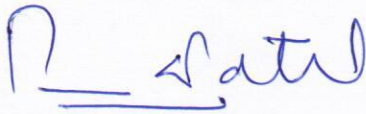


**Information of Co - ordinator of Training Centre**

Sr. No.	Particular	-	Information to be filled
01.	Name of Director	:	Ms. Anjali Ratnam
02.	Date of Birth	:	14.12.1988
03.	Address	:	Plot No, 29, Survey No 47/3/2, Shri Krishna Housing Soccity, Chandan Nagar, Kharadi, Pune
04.	Tel. No./ Mob. No.	:	9921537256
05.	e-mail id	:	academics@rubyhall.com
06.	Nationality	:	Indian
07.	Qualification in details : (attached documentproof)	:	M.Com
08.	Teaching experience/Medical:Profession experience / Consultant/Mentor(attached document proof with signature of Head)	:	-
09.	Present Appointment	:	MUHS - Co-ordinator
10.	Publications (List & Proof)	:	-
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	-
12.	Any other relevant information	:	--

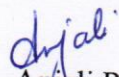
Date : 21.05.22




**DR. RAJENDRASINGH D. PATIL**  
HEAD OF THE DEPARTMENT

Date : 21.05.22



  
Ms. Anjali Ratnam  
Signature of Co-ordinator

  
**DR. D.N. BHALERAO**  
DIRECTOR ACADEMICS (ADMIN)

**DR. D. N. BHALERAO**  
MBBS, DHM, PGDLMS, ACCR, BCC  
DIRECTOR - ACADEMICS (ADMIN)  
DIRECTOR - RESEARCH