



# महाराष्ट्र आरोग्य विज्ञान विद्यापीठ, नाशिक

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

दिंडोरीरोड, म्हसळ, नाशिक-४२२००४ Dindori Road, Mhasrul, Nashik - 422004

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MUHS

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डॉ. कलिदास द. चव्हाण

एम.बी.बी.एस., एम.डी. (न्यायवैद्यकशास्त्र)

कुलसचिव

Dr. Kalidas D. Chavan

M.B.B.S., M.D. (Forensic Medicine)

Registrar

No. MUHS/PB/ PG/P3/124/2017

Date : 27/10/2017

To,  
The Dean / Principal,  
Maharashtra Education Society's  
M.E.S. Ayurved Mahavidyalaya  
Institute of Health Sciences, Ghanekhunt-Lote  
Tal. Khed, Dist - Ratnagiri - 415 722.

**Sub:-** Grant of First Time Affiliation to start new post graduate degree courses for the Academic Year 2017-18.

Sir,

As per the provision of section 65 (4) of Maharashtra University of Health Sciences Act, 1998, I am directed to inform you that, on the basis of rights conferred on Hon'ble V.C. by the Academic Council Resolution No. 144/2017 in its meeting held on 09/05/2017 and Local Inquiry Committee report, the Hon'ble Vice Chancellor is pleased to grant First Time Affiliation to start new Post Graduate Courses in the following subjects as per intake capacity shown against each, at your college viz. Maharashtra Education Society's, M.E.S. Ayurved Mahavidyalaya Institute of Health Sciences, Ghanekhunt-Lote Tal. Khed, Dist - Ratnagiri (Maharashtra). for the Academic Year 2017-18

Sr. No.	Subjects	Intake Capacity
01	Panchakarma	03
02	Shalya	04

However, the permission is subject to the following conditions :-

1. Fulfilment of norms and conditions laid down by CCIM and Govt. of India.
2. Rules and Regulations made by the Govt. and the University, as amended from time to time, will be binding on the College.
3. The college should obtain approval / recognition for UG / PG teachers (as applicable) from Maharashtra University of Health Sciences, Nashik.
4. This permission to start above mentioned PG courses is valid for the A.Y. 2017-18 only.
5. The next batch of students shall not be admitted unless continuation of affiliation of MUHS, for next Academic year is obtained by college/Institute.



Registrar

Copy to:-

1. The Secretary, Central Council of Indian Medicine, 61-65, Institutional Area, Janakpuri, New Delhi-110058
2. The Secretary, Department of AYUSH, New Delhi
3. The Secretary, Medical Education & Drugs Department, Mumbai.
4. The Director, Medical Education & Research, Mumbai.
5. The Chairman, Admission Regulating Authority, Bandra (E), Mumbai.
6. The Chairman, Fee Regulating Authority, Bandra (E), Mumbai,
7. P.S. to the Hon'ble Vice Chancellor, MUHS, Nashik.
8. P.A. to the Pro Vice Chancellor, MUHS, Nashik
9. P.A. to the Registrar, MUHS, Nashik.
10. The Controller of Examination, MUHS, Nashik.
11. The Finance and Accounts Officer, MUHS, Nashik
12. HOD, Academic Section, ( 1 ) MUHS, Nashik.
13. HOD, Student Welfare Section
14. HOD, Eligibility Section, MUHS, Nashik.
15. HOD, Computer Section, MUHS, Nashik.
16. HOD. Special Cell. MUHS. Nashik