

## Annexure – I

The details of each faculty (Teaching staff / Medical Professional / Consultant/Mentor) appointed for the Fellowship / Certificate course along with its supporting documents & to be submitted along with list of Teaching staff.

Sr. No.	Particular	-	Information to be filled
01.	Name of Faculty/Teacher	:	Dr. Amit Patankar
02.	Date of Birth	:	24/6/1971
03.	Address	:	"Swanand" 986/A/1 Shukrawar Peth Pune
04.	Tel. No./ Mob. No.	:	+91 9823053044
05.	e-mail id	:	dramitpatankar@gmail.com
06.	Nationality	:	INDIAN
07.	Qualification in details : (attach documentary proof)	:	DNB [Ob-Gyn] NBE New Delhi 1999
08.	Teaching experience/ Medical: Profession experience /Consultant/Mentor (attached document proof with signature of Head)	:	23 yrs
09.	Present Appointment	:	Senior Consultant
10.	Publications (List & Proof)	:	-
11.	Post Graduate Teaching experience (Attach documentary evidence)	:	07 years
12.	Any other relevant information	:	-

- Note:**
1. Unit wise teaching / Resident staff should be shown separately for each Unit in the Proforma.
  2. Use only the Format provided. DO NOT devise your own format otherwise the information will not be considered. Fill up all columns
  3. Publications: Give only full articles in indexed Journals published during the period of promotion and list them here only. No Annexure will be seen.
  4. In case of DNB qualification name of the institution/hospital from where DNB training was done and year of passing must be provided. Simply saying National Board of Examinations, New Delhi is not enough. Without these details DNB qualification holder will be summarily rejected.
  5. Experience of Defense services must be supported by certificate from competent authority of the office of DGAFM without which it will not be considered.

I have verified the eligibility of all faculty members for the post they are holding (based on experience certificates issued by competent authority of the place of working). Their experience details in different Designations and unit wise distribution is given the faculty table above.

Date :-

*A Patankar*  
Sign. of Teaching Staff

**Countersigned & Stamp by Head of Institute**

Date :-

*A Patankar*  
Sign. of Head of Institute



## Annexure - II

### Professional/Teaching Experience Certificate for Fellowship/Certificate Courses Faculty/Teachers/Consultant/Mentor

Title of the Course applied for: -

This is to Certify that Dr. Amit Patankar ..... has worked in the Department of ..... College / Institutes as per following details.

A) General Experience: -

Designation	From	To	Total period Year / Month	
Resident	1/3/1995	1/3/1996	01	00
Registrar	26/8/1996	28/8/1997	01	00

B) Actual Experience in the Subject of concerned Fellowship/Certificate Course applied for :-

Designation	From	To	Total period Year / Month	
Endoscopic surgeon	2000	Till date	20	08
Lecturer for Reproductive medicine ICOG Fellowship	June 2012	Dec 2017	05	11

(It is mandatory to attach self-attested Photocopy of the Experience Certificate of each Mentor in the Subject of concerned Fellowship/Certificate Course)

A. Patankar  
Sign & Stamp Head of  
the Department

Date:



A. Patankar  
Sign & Stamp  
Dean/Principal/Head of Institute

Date:



Recommended / Not Recommended

Signature with date of LIC Chairman/Member

**MAHARASHTRA MEDICAL COUNCIL, BOMBAY**

**CERTIFICATE OF REGISTRATION**

Registration No 073333

*This is to certify that the within-*

Signed

*A Patankar*

**Doctor Shri | *Shrimati* |**

***Kumari***

PATANKAR AMIT ARVIND

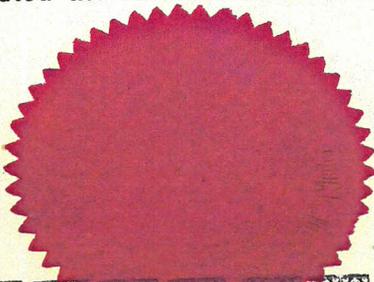
*possessing the qualifications of* M.B.B.S. (NAGPUR), 1994;

*has been duly registered under the Maharashtra Medical Council Act. 1965 (Mah. XLVI of 1965), in Part I of the register.*

*In witness whereof are herewith affixed the seal of the Maharashtra Medical Council, Bombay and the signature of the Registrar.*

Dated the.....25TH JANUARY 1994.

*A. K. Karvekar*  
Registrar.



# Nagpur University



आयुःशल्य विज्ञान स्नातक  
(Bachelor of Medicine &  
Bachelor of Surgery)

(Faculty of Medicine)

*This is to certify that*

*Shri Amit Arvind Tatankar*

*obtained the degree of आयुःशल्य विज्ञान स्नातक*

*(Bachelor of Medicine & Bachelor of Surgery)*

*in this University in the Examination*

*of Winter 1992.*

Nagpur :

5<sup>th</sup> January, 1996

*[Signature]*  
Vice-Chancellor

# National Board of Examinations

New Delhi, India

hereby certifies that

**Patankar Amit Arvind**

has pursued the prescribed course of postgraduate training and has demonstrated his proficiency at an examination held in June, 1999 to the satisfaction of the Board.

Accordingly, on this Eighteenth day of November in the year Two Thousand the Board admits him at the Convocation held at Delhi as a

**Diplomate of the National Board**

for the practice of

**Obstetrics & Gynaecology**



ज्ञानेन अमृतमश्नुते

*Dr. Shashi Raheja*

( Dr. Shashi Raheja )

Controller of Exam.

*Prof. A. Rajasekaran*

( Prof. A. Rajasekaran )

President



# Maharashtra Medical Council, Mumbai

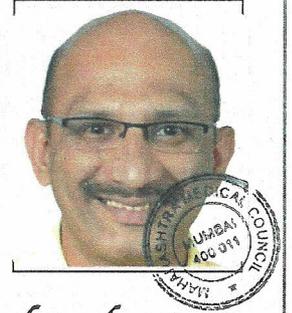
Registration No. : 73333

Dated: 25/01/1994

## ADDITIONAL MEDICAL QUALIFICATION REGISTRATION CERTIFICATE

Certificate No. : 0698/2014

Dated: 15/03/2014



*A Patankar*

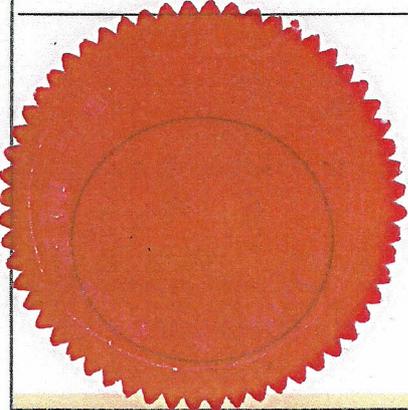
*I hereby certify that the following qualification has been duly registered in the Medical Register of the Council.*

NAME

ADDITIONAL QUALIFICATION

DR. (Mr.) PATANKAR AMIT  
ARVIND

D.N.B. (Obsterics & Gynaecology) N.B.E.  
NEW DELHI, 1999



*Patankar*

REGISTRAR



# MAHARASHTRA MEDICAL COUNCIL, MUMBAI

(Established by Government of Maharashtra Under MMC Act, 1965)

Address:- 189/A, ANAND COMPLEX, 1ST FLOOR,  
SANE GURUJI MARG, ARTHUR ROAD NAKA,  
CHINCHPOKALI (W), MUMBAI - 400 011.

Contact Details:

Tel. No.: 022-2300 7650

Website : [www.maharashtramedicalcouncil.in](http://www.maharashtramedicalcouncil.in)

Email Id: [maharashtramcouncil@gmail.com](mailto:maharashtramcouncil@gmail.com)

No : MMC/RENW/73333/202231565

Date : 03/03/2022

To,  
Dr. PATANKAR AMIT ARVIND  
986/A/1, SHUKRAWAR PETH, OPP  
SARAS BAUG, PUNE - 411002 ,  
MAHARASHTRA .

Sub : Renewal of Registration No : 73333

Ref: Your Application date : 22/02/2022

Sir ,

I have to inform you that your name has been continued up to 28 Feb 2027 on the medical register of this Council, maintained under the provision of Maharashtra Medical Council Act 1965.

It is stated that the Medical Graduates / Practitioners registered with this Council will be required to approach this Council two months in advance before expiry of the above period for next renewal of registration as per section 23(C) of the Maharashtra Medical Council (Amendment) Act 2003.

Signature Valid

Digitally Signed by SANJAY BALASAHEB  
DESHMUKH (REGISTRAR OF  
MAHARASHTRA MEDICAL COUNCIL)  
Date : 4/27/2022 4:54:32 PM

Registrar

Maharashtra Medical Council

# National Board of Examinations

New Delhi, India

herby certifies that

**Batankar Anil Arvind**

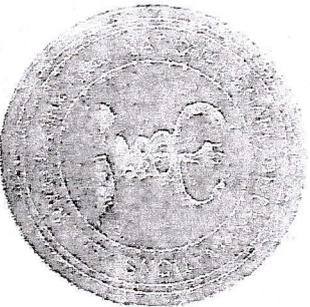
has pursued the prescribed course of postgraduate training and has demonstrated his proficiency at an examination held in June, 1999 to the satisfaction of the Board.

Accordingly, on this Eighteenth day of November in the year Two Thousand the Board admits him at the Convocation held at Delhi as a

**Diplomate of the National Board**

for the practice of

**Obstetrics & Gynaecology**



(Dr. Shashi Rahela )  
Controller of Exam.

*Dr. Shashi Rahela*

*A. Palankar*

(Prof. A. Rajasakaran )  
President

*Prof. A. Rajasakaran*

# Nagpur University



आयुःशल्य विज्ञान स्नातक  
 (Bachelor of Medicine &  
 Bachelor of Surgery)  
 (Faculty of Medicine)

—\*\*—

*This is to certify that*  
*Shri Amit Arvind Patankar*  
 obtained the degree of आयुःशल्य विज्ञान स्नातक  
 (Bachelor of Medicine & Bachelor of Surgery)  
 in this University in the Examination  
 of Winter 1992.

Nagpur :  
 5<sup>th</sup> January, 1996

*M. S. Patankar*  
 Vice-Chancellor

*M. S. Patankar*



# Maharashtra Medical Council, Mumbai

Registration No. : 73333

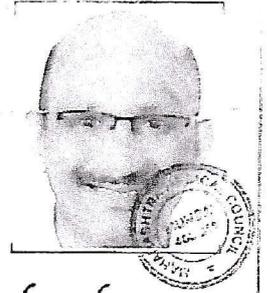
Dated: 25/01/1994

## ADDITIONAL MEDICAL QUALIFICATION REGISTRATION CERTIFICATE

Certificate No. : 0698/2014

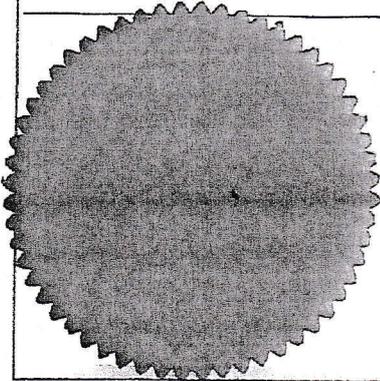
Dated: 15/03/2014

*A Patankar*



*I hereby certify that the following qualification has been  
duly registered in the Medical Register of the Council.*

NAME	ADDITIONAL QUALIFICATION
DR. (Mr.) PATANKAR AMIT ARVIND	D.N.B. (Obsterics & Gynaecology) N.B.E. NEW DELHI, 1999



*[Signature]*

REGISTRAR

*A Patankar*

KRISHNA CHARITABLE TRUST  
(Registered under the Bombay  
Public Trust Act, 1950)  
( Regd. No. E, 285-Satara )

**Krishna Hospital &  
Medical Research Centre**

Near Dhebewadi Road  
Karad, (Dist. Satara)  
Pin 415 110  
Phone : 81666, 81659  
81671, 81676  
Fax. ( 02164 ) 82170

Ref. No. KH/PER/P- 13427 / 97

Date- 26-8-97.

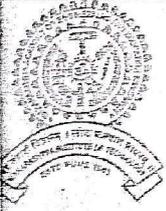
**: C E R T I F I C A T E :**

This is to certify that Dr. Amit A. Patankar has worked in this Institution as Registrar in the Department of Obstetrics and Gynecology for a period of one year. His post was a teaching post and the student to teacher ration was maintained as 1:1.

  
DR. H.R. TATA,  
MEDICAL DIRECTOR.  
K. I. M. S., KARAD.

A Patankar

2 A Patankar



**DR. BHAUSAHEB SARDESAI TALEGAON RURAL HOSPITAL  
AND M.I.M.E.R. MEDICAL COLLEGE**

Talegaon Dabhade, (Stn.) Tal. Maval, Dist. Pune - 410 507.  
Tel. No. : (952114) 228532, 227938, 224272

Ref. No. :

Date :

Date: 02-05-2006

**EXPERIENCE CERTIFICATE**

This is to certify that Dr. Amit Patankar was working as a  
Assistant Professor / Lecturer in the Department of OBGY, since  
01/02/2001 to 31/03/2002, at this Medical College.

He bears a good moral character to the best of our knowledge  
& belief.



*Suresh*  
Dr. Suresh Ghaisas  
Medical Director

MIMER Medical College Talegaon D  
MEDICAL DIRECTOR  
MIMER Medical College

*A Patankar*

*A Patankar*

**Dr. Patankar Medical Foundation**  
**Dr. Patankar Nursing Home**

'Swanand' 986/A/1, Shukrawar Peth,

Opp Saras Baug, Pune – 411002

Ph. 24440787, 24444308

Fax – 020-24464181

This is to certify that Dr. Amit Arvind Patankar was working as lecturer in the Department of Obstetrics And Gynaecology from February 2006 till June 2012.

The institute is an accredited institute for National Board of Examinations, New Delhi and his post was a teaching post.

Date :- 03/03/2011

Place :- Pune

*medha patankar*  
Dr. Mrs. Medha Patankar  
Head Of Department,  
Obstetrics & Gynaecology.  
Dr. Patankar Medical Foundation,

*A Patankar*

*A Patankar*

**Dr. Patankar Medical Foundation**  
**Dr. Patankar Nursing Home**

'Swanand' 986/A/1, Shukrawar Peth,  
Opp Saras Baug, Pune - 411002  
Ph. 24440787, 24444308  
Fax - 020-24464181

This is to certify that Dr. Amit Arvind Patankar was working as Assistant teacher in the Department of Obstetrics And Gynaecology from 01 August 2012 to 31 August 2017.

He was a recognised teacher for the course of Diploma in Obstetrics And Gynaecology (DGO) of College of Physicians and Surgeons of Mumbai.

Date :- 03/09/2017  
Place :- Pune

*A. Patankar*  
Dr. Arvind G. Patankar  
Head Of Institution,  
Dr. Patankar Medical Foundation,



*A. Patankar*

'Swanand' 986/A/1, Shukrawar Peth,  
Opp Saras Baug, Pune - 411002  
Ph. 24444308  
Fax - 020-24464181

This is to certify that Dr. Arvind Patankar was working as lecturer for Reproductive Medicine in the Department of Obstetrics And Gynaecology from January 2012 till December 2017.

The institute is an accredited institute for INDIAN COLLEGE OF OBSTETRICIAN AND GYNAECOLOGIST of The Federation of Obstetric and Gynaecological Societies of India and his post was a teaching post.

Date :- 02/01/2018  
Place :- Pune

*medha patankar*  
Dr. Mrs. Medha Patankar  
Head Of Department,  
Obstetrics & Gynaecology.

*Arvind Patankar*

*Arvind Patankar*

*Arvind Patankar*



**Maharashtra Medical Council,  
Mumbai**

189-A, Anand Complex, 2nd Floor, Sane Gurnji Marg, Arthur Road Naka,  
Chinchpokali(W), Mumbai 400011. Tel 23010668  
<http://www.maharashtramedicalcouncil.in>

No : BRC/REG/73333/2017

Date :  
26/2/2017

Dr. PATANKAR AMIT ARVIND  
986/A/1, SHUKRAWAR PETH, OPP  
SARAS BAUG, PUNE  
411002 MAHARASHTRA.

**Sub : Renewal of Registration No : 73333**

Sir/Madam,

I have to inform you that your name has been continued up to 28/02/2022 on the medical register of this Council, maintained under the provision of Maharashtra Medical Council Act 1965.

It is stated that the Medical Graduates / Practitioners registered with this Council will be required to approach this Council two months in advance before expiry of the above period for next renewal of registration as per section 23(C) of the Maharashtra Medical Council (Amendment) Act 2003.

Your's Truly

(Dr. Dilip Wange)

Registrar

Maharashtra  
Medical Council

*APatankar*

*d APatankar*