

ANNEXURE- VIII

FOR FELLOWSHIP/CERTIFICATE COURSE(S) FOR A.Y. 20.....-20.....

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

Date of Inspection	: 11/01/2024
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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	CCMP	2017	50	Dr. Rohankumar Hire
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. 2017 - 2018	CCMP	50	50
2	A.Y. 2018 - 2019	CCMP	50	50
3	A.Y. 2019 - 2020	CCMP	50	50
4	A.Y. 2020 - 2021	CCMP	50	50
5	A.Y. 2021 - 2022	CCMP	50	50
6	A.Y. 2022 - 2023	CCMP	50	50

PKM
DEAN

RAJIV GANDHI MEDICAL COLLEGE &
CHHATRAPATI SHIVAJI MAHARAJ HOSPITAL, KALWA, THANE

11/1/2024