal – (Chairman)	<b>Dr. N. S. Arvikar</b>		
b)	One teacher: nominated by the Dean / Principal (Name, Mobile No & Email)	<b>Dr. Amrut A. Mahajan</b> (Mob no:- 9422178929, Email Id:- dr.amrutmahajan@gmail.com )		
c)	Program Officer of NSS (if available) (Name, Mobile No & Email)	<b>Gawande Surendra Bhauraoji</b> (Mob no:-9923311303, Email Id:- gawandesurendra@gmail.com)		
d)	Director Sports / Physical Education Instructor (Name, Mobile No & Email)	<b>Gawande Surendra Bhauraoji</b> (Mob no:-9923311303, Email Id:- gawandesurendra@gmail.com )		
e)	Officer in charge of cultural activities (Name, Mobile No & Email)	<b>Dr. M.N. Arvikar</b> (Mob no:- 9822512650, Email Id:- nsarvikar@gmail.com )		
f)	One student of each class (UG / PG) nominated by the Dean / Principal provided that, the principal shall nominate students under clause (f) who is engaged in full-time studies/training in the college & have secured highest number of marks in the preceding annual examination.	1) 1st Year : <b>Dhriti Satyam</b>		
		2) 2nd Year : <b>Gawand Manasi Prashant</b>		
		3) 3rd Year : <b>Mashere Prathamesh Anil</b>		
		4) Final : <b>Bothale Pratiksha Raybhan</b>		
g)	One students nominated by the Dean / Principal who have shown outstanding performance in sports, NSS, NCC and Cultural Activities.	<b>Activity</b>	<b>Name of the Student</b>	<b>Year</b>
		Sports	Lahade Anirudha Shivaji	II
		N S S	Chhaged Pratik P.	Intern
		N C C	Kale Pruthviraj Bhau	II
		Cultural	Jain Khushboo Manoj	II
		Research	Kochhar Anusha Onil	II
h)	Two lady students nominated by the Dean / Principal, who have shown outstanding performance Sports, National Service Scheme, National Cadet Corps, Cultural Activities, Research or other extracurricular activities.	1) <b>Khanijoan Nikhita Arvin</b> 2) <b>Karande Dweta Dnyanoba</b>		
	Provided that, two of the students from clauses (g) and (h) shall be those belonging to the Scheduled Castes, Scheduled Tribes, Vimukta Jatis, Nomadic Tribes of other Backward Classes.			
	Name of the Student Secretary Elected from amongst Student Members, Other than the students of first year, internees and PG.	<b>Damle Mitessh Nagesh</b>		

Date : **21/08/2018**Place **Jalgaon**

Dean / Principal Signature & stamp  
**Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh.**


**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

 1. Name of College: DR. ULHAS PATIL MEDICAL COLLEGE AND HOSPITAL, JALGAON.

 2. Postal Address : 2030, SADASHIV PETH, FLAT NO: 3,  
SHREENAD APARTMENT, TILAK ROAD, PUNE-411030.

 3. Name of the Secretary: DAMLE MITESH NAGESH.

 Dr. Ulhas Patil Medical College  
 & Hospital, Jalgaon Kh.

 4. Date of Birth: 16/01/1998.

 5. Caste & Category: OPEN.

 6. Contact details: Resi No. 020-2432443 Mobile No. 9168929768

 E-mail mitesh.damle@gmail.com.

 7. Present Class: 1<sup>st</sup> Yr. /  2<sup>nd</sup> Yr. / 3<sup>rd</sup> Yr. / Final Yr. 8. Course: MBBS

 9. College Establishment Year: 2008

 10. Last University examination passed  
 Along with month & year of passing  
 And percentage of marks  
 (Please attach attested Photo Copy)

Year of Passing	Percentage
<u>AUGUST 2017</u>	<u>77.33</u>

 11. Participation in NSS/NCC activities: Yes / No (if yes Year of activities)  
 (Please attach attested Photo Copy) No

 12. Participation in Sports / Cultural : Yes / No (if yes Year of activities)  
 (Please attach attested Photo Copy) No

 13. Participation in Research/social work: Yes / No (if yes Year of activities)  
 (Please attach attested Photo Copy) No

**Note: Incomplete or Application without necessary Photo copies will be rejected.**

 Date: 21/8/2018.

Mitesh Damle  
 Signature of the Student Secretary

**CERTIFICATE FROM THE DEAN / PRINCIPAL**

I hereby certify that the above information has been verified personally from the office record and it is correct to the best of my knowledge and belief.

 Date : 21/08/2018

 Place : Jalgaon.


Mitesh Damle  
 Dean / Principal  
 Signature & Stamp  
 Dr. Ulhas Patil Medical College  
 & Hospital, Jalgaon Kh.





**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
Statement of Marks



Examination: **First M.B.B.S. SUMMER-2017 EXAMINATIONS** Statement No.: **1766762**  
 Name of the Candidate: **DALE NITESH NAGESH** College Code: **1306**  
 P. R. No.: **UNHS/2017/45090** Maharashtra University of Health Sciences, Nashik, Maharashtra

HEADS OF PASSING	ANATOMY	PHYSIOLOGY	BIOCHEMISTRY	RESULT
Theory	MAX 100 076	077	081	PASS
Oral	MAX 20 17	15	17	
Total (Theory + Oral)	MAX 120 MIN 60 093	092	098	
Practical	MAX 40 MIN 20 30	29	30	
Theory	MAX 20 14	14	17	
Practical	MAX 20 14	14	17	
Internal Assessment	MAX 40 MIN 14 28	28	34	
Total	MAX 200 MIN 100 153#	149	162#	
			Grand Total (600)	
			464#	

AB : Absent, FFF: Fail, Min: Minimum Marks, Max: Maximum Marks, #: Distinction, EX: Exemption  
 NE: Not Eligible As Failed in Internal Assessment  
 (As per MCI notification No. 164 Dt. 16/10/2003)

DATE: 12 August 2017

1015090

CONTROLLER OF EXAMINATIONS

Report the discrepancy of Name, Marks etc. (if any) in above Marksheet to the University within six months of issue of this Marksheet.



Godavari Foundation's

# Dr. Ulhas Patil Medical College & Hospital

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and Affiliated to Maharashtra University of Health Science, Nashik

N.H.6 (Jalgaon-Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon  
Ph. No. (0257) 2366657 Fax : 2366648 E-Mail Id : dupmcj@yahoo.in

GF/DUPMC&H/S.W/2019-20/214

Date: 19/09/2019

To,  
The Registrar,  
Maharashtra University of Health Sciences,  
Nashik- 422004.

**Subject: - Constitution of College Student's Council.**

**Reference: - MUHS/SW/S.C/1705/2019 Date:- 29/08/2019.**

Respected sir,

with reference to above subject we have formed college student's council of Dr. Ulhas Patil Medical College, Jalgaon. Some is being forwarded for your necessary action. Name of General Secretary Bholane Shubhan V. Nominations are done as per the guidelines issued by you.

Thanking you



DEAN  
Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh

Recd 20/09/19  
MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES  
Mhasrul, Vani-dindori Road, Nashik - 422 004





GF/DUPMC&H/S.W/2019-20/214

Date: 19/09/2018

To,  
The Registrar,  
Maharashtra University of Health Sciences,  
Nashik- 422004.

**Subject: - Constitution of College Student's Council.**

**Reference: - MUHS/SW/S.C/1705/2019 Date:- 29/08/2019.**

Respected sir,

with reference to above subject we have formed college student's council of Dr. Ulhas Patil Medical College, Jalgaon. Same is being forwarded for your necessary action. Name of General Secretary Bholane Shubhan V. Nominations are done as per the guidelines issued by you.

Thanking you



DEAN

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK.****Name of the College :- Dr. Ulhas Patil Medical College & Hospital Jalgaon.****College Student Council – 2019 – 20.**

a)	Dean / Principal – (Chairman)	Dr. N. S. Arvikar		
b)	One teacher: nominated by the Dean / Principal (Name, Mobile No & Email)	Dr. Amrut A. Mahajan (Mob no:- 9422178929, Email Id:- dr.amrutmahajan@gmail.com )		
c)	Program Officer of NSS (if available) (Name, Mobile No & Email)	N.A		
d)	Director Sports / Physical Education Instructor (Name, Mobile No & Email)	Gawande Surendra Bhauraoji (Mob no:-9923311303, Email Id:- gawandesurendra@gmail.com )		
e)	Officer in charge of cultural activities (Name, Mobile No & Email)	Dr. M.N. Arvikar (Mob no:- 9822512650, Email Id:- nsarvikar@gmail.com )		
f)	One student of each class (UG / PG) nominated by the Dean / Principal provided that, the principal shall nominated students under clause (f) who is engaged in full-time studies/training in the college & have secured highest number of marks in the preceding annual examination.	1) 1st Year : Pandya Priyanka		
2) 2nd Year : Pratiksha Gaikwad				
3) 3rd Year : Bardeskar Joyce				
4) Final : Mashere Prathamesh				
g)	One students nominated by the Dean / Principal who have shown outstanding performance in sports, NSS, NCC and Cultural Activities.	<b>Activity</b>	<b>Name of the Student</b>	<b>Year</b>
Sports		Lahade Anirudha Shivaji	III/I	
N S S		Komarwalliwar Shreyash	III/I	
N C C		Dhingra Siddhi	III/I	
Cultural		Forum Nirav Matalia	III/I	
Research		Garge Anushka	III/I	
h)	Two lady students nominated by the Dean / Principal, who have shown outstanding performance Sports, National Service Scheme, National Cadet Corps, Cultural Activities, Research or other extracurricular activities.	1) Chauk Isha 2) Vrushali Kamble		
Provided that, two of the students from clauses (g) and (h) shall be those belonging to the Scheduled Castes, Scheduled Tribes, Vimukta Jatis, Nomadic Tribes of other Backward Classes.				
	Name of the Student Secretary Elected from amongst Student Members, Other than the students of first year, internees and PG.	Bholane Shubham Vasantrao		

Date : 19/09/2019

Place Jalgaon



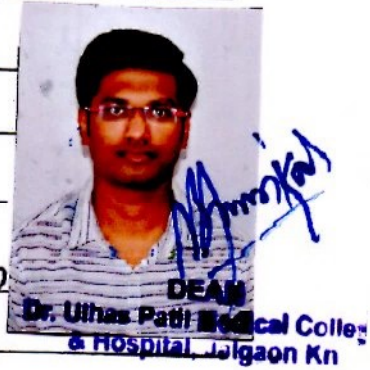
Dean / Principal Signature &amp; stamp

 A handwritten signature in blue ink, appearing to read "Ulhas Patil".
   
**DEAN**  
 Dr. Ulhas Patil Medical College  
 & Hospital, Jalgaon Kt.




**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

1. Name of College: Dr. Ulhas Patil Medical College
2. Postal Address : NH-6, Jalgaon - Bhusawal Road,  
Jalgaon Kh, Tal & Dist - Jalgaon
3. Name of the Secretary: BHOLANE SHUBHAM KASANTRAO
4. Date of Birth: 24-06-1996
5. Caste & Category: O.B.C
6. Contact details: Resi No. 9421520161 Mobile No. 9403292168
7. Present Class: <sup>E-mail</sup> Shubhambholane1996@gmail.com  
1<sup>st</sup> Yr. / 2<sup>nd</sup> Yr. / 3<sup>rd</sup> Yr. / Final Yr. 8. Course: M.B.B.S
9. College Establishment Year: 2008
10. Last University examination passed  
Along with month & year of passing  
And percentage of marks  
(Please attach attested Photo Copy)
- | Year of Passing | Percentage |
|-----------------|------------|
| 2018            | 53.63      |
11. Participation in NSS/NCC activities: Yes / No (if yes Year of activities)  
(Please attach attested Photo Copy) No
12. Participation in Sports / Cultural : Yes / No (if yes Year of activities) No  
(Please attach attested Photo Copy)
13. Participation in Research/social work: Yes / No (if yes Year of activities)  
(Please attach attested Photo Copy) YES



**Note: Incomplete or Application without necessary Photo copies will be rejected.**

Date: 19/08/2019

Bholane  
Signature of the Student Secretary

**CERTIFICATE FROM THE DEAN / PRINCIPAL**

I hereby certify that the above information has been verified personally from the office record and it is correct to the best of my knowledge and belief.

Date : 19/8/2019

Place : Jalgaon Kh.



Shubham Bholane  
Dean / Principal  
Signature & stamp  
**DEAN**

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



# MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

Statement of Marks

Examination: **Second M.D.B.S. Winter-2018 EXAMINATIONS**

Statement No: **19017727**

Name of the Candidate: **BHOLANE SHUBHAM VASANTRAD SHUK**

College Code: **1306**

F. R. No.: **0107145064**

Seat No: **65144**

SUBJECTS	THEORY	ORAL	THEORY + ORAL	PRACTICAL	INTERNAL ASSESSMENT		SUBJECT TOTAL	GRAND TOTAL (550)
					TH.	PR.		
Maximum	80	14	94	26	15	30	150	295
Minimum	--	--	47	13	--	10.5	75	
PHARMACOLOGY	39	10	047	17	04	07	11	* CRD. 1.60
PATHOLOGY	37	08	047	14	06	08	14	
MICROBIOLOGY	51	10	061	16	06	08	14	
Maximum	40	10	50	30	10	10	20	RESULT
Minimum	--	--	25	15	--	--	07	
FORENSIC MEDICINE	18	05	*023	17	05	07	12	052

TH: Theory, PR: Practical, AB: Absent, FFF: Fail, EX: Exemption, # : Distinction  
 \* : Not Eligible As Failed in Internal Assessment (AS PER MCI NOTIFICATION NO. 164 Dt. 16/10/2003)

**ATTESTED BY**  
 [Signature]  
**DEAN**

DATE: 05 February 2017

1025144

**CONTROLLER OF EXAMINATIONS**

Report the discrepancy of Name, Marks etc, (if any) in above Marksheet to the University within six months of issue of this Marksheet.



## एक सप्ताह देश के नाम

Forum of Medical Students

दि. १२ से १९ जानेवारी २०१९ कन्याकुमारी, तामिळनाडु

## प्रशस्तीपत्र

डॉ. शुभम वसंतराव भोलाणे

आपका

इस आरोग्य शिबीर में सक्रिय योगदान रहा। इसीलिए यह प्रमाणपत्र सम्मान के साथ आपके प्रदान किया जाता है। हम आपके उज्ज्वल भविष्य की कामना करते हैं।

आपका वर्धमान कर्तृत्व भारत माता के चरणों में समर्पित हो।

डॉ. विलिदास चव्हाण

रजिस्ट्रार

नहाणूर आरोग्य विज्ञान विद्यापीठ, नाशिक

डॉ. अनंत पंढरे

कार्यवाह

डॉ. बाबासाहेब आंबेडकर वैद्यकीय प्रतिष्ठान,

ATTESTED BY  
DEAN





Godavari Foundation's

# Dr. Ulhas Patil Medical College & Hospital

Recognised by Medical Council of India, Approved by Central Govt. of India, New Delhi,  
and Affiliated to Maharashtra University of Health Science, Nashik

N.H.6 (Jalgaon- Bhusawal Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon  
Ph. No. (0257) 2366657 Fax : 2366648 E-Mail Id : dupmcj@yahoo.in

GF/DUPMC&H/S.W/2021-22/163

Date: 30/08/2021

To,  
The Registrar,  
Maharashtra University of Health Sciences,  
Nashik- 422004.

**Subject: - Constitution of College Student`s Council.**

**Reference: - MUHS/SW/SC/739/2021 Date:- 17/08/2021.**

Respected sir,

with reference to above subject we have formed college student`s council of Dr. Ulhas Patil Medical College, Jalgaon. Same is being forwarded for your necessary action. Name of the General Secretary **Rajpal Bharati Bhagwan.**

Nominations are done as per the guidelines issued by you.

Thanking you



  
**DEAN**  
Dean

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



EM421343894IN IVR:6977421343894  
SP NASHIRABAD S.O <425309>  
Counter No:1,31/08/2021,11:02  
To:DIRECTOR, STUDENT WELFARE  
PIN:422004, Meri Colony S.O  
From:DR. ULHAS ,JLG. KH.  
Wt:42gms  
Amt:41.30(Cash)Tax:6.30  
<Track on www.indiapost.gov.in>



Godavari Foundation's  
**Medical College & Hospital**

ncil of India, Approved by Central Govt. of India, New Delhi,  
Maharashtra University of Health Science, Nashik  
al Road), Jalgaon (Kh.) - 425 309 Tal & Dist - Jalgaon  
657 Fax :2366648 E-Mail Id : dupmcj@yahoo.in

GF/DUPMC&H/S.W/2021-22/163

Date: 30/08/2021

To,  
The Registrar,  
Maharashtra University of Health Sciences,  
Nashik- 422004.

Subject: - Constitution of College Student's Council.

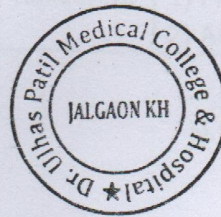
Reference: - MUHS/SW/SC/739/2021 Date:- 17/08/2021.

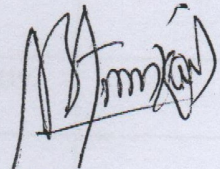
Respected sir,

with reference to above subject we have formed college student's council of Dr. Ulhas Patil Medical College, Jalgaon. Same is being forwarded for your necessary action. Name of the General Secretary Rajpal Bharati Bhagwan.

Nominations are done as per the guidelines issued by you.

Thanking you



  
DEAN  
Dean

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



Dean / Principal Signature  
Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.




## Dr. Ulhas Patil Medical College & Hospital Jalgaon.

**Name of the College :- Dr. Ulhas Patil Medical College & Hospital Jalgaon.**  
**College Student Council – 2021 – 22.**

Dean / Principal – (Chairman)	Name:- Dr. N. S. Arvikar Mobile no:-9326512744 Email:-nsarvikar@gmail.com		
One teacher; nominated by the Dean / Principal-(Member)	Dr. Amrut Mahajan Mob No:-9422178929 Email :-dr.amrutmahajan@gmail.com		
Program Officer of NSS-(Member) (if available)	N. A		
Director Sports / Physical Education Instructor-(Member)	Name:-Gawande Surendra Bhauraoji Mobile No:- 9923311303 Email:- gawandesurendra@gmail.com		
Office In charge of Cultural activities-(Member)	Name :- Mrs. Maya N. Arvikar Mobile no:- 9822512650 Email:-nsarvikar@gmail.com		
One students of each class (UG / PG) nominated by the Dean / Principal- (Member) (provided that the principal shall nominated students under clause (f) who is engaged in full-time studies/training in the college & have secured highest number of marks in the preceding annual examination.)	1) 1st Year – Lagad Abhishek Bharat		
	2) 2nd Year – Hema Parthasarathy		
	3) 3rd Year - Pandya Priyanka Amit		
	4) Final – Anumeha Parashar		
	5) Intern – Anushka Garge		
Two Male and Two Female students nominated by the Dean / Principal, who have shown outstanding performance, from following activities : Sports: National Service Scheme: National Cadet Corps: Cultural Activities: Research or other extra curricular activities. (Total 10 Students only)	<b>Activity</b>	<b>Name of the Students</b>	<b>Year</b>
	Sports:	1) Chauk Isha. 2) Niranjn Shinde D.	4 MBBS 2 MBBS
	N S S	1) Sangram Wagh.	4 MBBS
	N C C	<b>N.A</b>	
	Cultural	1) Satpute Sakshi. 2) Abhishek Patil.	
	Research.	1) Prakrut Paidisetty. 2) Akshay Singh.	
Two lady students nominated by the Dean / Principal, who have shown outstanding performance Sports, National Service Scheme, National Cadet Corps, Cultural Activities, Research or other extracurricular activities.	N.A		
Provided that, one male and one female students out of the four shall be belonging from the Scheduled Castes/Scheduled Tribes, Vimukta Jatis, Nomadic Tribes of other Backward Classes.			
Name of the Student Secretary :- <b>BHARATI BHAGWAN RAJPAL</b> (Elected from amongst Student Members, Other than the students' of first year, interneees and PG elected from amongst the student members by the council .			

Date: 30/08/2021  
Place:- Jalgaon Kh.



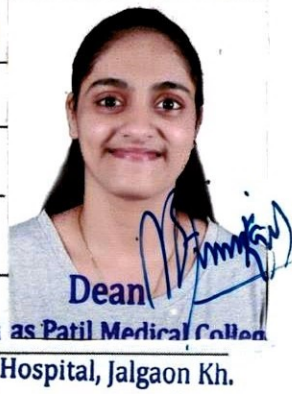
  
**Dean / Principal Signature**  
**Dean**  
Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.





**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
(Information of Secretary of College Students Council)

1. Name of College : DR. ULHAS PATIL MEDICAL COLLEGE
2. Postal Address : NH-06, Jalgaon - Bhusawal Road  
Jalgaon Kh. Tal & Dist - Jalgaon
3. Name of the Secretary : BHARATI BHAGWAN RAJPAL
4. Date of Birth : 12/06/1998
5. Caste & Category : HINDU, OPEN
6. Contact details : Resi No. 9082798598 Mobile No. 9168805676  
E-mail bharatirajpal20@gmail.com
7. Present Class: 1<sup>st</sup> Yr. / 2<sup>nd</sup> Yr. / 3<sup>rd</sup> Yr. / Final Yr. 8. Course : MBBS
9. College Establishment Year : 2008



Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.

10. Last University examination passed  
Along with month & year of passing  
And percentage of marks  
(Please attach attested Photo Copy of  
Marksheet)

Year of Passing	Percentage
THIRD (I) MBBS, WINTER-2020	76%

11. Participation in NSS/NCC activities : Yes/No NO  
(Please attach attested Photo Copy) (if yes, Name & Year of activity)
12. Participation in Sports / Cultural : Yes/No - JHU's Regional level Microbiology quiz (2019)  
(Please attach attested Photo Copy) (if yes, Name & Year of activity) - Asclepiad by GMC, Dhule (2018) (2019)
13. Participation in Research/social work : Yes/No NO  
(Please attach attested Photo Copy) (if yes, Name & Year of activity)

Note: Incomplete Application or Application without necessary Photo copies will be rejected, Summarily.

Date: 28/8/2021

Bajpal  
Signature of the Student Secretary

**CERTIFICATE FROM THE DEAN / PRINCIPAL**

I hereby certify that the above information has been verified personally from the office record and it is found correct to the best of my knowledge and belief.

Date : 28/8/2021

Place : Jalgaon Kh.



Bajpal  
Dean / Principal  
Signature & stamp  
Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

STATEMENT OF MARKS FOR THIRD(1) MBBS - Winter-2020

Name of the Student:- RAJPAL BHARATI BHAGWAN

College:- Dr.Ulhas Patil Medical College & Hospital, Khurd, Jalgaon

Seat No:-38248 PRN No:- 0118195131

HEADS / SUBJECTS	THEORY	ORAL	TOTAL (THEORY+ORAL)	PRACTICAL	INTERNAL ASSESSMENT			TOTAL
					THEORY	PRACT.	TOTAL	
MAX	120	10	130	30	20	20	40	200
MIN			65	15			14	100
P.S.M.	85	07	092	27	16	16	32	151
MAX	40	10	50	30	10	10	20	100
MIN			25	15			7	50
OPHTHALMOLOGY	34	07	041	26	06	06	12	079
E.N.T.	32	08	040	21	07	06	13	074
GRAND TOTAL	304 / 400							
RESULT	PASS							
REMARK								

**NOTE:** 1) The above result is subject to change in case of any error in the processing of the results in accordance with the provisions under section-67 of Ordinance 1/2014.

2) For Verification of marks of Theory/Practical/Oral/Viva only (If any), send an application with prescribed fees through the college before **17/08/2021** As per **Noti.52/2019,29/07/19.** And for Photostate(Xerox) copies of Answer books (If any), send and Application with requisite fee through the college before **17/08/2021** As per **Circ.52/2019,29/07/19.**

ATTESTED BY  
  
 DEAN

Dr. Ulhas Patil Medical College  
 & Hospital, Jalgaon Kh.



JIIU'S INDIAN INSTITUTE OF MEDICAL SCIENCE AND RESEARCH

Aurangabad-Jalna Road Warudi, Tal-Badnapur, Dist-Jalna (M.S.), India-431202

Certificate of Participation

This is to certify that Mr./Miss. **Bhasati Rajpal Dupmc Jalgaon** has participated in "Regional Microbiology Under Graduate Quiz" on Medical Microbiology conducted under Maharashtra chapter conference of IAMMM 2019 by Department of Microbiology on 29 August 2019.

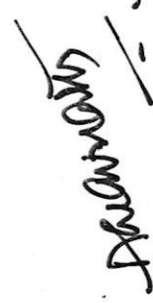
ATTESTED BY

  
DEAN

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.



Professor & HOD  
Dr. A.S. Damle



Dean  
Dr. A. B. Solepure



**SHRI BHAUSAHEB HIRE GOVT. MEDICAL COLLEGE, DHULE**  
In affiliation with Maharashtra University of Health Sciences, Nashik Presents


**MUHS**

# Asclepiad 2019


## Certificate

*This is to certify that*

Mr./Ms. BHARATI BHAGWAN RAJPAL has  
in INTER- COLLEGE QUIZ in Asclepiad 2019 medical conference held on  
5th, 6th & 7th March 2019.

ATTESTED BY  
  
DEAN  
Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.

  
**Dr. Meenakshi Gajbhiye**  
Dean

  
**Dr. Neeraj Hatkar**  
Asclepiad Advisor

  
**Mr. Rishikesh Nehul**  
Asclepiad Secretary





**SHRI BHAUSAHEB HIRE GOVT. MEDICAL COLLEGE, DHULE**

In affiliation with Maharashtra University of Health Sciences, Nashik Presents



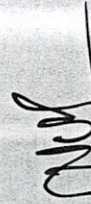
# Asclepiad 2018

## Certificate

This is to certify that

Mr./Ms. Bharti Rajpal is a /the Participant  
of inter-college quiz event

in Asclepiad 2018 medical conference held on 7th, 8th & 9th March 2018.

  
Dr. Neeta Hatkar  
Asclepiad Advisor

  
Dr. A. N. Keeliya  
Chairman



Ms. Simranjeet Kaur  
Asclepiad Secretary

ATTESTED BY

DEAN

Dr. Ulhas Patil Medical College  
& Hospital, Jalgaon Kh.