

ANNEXURE - "G"

Information of Co-ordinator of Training Centre
It shall be verified by the Head of the concerned Training Center,

Sr. No.	Particular	Information to be filled
01.	Name of the Co-ordinator	Dr. Leena Patankar
02.	Date of Birth	27/03/1971
03.	Address	"Swarnand" 986/A11 Shukra was Peth Pune
04.	Mob. No.	+91 98 22062 858
05.	E-mail id	dr.leena.patankar@gmail.com
06.	Nationality	INDIAN
07.	Qualification in details : (attach documentary proof)	MD [Ob - Gyn] 1998 M. sc. (Clinical embryology) UK
08.	Present Appointment	Senior consultant & CO-ordinator
09.	Any other relevant information	

Date:

Sign. of Co-ordinator

Sign & Stamp
Head of the Department
Date:

Sign & Stamp
Dean/ Principal/ Director of Training Centre
Date:



Training Centre Round Seal

