

**Maharashtra University of Health Sciences, Nashik**  
**Audiology & Speech Language Pathology**  
**Information of Subject-wise Intake as per College & University**  
**Recognition, Permitted**  
**Seat-Matrix Chart Academic Year 2026 - 2027**

Name of College : AYJNISHD, (D) MUMBAI

Permission obtained for College from Government for Intake Capacity 40+3 (UG) 15 (PG)

UG Degree/PG Degree	No. of seats sanctioned by RCI	Details of Recognition (Whether Temporary or Permanent) If temporary From----- To-----	RCI Letter No. & Date
UG Degree (B.A.S.L.P.)	40 + 03	Temporary 2027-28 to 2030-31	8- A/Policy/(Recog)/2009/RCI dt.14/10/2025
PG Degree			
M. Sc. (Audiology)	15	Temporary 2026-27 to 2029-30	8- A/Policy/(Recog)/2009/RCI dt.14/10/2025
M. Sc. (Speech – Language Pathology)	N.A.	N.A.	N.A.

Any Other, Please Specify: .....

*Smaran Kumar*  
**DIRECTOR** 05/11/26  
 अ.या.जं.रा.वा.श्र.दि.सं.  
**A.Y.J.N.I.S.H.D. (D)**  
 K. C. Marg, Bandra Reclamation  
 Bandra (W), Mumbai - 400 050  
 Dean/ Principal Stamp &  
 Signature

Verified by The LIC Committee Members

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**  
**Audiology and Speech Language Pathology**  
**INFRASTRUCTURE DETAILS OF COLLEGE AND HOSPITAL**

Sr. No.	Particulars to be verified	Details on College Website	Adequate/ Inadequate
<b>College</b>			
1	<b>Building details :</b> Area 19324 Sq.mtr. (Verify land documents & Government permissions documents are uploaded on College Website.) (No Land/ Construction documents shall be submitted to the University. Only deficit information to be pointed out to the University).	Yes	Adequate
2	Dean / Principal's office room, Staff Room (As per Staff strength min size, Administrative Staff Room.	Yes	Adequate
3	<b>All DEPARTMENTS</b> (Audiology & Speech Language Pathology)	Yes	Adequate
4	<b>A) Library :</b> Should accommodate at least 30% of the Institution's UG students, staff & Central Library for PG 2152.78 Sq.Ft.), <b>(Reading Room:</b> Reference room with CBTIV and internet provisions, General Reading Room, No. of Books, No. of Periodicals Subscribed annually National & International, Back Number of Journals (5 mostess entail journals) (2 each in Speech and Audiology and 1 General) (Multiple volumes / issues of one title should be counted as ONE).	Yes	Adequate
	<b>Audio visual Instruments :</b> Appropriate Instruments as per No. and level of Course. Audiovisual Equipment & Facilities : Slide Projector, Overhead Projector, Computer with color printer and other accessories, Software word processing and statistical packages, LCD Projector, Television, Video recorder and Video camera, Details of teaching materials such as models, charts, specimen etc., List of Educational video cassettes, CD-Rom, Slide tape series etc.	Yes	Adequate
	<b>Budget of Library with break up for journal and books :</b>	Yes	Adequate
	<b>Whether photocopy facility is available :</b>	Yes	Adequate
	<b>Whether qualified librarian appointed :</b> (No. of other staff working in library : attach list with name & Designation)	Yes	Adequate
	<b>Working hours of Library :</b> 9.00 am to 8.00 pm.		
	<b>Computer Lab :</b> i) No. of Computers : 4 ii) Internet Facility Yes	Yes	Adequate
	<b>B) PG subject departmental library :</b> Included in Main Library it self.	Yes	Adequate
5	<b>Class Rooms:</b> (Size should be adequate to accommodate) (9 Sq.ft. per student) a) Half the No. of total batches / Course (Min. 2 classroom) (UG) b) Half the No. of total batches / Course (Additional 1 room for each PG) (UG & PG)	Yes	Adequate
6	<b>Room for reception where Patients are registered:</b>	Yes	Adequate
7	<b>Room for case history, Speech Diagnostic Room and Interviews :</b> (6 X 6) Sq.ft. For UG : 5 for 20 intake and 8 for 40 intake For UG & PG: With one PG course 12 and with each additional PG 2extra	Yes	Adequate

8	<b>Speech Lab (Quiet Room) for Diagnostic purposes:</b> (15 X 20) Sq.ft. For UG : 1 For UG & PG: 1+1	Yes	Adequate
9	<b>Recording Room (Sound proof):</b> (10 X 10) Sq.ft. For UG : 1 For UG & PG:1	Yes	Adequate
10	<b>Speech Therapy Rooms / Cabins:</b> (6 X 6) Sq.ft. For UG : 12 *to accommodate 50% of the students For UG & PG: 12	Yes	Adequate
11	- <b>Single sound treated room:</b> - <b>Two Room Audio metric suite with control and test room situation. (Sound Proof. ANSI1977):</b> (10X18) Sq.ft. For UG: for 20 intake One room and for 40 – two rooms. For UG & PG: For each of PG Program i.e., M.Sc. (Audiology)– one room extra.	Yes	Adequate
12	<b>Room for hearing aid trial combination purpose. :</b> (10x15) Sq.ft. For UG : 1 For UG & PG: M.Sc. (Audiology) 1+1	Yes	Adequate
13	<b>Ear mould Lab. :</b> (15x20) Sq.ft. For UG : 1 For UG & PG: 1	Yes	Adequate
14	<b>Individual Work space</b> (with provision for storage facilities) : (10x10) Sq.ft. For UG : 4 For UG & PG Course :8, For UG & 2 PG Course: 12	Yes	Adequate
15	<b>Hearing aid repair lab :</b> (10x10) Sq.ft. For UG : 1 For UG & PG:1	Yes	Adequate
16	<b>Laboratories:</b> Laboratory facility as per patients load <b>I) Audiology (Graduate / Postgraduate) as per M.S.R.:</b> 2 channel Diagnostic Audiometer with Accessories such as earphone, ear cushion combination with adjustable head band, B.C. vibrator, transducers like microphone and matching loudspeakers, Portable Audio meter with Provision of A.C. and B.C. testing : desirable screening audio meter, Clinical Immittance Audiometer (Desk model) with accessories, Portable / Screening impedance, Audiometer, Clinical BSEAR, Otoasoustice mission, Calibration equipment for AC, BC and free field (by possession or access), Different types of Hearing Aids of mild moderate and strong categories body level and ear level, canal and spectacle hearing aid (1 each), FM, Digital, Programmable aids, ILS Asslitive listening devices, IGO and Hearing Aids for hearing aid trial and making electro acoustic measurements, Otoscope, Proformae, Auditory training and Screening Material. <b>II) Speech Pathology (Graduate / Postgraduate) as per M.S.R.:</b> Speech and Language Tests (Tests for differential diagnosis) (English and local language), Proformae, Speech Therapy material I(Indian, Language and English), Toys and Books, Mirrors - size 2' x 3', Portable and Digital tape recorders, Hi-Fi Ampli Deck with speakers and good microphone, Spirometer, Computer PC-AT with VGA Color Monitor, Software for diagnostic/ therapeutic use, Endo stroboscope (by possession or access), EGG, Audio cassettes for training /CDs, obsolete, Tongue depressors.	Yes	Adequate
17	<b>Equipment :</b> (Please attach a separate list of equipment if any)	Yes	Adequate
18	<b>University Examination Infrastructure:</b> a) Examination hall with benches, b)Strong Room i) Area – 300 sq.ft. ii) Shelf, iii) Steel Cupboard – 1, iv) Requirement of CCTV facility as per Exam section, Parking Facility for University vehicle, Guest house facility : Capacity : (No. of) Rooms ...1... .	Yes	Adequate
19	<b>Residential quarter facility for staff:</b> Teaching, Non-teaching, Paramedical & Nursing staff	Yes	Adequate

20	<b>Other facilities:</b> Common Rooms for Boys, Common Room for Girls, Cafeteria, Gymnasium / Gymkhana Facility, Sanitary Facilities : As per requirement separate facilities for girl and boy students and staff, Games & Sports Facilities: Provided / Not Provided, .	Yes	Adequate
21	<b>Hostel Facility:</b> (Hostels for Men and Women to accommodate at least 50% of the student population.) Boys (UG) Capacity: 50 (Area in Sq.ft) 226.76 each Girls (UG) Capacity: 75 (Area in Sq.ft.) 226.76 each, Interns, Canteen Facility, Warden/ Rector, Hygiene, etc. [Note: Verify Canteen Facility is monitored as per MUHS Circular No.18/2019 dated 19/03/2019.]	Yes	Adequate
	<ul style="list-style-type: none"> <li>As per Central Council Norms/ University Norms, above Infrastructure must be available at College and all information with photographs must be uploaded on College Website.</li> <li>If Infrastructure is available, then mark "Adequate" &amp; do not attach any documents.</li> <li>In case of "Inadequate", it must be mark as "Inadequate" with evidence.</li> </ul>		

*Suman Kumar*  
Dean/ Principal Stamp & Signature

DIRECTOR

अ.या.जं.रा.वा.श्र.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

Verified by The LIC Committee Members

**Maharashtra University of Health Sciences,  
Nashik  
Audiology and Speech Language  
Pathology Trust Deed / Bylaws / Registration  
Certificate**

**Registration Certificate (Trust / Hospital (Bombay Nursing Act))  
(If applicable)**

**Faculty BASLP & M.Sc. (Audiology)**

**Name of College/Institute AYJNISHD (D)**

Name of Trust / Society	
Registration Certificate	Society :- ACT XX1 OF 1860  Hospital (Bombay Nursing Act) :- NA
Name of the College / Institute (As per First Affiliation letter)	: AYJNIIH, MUMBAI
Address	: K.C. Marg, Bandra Reclamation, Bandra West, Mumbai 400 050
Email ID	: <a href="mailto:nihhac@yahoo.com">nihhac@yahoo.com</a> <a href="mailto:ayjnihh-mum@ayjnihh.nic.in">ayjnihh-mum@ayjnihh.nic.in</a>
Telephone / Mobile No.(s)	: 022-69102151/152
Website	: <a href="http://www.ayjnishd.nic.in">www.ayjnishd.nic.in</a>
College Code	: 181101 (new) and 6105005 (old)

*Suman Kumar*  
25/2/26  
Dean/ Principal Stamp & Signature

**DIRECTOR**

**अ.या.जं.रा.वा.श्र.दि.सं.**

**A.Y.J.N.I.S.H.D. (D)**

**K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050**

**Verified by The LIC Committee Members**

**Maharashtra University of Health Sciences, Nashik**  
**Audiology and Speech Language Pathology**  
**Inspection Committee Report for Academic Year 2026- 2027**  
**Details of Library**

**Faculty BASLP & M.Sc. (Audiology)**  
**Name of College/Institute :**

1	Total Books	18062
2	Last year purchase	37 Books
3	Invoice & payment details	Invoice and payment details enclosed
4	List of Journal subscribed year	List Attached

*Suman Kumar*  
 Dean/ Principal Stamp

& Signature  
**DIRECTOR**

अ.या.जं.रा.वा.श्र.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
 Bandra (W), Mumbai - 400 050.

Verified by the LIC Committee Members

**Maharashtra University of Health Sciences, Nashik**  
Name of College: .AYJNISHD(D), MUMBAI

Academic Year 2026. - 2027

Faculty : BASLP &amp; M.Sc.(Audiology)

Intake : 40 (BASLP) &amp; 15 (M.Sc.(Aud) )

College Code : 6105005 (old) /181101(New)

**Teaching Staff : (UG/PG)**

Name Of Course	Professor		Reader or equivalent / Associate Professor		Lecturer / Assistant Professor		Speech Pathologist / Audiologist (Grade I) (Clinical Supervisor)		Speech Pathologist / Audiologist (Grade II)		Lecturer in Clinical Psychology Part time		One Medical faculty as per requirement of the paper Part time		Lecturer in Linguistics Part time		Total								
	Req.	Exist	Deficit	Req.	Exist	Deficit	Req.	Exist	Deficit	Req.	Exist	Deficit	Req.	Exist	Deficit	Req.	Exist	Deficit							
BASLP (20 seats)																									
BASLP (20 + 20 seats)																									
BASLP + MASLP (20 + 10 seats)																									
BASLP + MASLP / M.Sc. (Aud.)/ M.Sc. (SLP) (40 + 15 seats)	01	01	Nil	01	01	Nil	06	06	06	06	04	07 (3 excess)	05	01	01	01	01	01	01	01	01	Nil	21	19	02
M.Sc (Aud.) / M.Sc. (SLP) as addition to BASLP (40 seats) and MASLP (15) with 10 seats for each specialized M.Sc.																									

(As per Staffing Pattern published by the University vide Academic Notification No. 01/2011 Dated : 07/01/2011 )

Date : .....

*Suman Kumar*  
**DIRECTOR**

Dean/ Principal Stargp. & **श्री. अ. ज. न. शि. ड. (ड)**

Verified by the LIC Committee Members

**A.Y.J.N.I.S.H.D. (D)**  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050.

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester I

Subject: Introduction to Speech language Pathology

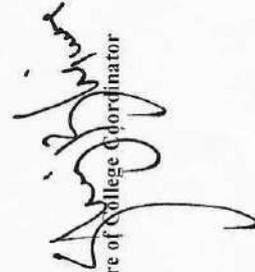
UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

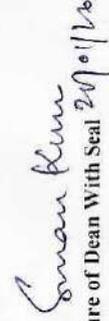
Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs			Total				Temp/Regular	Letter No. & Date	
								Asst. prof	Asso Prof.	Prof.	Total						
1	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/5/1991	Open	3/12/2024	4 yrs			4 yrs	3 yrs	Regular	Yes	MUHS/PG/ E- 6/402/2025 dt. 13/5/2025		

Name & Signature of College Coordinator



Signature of Dean With Seal 20/01/26



DIRECTOR

अ.श.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050


## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester I

Subject: Introduction to Audiology

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs						Temp/Regular	Letter No. & Date	
								Asst. prof	Asso Prof	Prof.						
1	Dr. Shivraj Laldas Bhinte	HOD/Audiology	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			Regular	Yes	MUHS/PG/E-6/402/2025 dt.13/5/2025			
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			Regular	yes	MUHS/PG/E-6/402/2025 dt.13/5/2025			
3	Mrs. Kaviya S.	Lecturer	8328394688	kavyaprema1001@gmail.com	5/10/1997	Open	14/07/2025	2 yrs 6 mths			Contractual	No				

Name &amp; Signature of College Coordinator

  
 Signature of Director with Seal

**A.Y.J.N.I.S.H.D. (D)**  
 K. C. Marg, Bandra Reclamation  
 Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester I

Subject: Anatomy &amp; Physiology of Speech &amp; Hearing

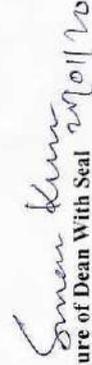
UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs	Asst. prof	Asso Prof				Temp/Regular	Letter No.& Date	
I	Sanghamitra Dey	Lecturer	7980654688	sanghamitrad ev90@yahoo. in	19/8/1997	Open	27/06/2025	8 mths			8 mths	No				

  
Name & Signature of College Coordinator

  
Signature of Dean With Seal

DIRECTOR

अ.भा.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester I

Subject: Clinicals in Speech Language Pathology

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs	Asso Prof	Prof.				Temp/Regular	Letter No.& Date	
1	Mr. Joyanta Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	26-07-2024	2 years			2 yrs	No				

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.रा.जं.रा.वा.श.वि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 059

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . :BASLP Semester I

Subject: Clinicals in Audiology

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

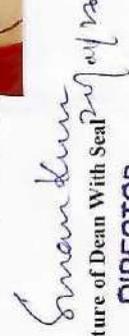
Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Reconciliation by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Dr. Shivraj Laldas Bhimte	HOD/Audiology	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Yes		MUHS/PG/E/6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	yes	Regular	MUHS/PG/E/6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.या.जं.रा.वा.श.वि.सं.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester II

Subject: Neurology

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular/Contractual	Letter Regular No. & Date	
1	Sanghamitra Dey	Lecturer	7980654688	sanghamitradey90@yahoo.in	19/8/1997	Open	27/06/2025	8 mths								

Name & Signature of College Coordinator



*Suman Kumar*  
Signature of Dean With Seal 20/01/26

DIRECTOR

अ.या.जं.रा.वा.श.वि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester II

Subject: Speech Language Pathology

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)	
								UG yrs	Asst. prof	Asso Prof.				Temp/Regular	Letter No.& Date
1	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs	0 yrs	0 yrs	3 yrs	Yes	Regular	MUHS/PG/ E-6/402/2025 dt.13/5/2025	



Name & Signature of College Coordinator

Signature of Dean With Seal 20/01/22

DIRECTOR

अ.य.ज.न.स.ह.सि.स.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester II

Subject: Audiology

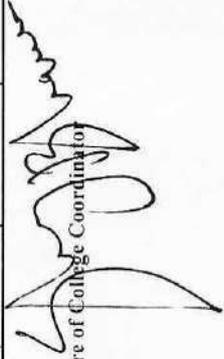
UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

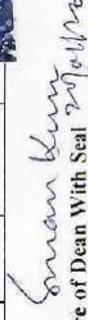
Intake Capacity 43 (BASLP)

Sl. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs	Asst. prof	Asso Prof	Prof.				Total	Temp/Regular	
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs				5 yrs	Regular	yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	
2	Mrs. Kaviya S.	Lecturer	8328394688	kavyaprema1001@gmail.com	5/10/1997	Open	14/07/2025	2 yrs 6 mths				2 yrs 6 mths	Contractual	No			

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

श.या.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty :BASLP Semester II

Subject: Practicals (Speech Language Pathology)

UG

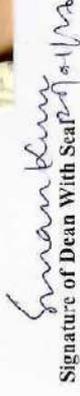
Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Reconciliation by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof.	Prof.				Temp/Regular	Letter No.& Date	
1	Mr. Joyanta Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	Lecturer 26-07-2024	2 yrs			2 yrs	No				
2	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs			4 yrs	Yes	MUHS/PG- E- 6/402/2025 dt.13/5/2025			



Name &amp; Signature of College Coordinator



Signature of Dean With Seal

DIRECTOR

अ.या.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester II

Subject: Practicals in Audiology

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular/Contractual	Letter No. & Date	
1	Dr. Shivraj Lalidas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2024	10 yrs			14	Yes	Regular	MUHS/PG/ E- 6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			1-5	yes	Regular	MUHS/PG/ E- 6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator

*Suman Chalotra*

*Suman Chalotra*  
Signature of Dean With Seal

DIRECTOR

अ.चा.जं.रा.बा.श्र.दि.स.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester III

Subject: Voice &amp; Its disorders

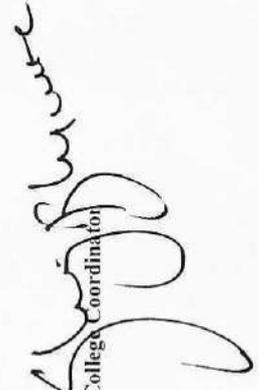
UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG Teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Mr. Joyantia Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	26-07-2024	2 years			2 yrs	No				

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.प्र.सं.रा.वा.श.वि.सं.

A.Y.J.N.I.S.H.D.(D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester III

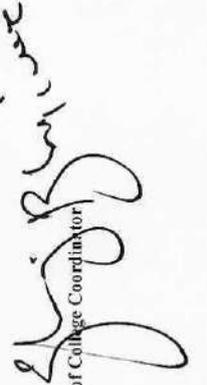
Subject: Speech Sound Disorders

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof.	Prof.				Temp/Regular	Letter No. & Date	
1	Dr. Suman Kumar	Director	9883193184	sumannihh@gmail.com	2/12/1978	OBC	2/1/2004 & 22-05-2024 at AYJNISHD(D)	18 yrs			17 yrs	yes	Regular	MUHS/PG/E-6A/1137/2024 dated 28/05/2024		
2	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs			3 yrs	Yes	Regular	MUHS/PG/E-6/402/2025 dt. 13/5/2025		
3	Sanghamitra Dey	Lecturer	7980654688	sanghamitradey90@yahoo.in	19/8/1997	Open	27/06/2025	8 mths					Contractual			

Name & Signature of College Coordinator  


Signature of Dean With Seal  
  
**DIRECTOR**

अ.या.वं.रा.वा.श.दि.सं.  
**A.Y.J.N.I.S.H.D. (D)**

K. C. Marg, Bandra Reclamation  
 Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester III

Subject: Diagnostic Audiology - Behavioral Tests

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof.	Asso Prof	Prof.				Temp./Regular	Letter No.& Date	
1	Dr. Shivraj Laldas Bhimite	HOD/Audiol.	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes	MUHS/PG/ E- 6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	yes	MUHS/PG/ E- 6/402/2025 dt.13/5/2025		

*Suman Chalotra*

Name &amp; Signature of College Coordinator

*Suman Chalotra*

Signature of DIRECTOR With Seal

अ.या.जं.रा.वा.श.वि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester III

Subject: Amplification Devices

UG

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)	
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No.& Date
1	Dr. Shivraj Laldas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			14	Regular	Yes		MUHS/PG/E-6/402/2025 dt.13/5/2025



Name & Signature of College Coordinator

Signature of Dean With Seal

DIRECTOR

अ.वा.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester III

Subject: Clinicals in Speech Language Pathology

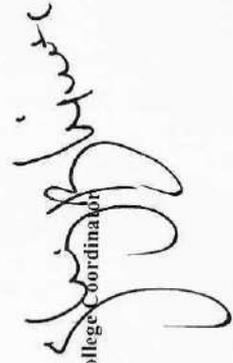
Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

UG

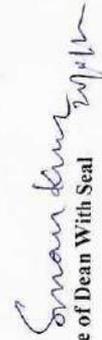
Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs	Asst. prof	Asso Prof				Temp/Regular	Letter No. & Date	
1	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs			3 yrs	Regular	Yes	Temp/Regular	MUHS/PG/ E-6/402/2025 dt.13/5/2025	

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.भा.चं.रा.का.प्र.वि.चं.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . :BASLP Semester III

Subject: Clinicals in Audiology

UG

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)	
								Asst. prof	Asso Prof	Prof.	Total				Temp/Regular	Letter No.& Date
1	Dr. Shivraj Laldas Bhirme	HOD/Audiol	9769399711	asl_p_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes		MUHS/PG/E-6/402/2025 dt.13/5/2025	
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.su manchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	yes		MUHS/PG/E-6/402/2025 dt.13/5/2025	



Name & Signature of College Coordinator

Signature of Dean With Seal

DIRECTOR

अ.या.जं.रा.व्.श.दि.सं.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester IV

Subject: Motor Speech Disorders in Children

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

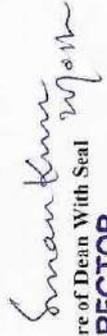
Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular/Contractual	Letter No.& Date	
1	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs			3 yrs	Regular	Yes	MUHS/PG/E-6/402/2025 dt.13/5/2025		
2	Sanghamitra Dey	Lecturer	7980654688	sanghamitradey90@yahoo.in	19/8/1997	Open	27/06/2025	8 mths			8 mths	Contractual	No			

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.या.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W) Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester IV

Subject: Child Language Disorders

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.	Total				Temp/Regular	Letter No. & Date	
1	Dr. Suman Kumar	Director	9883193184		2/12/1978	OBC	2/1/2004 & 22-05-2024 at AYJNISHD(D )		18 yrs	18 yrs	17 yrs	Regular	yes	Regular	MUHS/PG/ E- 6A/1137/20 24 dated 28/05/2024		
2	Mr. Joyanta Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	26-07-2024	2 years		2 yrs		Regular	No				



Name &amp; Signature of College Coordinator



Signature of Dean With Seal

DIRECTOR

अ.भा.वं.रा.वं.अ.वि.वं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester IV

Subject: Diagnostic Audiology - Physiological Tests

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

UG

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No & Date	
1	Dr. Shivraj Laldas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Yes		MUHS/PG/E-6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.su manchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025		



Name &amp; Signature of College Coordinator

Signature of Dean With Seal

DIRECTOR

अ.वा.जं.रा.वा.अ.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester IV

Subject: Implantable Hearing Devices

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
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1	Dr. Shivraj Laldas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2024	10 yrs			14	Yes		MUHS/PG/E-6/402/2025 dt.13/5/2025		

*Shivraj Bhimte*  
Name & Signature of College Coordinator

*Suman Kumar Singh*  
Signature of Dean With Seal

DIRECTOR

अ.य.ज.न.श.आ.वि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester IV

Subject: Clinicals in Speech Language Pathology

UG

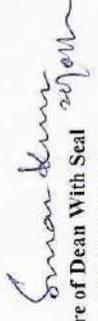
Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
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1	Dr. Suman Kumar	Director	9883193184		2/12/1978	OBC	2/1/2004 & 22-05-2024 at AYJNISHD(D)			18 yrs	18 yrs	17 yrs	Regular	yes	Regular	MUHS/PG/ E- 6A/113720 24 dated 28/05/2024	
2	Sanghamitra Dey	Lecturer	7980654688	sanghamitradey90@yahoo.in	19/8/1997	Open	27/06/2025	8 mths			8 mths		Contractual	No			



Name &amp; Signature of College Coordinator



Signature of Dean With Seal

DIRECTOR

अ.या.जं.रा.वा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W) Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . :BASLP Semester IV

Subject: Clinicals in Audiology

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
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1	Dr. Shivraj Laldas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	21/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes	MUHS/PG/E-6/402/2025 dt.13/5/2025			
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*Suman Chalotra*

Name &amp; Signature of College Coordinator

*Suman Chalotra*  
Signature of DIRECTOR Seal 20/01/2025

अ.रा.जं.रा.वा.श.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester V

Subject:: Structural Anamolies &amp; Speech Disorders

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Reconfirmation by MUHS (Yes/No)		Photograph with Signature
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1	Dr. Suman Kumar	Director	9883193184	sumanhh@gmail.com	2/12/1978	OBC	2/1/2004 & 22-05-2024 at AYNISH(D)	18 yrs			18 yrs	Regular	yes	Regular	MUHS/PG/E-6A/1137/2024 dated 28/05/2024		
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Name &amp; Signature of College Coordinator



 Signature  
 अ.या.जं.रा.वा.श.वि.सं.  
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## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester V

Subject: Fluency &amp; Its Disorders

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
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1	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs	3 yrs	3 yrs	Regular	Yes	MUHS/PG/ E-6/402/2025 dt.13/5/2025			

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ. प्र. जं. रा. व. श. वि. सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

**MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK**

**DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)**

Year 2026-27

Faculty : BASLP Semester V

Subject: Pediatric Audiology

UG

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)	
								Asst. prof	Asso Prof	Prof	Total				Temp/Regular	Letter No. & Date
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.su manchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	1-5 yr	yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	



Name & Signature of College Coordinator 

  
Signature of Dean With Seal 

**DIRECTOR**

अ.य.जं.रा.वा.श.वि.सं.

A.Y.J.N.I S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . :BASLP Semester V

Subject: Aural Rehabilitation in Children

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.	Total				Temp/Regular/Contractual	Letter No.& Date	
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs				yes	Regular	MUHS/PG/ E-6/402/2025 dt.13/5/2025			
2	Mrs. Kaviya S.	Lecturer	8328394688	kavyapremal007@gmail.com	5/10/1997	Open	14/07/2025	2 yrs 6 mths				No	Contractual				

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

डा. का. जं. रा. का. श. वि. सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester V

Subject: Clinicals in Speech Language Pathology

UG

Name of the College : Al Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Reconciliation by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof				Temp/Regular	Letter No. & Date	
1	Sanghamitra Dey	Lecturer	7980654688	sanghamitradey90@yahoo.in	19/8/1997	Open	27/06/2025	8 mths			8 mths	Contractual	No			



Name &amp; Signature of College Coordinator



Signature of Dean With Seal 27/06/2025

DIRECTOR

अ.सा.जं.रा.वा.श.दि.मं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester V

Subject: Clinicals in Audiology

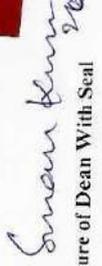
Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

UG

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature	
								UG yrs							Regular/Contractual	Temp/Regular		Letter No. & Date
								Asst. prof	Asso Prof	Prof.	Total							
1	Dr. Shivraj Laldas Bhimite	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes		MUHS/PG/E-6/402/2025 dt.13/5/2025			
2	Mrs Suman Chalotra	Lecturer	9834330267	audiologist sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024 5 yrs				5 yrs	Regular	yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025			

Name &amp; Signature of College Coordinator



  
Signature of Dean With Seal

26/01/26

DIRECTOR

अ.शा.जं.रा.वा.अ.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VI

Subject: Motor Speech Disorders in Adults

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Reconnection by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Dr. Manisha Choudhury	Lecturer	7291879558	manishachoudhury4@gmail.com	11/3/1991	Open	3/12/2024	4 yrs	4 yrs	4 yrs	3 yrs	Regular	Yes	MUHS/PG/E-6/402/2025 dt.13/5/2025		
2	Sanghamitra Dey	Lecturer	7980654688	sanghamitradey90@yahoo.in	19/8/1997	Open	27/06/2025	8 mths		8 mths		Contractual	No			

*Sanghamitra Dey*

Name &amp; Signature of College Coordinator

*Sanghamitra Dey*

Signature of Dean With Seal

DIRECTOR

अ.य.जं.रा.बा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VI

Subject: Language Disorders in Adults

UG

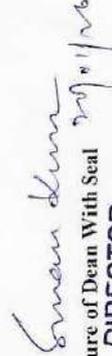
Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Mr. Joyanta Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	26-07-2024	2 years			2 yrs	No				



Name &amp; Signature of College Coordinator



Signature of Dean With Seal

DIRECTOR

अ.य.जं.रा.व.अ.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050.

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VI

Subject: Aural Rehabilitation in Adults

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

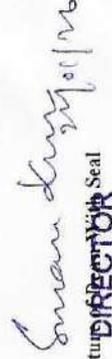
Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist@marchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			yes	Regular	Regular	MUHS/PG/ E-6/402/2025 dt.13/5/2025		
2	Mrs. Kaviya S.	Lecturer	8328394688	kavyapremal001@gmail.com	5/10/1997	Open	14/07/2025	2 yrs 6 mths			No	Contractual				

Name & Signature of College Coordinator



Signature of Director



Signature of Director Seal

अ.या.जं.रा.वा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VI

Subject: Audiology in Practice

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

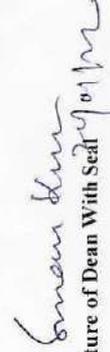
Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Dr. Shivraj Laldas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Yes	Regular	MUHS/PG/ E-6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.रा.सं.रा.अ.सि.स.

A.Y.J.N.I.S.H.D.(P)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VI

Subject: Clinicals in Speech Language Pathology

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Mr. Joyanta Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	26-07-2024	2 years			2 yrs	No	Regular	MUHS/PG/E-6A/1137/2024 dated 28/05/2024		

Name & Signature of College Coordinator

*Joyanta Chandra Mandal*

Signature of Dean With Seal

*Suman Kumar*

**DIRECTOR**

डॉ. ए. जे. न. अ. अ. अ. अ. अ.

Dr. A. J. N. S. H. D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

X

Faculty : BASLP Semester VI

Subject: Clinicals in Audiology

UG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof	Total				Temp/Regular	Letter No.& Date	
1	Dr. Shivrani Laladas Bhimte	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes	Temp/Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025		



Name &amp; Signature of College Coordinator


Signature of Dean With Seal  
DIRECTOR

अ.या.जं.रा.वा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VIII

Subject: Clinicals in Speech Language Pathology

UG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.	Total				Temp/Regular/Contractual	Letter No & Date	
1	Dr. Suman Kumar	Director	9883193184	sumannihh@gmail.com	2/12/1978	OBC	2/1/2004 & 22-05-2024 at AYJNISHD(D)		18 yrs		18 yrs	17 yrs	Regular	yes	Regular	MUHS/PG/E-6A/1137/2024 dated 28/05/2024	
2	Mr. Joyanta Chandra Mandal	Lecturer	8240117189	joyantachmandal@gmail.com	2/12/1990	SC	26-07-2024	2 years			2 yrs		Regular	No	Regular	MUHS/E-6/UG/181101/7437/2016 dated 13/12/2016	



Name &amp; Signature of College Coordinator



Signature with Seal

अ.य.ज.रा.वा.श.वि.स.,

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : BASLP Semester VIII

Subject: Clinicals in Audiology

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

UG

Intake Capacity 43 (BASLP)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								UG yrs			Total				Temp/Regular	Letter No. & Date	
								Asstl prof	Asso Prof	Prof.							
1	Dr. Shirvraj Laldas Bhume	HOD/Audiol	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes		MUHS/PG/ E- 6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	yes		MUHS/PG/ E- 6/402/2025 dt.13/5/2025		

*Suman Kumari*  
Signature of Dean With Seal

Signature of Dean With Seal 20/04/26

अ.या.जं.रा.वा.श.वि.सं.  
A.Y.J.N.I.S.H.D. (P)

K. C. Marg, Banora Reclamation

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc (Audiology)-SEM I

Subject: Auditory Physiology (A 101 M)

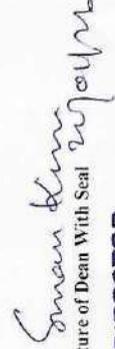
PG

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 15 M.Sc (Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/ No	Details of PG teacher Recognition by MUHS (Yes/No) Temp/ Regular Letter No. & Date	Photograph with Signature	
								Asst. prof	Asso Prof	Prof.						
1	Dr. Shivrani Lalidas Bhimie	Reader & HOD/ Audiology	9769399711	aslp_shivra@vsnl.com	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	1 yr	Regular	Yes	Regular MUHS/PG/E-6/402/2025 dt.13/5/2025	
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist_sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	1.5 yrs	Regular	yes	Regular MUHS/PG/E-6/402/2025 dt.13/5/2025	

  
Name & Signature of College Coordinator

  
Signature of Dean With Seal

DIRECTOR

अ.या.जं.रा.वा.अ.दि.सं.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050.

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) Sem. I

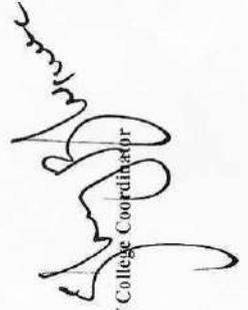
Subject: Physiology Assessment of Hearing (A 102 M)

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

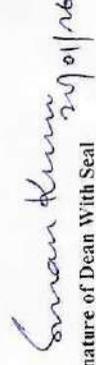
PG

Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No.& Date	
1	Dr. Shivraj Laldas Bhimte	Reader & HOI/Audiology	9769399711	ssip_shiv84@yahoo.co.in	21/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	
2	Mr. Mohd. Shammir Ansari	Lecturer (Sp.&Hg.)	8850265971	msansari5000@yahoo.com	15/9/1971	OBC	As Lecturer 06/07/2001	25 yrs			25 yrs	Regular	yes	Regular	MUHS/E-6/6144/2073 /07 dated 13/4/2007	



Name & Signature of College Coordinator



Signature of Dean With Seal

DIRECTOR

अ.वा.वं.रा.वा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audio) - Sem I

Subject: Minor Optional (A 105 MO)

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

PG  
Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify)	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment Temp./Regular/Contractual	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
							Asst. prof	Asso Prof	UG yrs	Total				Temp/Regular	Letter No. & Date	
1	Dr. Shivraj Lajdas Bhintre	HOD/Audiology	9769399711	aslajd_bhintre@vsnl.com	21/1/1984	SC	10 yrs		10 yrs	10 yrs	1 yr	Yes	Regular	MUHS/PG/E-6/402/2025 dt: 13/5/2025		

Name & Signature of College Coordinator

Signature of Dean With Seal

DIRECTOR

अ.या.जं.रा.वा.श्र.वि.सं.  
A.Y.J.N.I.S.H.D. (D)  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . M.Sc (Audiology)-SEM I

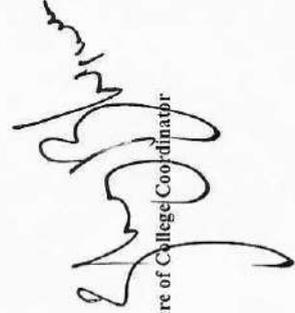
Subject: Clinicals in Audiology (A 106 M)

PG

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 15 M.Sc (Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	



Name &amp; Signature of College Coordinator


  
Signature of Dean With Seal

DIRECTOR

अ.रा.ज.रा.वा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . M.Sc (Audiology)-SEM II

Subject:Auditory Perception (EDC000080001201)

PG

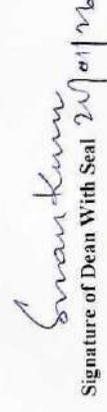
Intake Capacity 15 M.Sc (Audiology)

Name of the College : All Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Divyangjan), Mumbai

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof.	Prof.				Temp/Regular	Letter No. & Date	
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	



Name &amp; Signature of College Coordinator



Signature of Dean With Seal 27/01/26

DIRECTOR

अ.या.जं.रा.वा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

## DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty . M.Sc (Audiology)-SEM II

Subject:: Auditory Disorders (EDC000080001202)

PG

Intake Capacity 15 M.Sc (Audiology)

Name of the College : Ali Yavar Jung National Institute of Speech &amp; Hearing Disabilities (Diyangjan), Mumbai

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/Regular/Contractual	Temp/Regular	
1	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	

  
Name & Signature of College Coordinator

  
Signature of Dean With Seal 20/01/26  
DIRECTOR

अ.य.जं.रा.श.श.दि.स.  
A.Y.J.N.I.S.H.D. (D)  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Semester II

Subject: Electrophysiology Assessment (EDC000080001203)

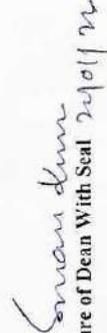
PG

Name of the College : Ali Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 15 (M.Sc. Audiology)

Sl. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so)	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
							ASST. Prof.	Asso Prof	UG yrs				Temp/Regular	Letter No. & Date	
1	Dr. Shivraj Laldas Bhimte	HOD/Audi	9769399711	asld_shiv84@yahoo.co.in	2/1/1984	SC	10 yrs	10 yrs	10 yrs	1 Yr	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025		

  
Name & Signature of College Coordinator

  
Signature of Dean With Seal 24/01/25

**DIRECTOR**  
अ.रा.वं.रा.वा.श.दि.स.  
**A.Y.J.N.I.S.H.D. (D)**  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem II

Subject: Advances in the Management of Hearing Loss (EDC000080001204)

PG

Intake Capacity 15 (M.Sc. Audiology)

Name of the College : Ali Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment Temp./Regular/ Contractual	University Approval Status Yes/ No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof/ Prof.	Total				Temp/Regular	Letter No.& Date	
1	Dr. Shivraj Laldas Bhimite	HOD/Audi	9769399711	aslp_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs	10 yrs	10 yrs	1 yr	Yes		MUHS/PG/E/6/402/2025 dt:13/5/2025		

Name & Signature of College Coordinator

Signature of Dean With Seal

DIRECTOR

अ.रा.जं.रा.बा.श.दि.स.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem III

Subject: Genetics of Hearing and Pediatric Audiometry (A. 301)

PG  
Intake Capacity 15 (M.Sc. Audiology)

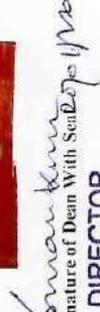
Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)	Photograph with Signature
								Asst. prof	Asso Prof	Prof.	Total					
1	Dr. Shivraj Lakdas Bhimre	Reader & HOD/ Audiology	9769399711	aslp.shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			10 yrs	Regular	Yes	MUHS/PG/E-6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanch alotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs			5 yrs	Regular	Yes	MUHS/PG/E-6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator



Signature of Dean With Seal/Logo



DIRECTOR

अ.या.जं.रा.वा.श.वि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem III

Subject: Implantable Auditory Devices (A 302)

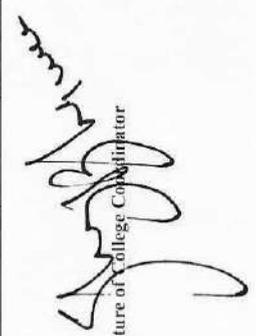
PG

Name of the College : Ali Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment Temp./Regular/ Contractual	University Approval Status Yes/ No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Ug yrs	Asso Prof	Prof.				Temp/Regular	Letter No. & Date	
1	Dr. Shivraj Laldas Bhirmte	Reader & HOD/ Audiology	9769399711	ashiv84@yahpo.co.in	21/1/1984	SC	7/2/2025	10 yrs			10 yrs	1 yr	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt:13/5/2025	
2	Mohd. Shamim Ansari	Lecturer (Sp.&Hg.)	8850265971	msansari5000@yahoo.com	15/9/1971	OBC	As Lecturer 06/07/2001				25 yrs	19 yrs wef 8/2/2007	Regular	yes	Regular	MUHS/E-6/614A/2073 /07 dated 13/4/2007	

Name & Signature of College Coordinator



Signature of Dean With Seal  
**DIRECTOR**  
**अ.वा.जं.रा.वा.श.दि.सं.**  
**A.Y.J.N.I.S.H.D. (D)**  
**K. C. Marg, Bandra Reclamation**  
**Bandra (W), Mumbai - 400 050**

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem III

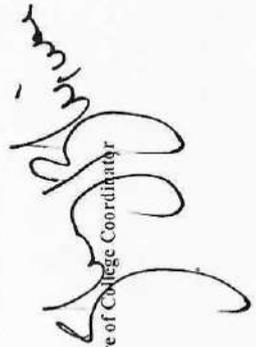
Subject: Speech Perception (A 303)

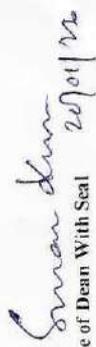
PG

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.	Total				Temp/Regular	Letter No. & Date	
1	Dr. Shivrati Lalidas Bhimte	Reader & HOD/ Audiology	9769399711	asfa_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs	10 yrs	10 yrs	10 yrs	19 yrs	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt. 13/5/2025	
2	Mohd. Shamim Ansari	Lecturer (Sp. & Hg.)	8850265971	msansari5060@yahoo.com	15/9/1971	OBC	As Lecturer 06/07/2001	25 yrs	25 yrs	25 yrs	19 yrs	19 yrs	Regular	yes	Regular	MUHS/E-6/614A/2073/0 7 dated 13/4/2007	

  
Name & Signature of College Coordinator

  
Signature of Dean With Seal 20/01/26

**DIRECTOR**  
अ.रा.वं.रा.वा.प्र.वि.स.  
A.Y.J.N.I.S.H.D. (D)  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem III

Subject: Auditory Processing Disorders (A 304)

PG

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai

Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Ug yrs	Asso Prof	Prof.				Temp/Regular	Letter No.& Date	
1	Dr. Shivraj Lalkdas Bhinte	Reader & HOD/ Audiology	9769399711	asip_shiv@yashoda.co.in	21/1/1984	SC	7/2/2025	10 yrs	10 yrs			19	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025	
2	Mohd. Shamim Ansari	Lecturer (Sp.&Hlg)	8850265971	msansari50307@yashoda.com	15/9/1971	OBC	As Lecturer 06/07/2001	25 yrs	25 yrs			19 yrs	Regular	Yes	Regular	MUHS/E-6/614A.2073/07 dated 13/4/2007	



Name & Signature of College Coordinator



Signature of Dean With Seal

DIRECTOR

अ.वा.जं.रा.वा.श.दि.सं.  
A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem III

Subject: Vestibular System & Its Disorder (A 305)

Name of the College : Ali Yavar Jung National Institute of Speech & Hearing Disabilities (Diywangjan), Mumbai

PG

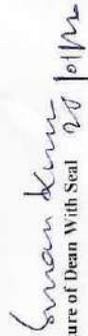
Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment Temp./Regular/ Contractual	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No) Temp/Regular Letter No & Date	Photograph with Signature
								Asst. prof	Asso Prof	Prof.					
1	Dr. Shivraj Laldas Bhiante	Reader & HOD/ Audiology	9769399711	asp_shiv84@vahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs		10 yrs	1 yr	Yes	Regular MUHS/PG/E-6/402/2025 dt.13/5/2025		
2	Mrs. Suman Chalotra	Lecturer	9834330267	audiologist.sumanchalotra@gmail.com	11/30/1995	Open	11/7/2024	5 yrs		5 yrs	1.5 yrs	Yes	Regular MUHS/PG/E-6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator



Signature of Dean With Seal



DIRECTOR

अ.या.वं.रा.वा.श.वि.सं.

A.Y.J.N.I.S.H.D. (D)

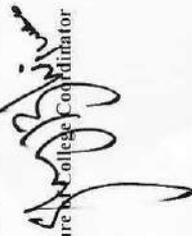
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

**DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)**

**Year 2026-27**

Faculty : M.Sc. (Audiology) - Semester IV Subject: Dissertation  
 Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan), Mumbai Intake Capacity 15 (M.Sc. Audiology)

Sr. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify)	Date of Appointment	Teaching Experience				Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.	Total				Temp/Regular	Letter No.& Date	
1	Dr. Suman K	Director	9883193184	sumannihh@gmail.com	2/12/1978	OBC	2/1/2004 & 22-05-2024 as Director		17 yrs	17 yrs	16 yrs	Regular	Yes	Regular	MUHS/PG/E-6A/1137/2024 dated 28/05/2024		
2	Mohd. Shamim Ansari	Lecturer (Sp.&Hg.)	8850265971	msansari5000@yahoo.com	15/9/1971	OBC	As Lecturer 06/07/2001		25 yrs	25 yrs	19 yrs	Regular	Yes	Regular	MUHS/E-6/614A/2073/07 dated 13/4/2007		
3	Dr. Shivraj Lalidas Bhimte	Reader &HOD/ Audiology	9769399711	asip_shiv84@yahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs			1 yr	Regular	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator 

Signature of Dean   
**DIRECTOR**  
 अ.या.वं.रा.वा.श्र.वि.सं.  
**A.Y.J.N.I.S.H.D. (D)**  
 K. C. Marg, Bandra Reclamation  
 Bandra (W), Mumbai - 400 050

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK

DETAIL INFORMATION OF SUBJECTWISE TEACHING STAFF (Approved + Non Approved)

Year 2026-27

Faculty : M.Sc. (Audiology) - Sem IV

Subject: Audiology in Practice (EDC000080001401)

Name of the College : All Yavar Jung National Institute of Speech & Hearing Disabilities (Diyangjan), Mumbai

PG  
Intake Capacity 15 (M.Sc. Audiology)

Sl. No.	Name of Teaching Staff	Designation	Mob. No.	E-mail ID	Date of Birth	Whether belongs to Reserved Category (if so specify category)	Date of Appointment	Teaching Experience			Total Teaching Experience in Years of PG	Type of Appointment	University Approval Status Yes/ No	Details of PG teacher Recognition by MUHS (Yes/No)		Photograph with Signature
								Asst. prof	Asso Prof	Prof.				Temp/ Regular/ Contractual	Letter No. & Date	
1	Dr. Shivraj Laldas Bhimte	Reader &HOD/ Audiology	9769399711	aslp_shiv84@vahoo.co.in	2/1/1984	SC	7/2/2025	10 yrs		10 yrs	1 yr	Yes	Regular	MUHS/PG/E-6/402/2025 dt.13/5/2025		

Name & Signature of College Coordinator

Signature of Dean With Seal

DIRECTOR

अ.या.जं.सं.वा.श.दि.सं.  
A.Y.J.N.I.S.H.D. (D)  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

Maharashtra University of Health Sciences, Nashik  
Audiology and Speech Language Pathology

Name of College: .AYJNISHD(D), MUMBAI  
Total Non-Teaching / Administrative Staff required Audiology & Speech Language Pathology College

Electronic Engineer			Ear Mould Technician (Can be appointed before the commencement of II year BASLP)			Stenographer			Record Keeper			Class IV			Librarian / Staff		
Req	Ext	Def	Req	Ext	Def	Req	Ext	Def	Req	Ext	Def	Req	Ext	Def	Req	Ext	Def
01		Nil	01	02	Nil	01	01	Nil	01	01	Nil	03	04	Nil	01	03	Nil
<b>TOTAL</b>																	

Req. - Required Ext. - Existing Def. - Deficiency

*Suman Kumar*  
Dean/ Principal Stamp & Signature

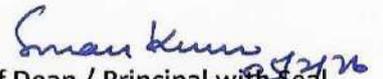
**Maharashtra University of Health Sciences, Nashik**  
**Audiology and Speech Language Pathology**  
**List of (UG & PG) Part Time Teacher / Visiting Faculty**

Name of the College AYJNISHD(D)

Sr. No.	Name of the Teachers	Subject	Post
1.	Mr. Tanvir M. Daphedar	Electronics	Assistant Professor
2.	Mr Aniket Ingale	Statistics	Assistant Professor
3.	Dr. Ashish Castellino	Anatomy & Physiology of Hearing	Consultant ENT
4.	Dr. Kamal Parasaram	Otolaryngology/ENT	Consultant ENT Surgeon
5.	Ms. Niveditha Varma	Linguistics & Phonetics	Lecturer
6.	Dr. Puja Rajesh Mehta	Neurology	Lecturer
7.	Mr. Tanvir M. Daphedar	Technology in Audiology	Assistant Professor
8.	Mr Aniket Ingale	Research Methodology	Assistant Professor

(Anatomy and Physiology, Clinical Psychology, Medical Faculty as per requirement of the paper, Lecturer in Linguistics (Part time) & Visiting Faculty for Anatomy and Physiology subjects Teachers)

Verified by The LIC Committee Members

  
Signature of Dean / Principal with Seal

**DIRECTOR**  
**अ.या.जं.रा.बा.श्र.दि.सं.**  
**A.Y.J.N.I.S.H.D. (D)**  
**K. C. Marg, Bandra Reclamation**  
**Bandra (W), Mumbai - 400 050**

**Maharashtra University of Health Sciences,  
Nashik Inspection Committee Report for Academic  
Year 2026 - 2027**

**Webinar / Workshop/ CME/ Activities/ Performed in Last One Year.**

Faculty: BASLP/M.SC.(AUDIOLOGY)

Name of the College / Institute: Ali Yavar Jung National Institute Of Speech & Hearing Disabilities (Divyangjan) Mumbai-50.

No. of Webinars Arranged, Guest Lectures & CME/ Workshops (Publish details on college website)

Sr No	Details of Webinar / Workshop/ CME/ Activities/ Performed Date & Title of Programme
1.	Awareness Programme on Health Care Guidance on occasion of World Autism Awareness Day - Parents of Children with Autism and Children with Disabilities
2.	Parent Training Programme - Parents of Children with Disabilities and Trainee Teachers
3.	Parent Training Programme - Parents of Children with Hearing Impairment
4.	Training Programme on Sparsh 4.0 (Four live sessions) - Rehabilitation Professionals
5.	Orientation Programme on World Thalassaemia Day - Students and Staff of the Institute
6.	Parent Training Programme - Parents of Children with Disabilities and Trainee Teachers
7.	Orientation on National Disability Information Helpline Service (NDIHS) 14456 on the occasion of World Accessibility Awareness Day - Persons with Disabilities, their Parents and Teachers
8.	Workshop on Basic Indian Sign Language - Students of the Institute
9.	Awareness Programme on Occasion of World Schizophrenia Day - Caregivers of the Person with Schizophrenia and staff of KEM Hospital
10.	Parent Training Programme - Parents of Children with Hearing Impairment
11.	Training Programme on Sparsh 4.0 (Five live sessions) - Rehabilitation Professionals
12.	Free Coaching Scheme for Railway Recruitment Board Exams - Persons with Disabilities
13.	Training Programme on Sparsh 4.0 (Four live sessions) - Rehabilitation Professionals
14.	Orientation Programme on Occupational Therapy for Improving Daily Living Skills - Parents of Children with Hearing Impairment
15.	Awareness Programme on account of World Sickle Cell Day by Poster Making Competition - Students of Primary School

16.	Awareness Programme on – A way to Physical and Mental Well Being for Divyangjan on account of International Yoga Day - Persons with Disabilities and Professionals working for the Disabled
17.	An Awareness Programme on Nutrition, Food Safety and Hygiene on account of World Food Safety Day - Anganwadi Workers
18.	Parent Training Programme - Parents of Special Children and Special Teachers
19.	Parent Training Programme - Parents of Children with Hearing Impairment
20.	Functional Communication Skills in ISL and Basic Digital Literacy - Parents of Children with Hearing Impairment
21.	Parent Training Programme : Pre-Maths - Parents of Special Child and Teacher Trainees
22.	Prevention, Early Identification and Rehabilitation of the Persons with Speech and Hearing Disabilities - Teachers, SHG Group Leaders & Grass Root Level Workers
23.	Parent Training Programme - Parents of Children with Hearing Impairment
24.	CRE on Recent Updates in ADIP Scheme - ASLPs, Special Educators and Parents of Children with Hearing Impairment
25.	Basic Indian Sign Language - Private Employers
26.	CRE on Shaping Future Education – Reforms and Innovations in Teacher Education - Special Educators (HI)
27.	Parents Training Programme Theme : Language Development Through Story Telling - Parents of Special child and Teacher Trainees
28.	CRE on Methods and Techniques for Teaching Language to Children with Hearing Impairment - Special Educators (HI)
29.	Handling Issues in Divyangjan : A Holistic Approach - Parents of Children with Disabilities
30.	Speech and Language Stimulation for Children with Speech and Language Development Delay Secondary to Autism - Parents of Children with Autism
31.	Seminar on Inclusive Education of Children with Special Needs - Regular and Special School Teachers
32.	Speech and Language Stimulation for Children with Speech and Language Development Delay Secondary to Hearing Impairment - Parents of Children with Hearing Impairment
33.	Enhancing Rehabilitation Through Augmentative and Alternative Communication - Speech & Hearing IERPs and Special Educators
34.	CRE on Functional Communication Skills in ISL - SSA Teachers
35.	Parent Training Programme - Parents of Children with Hearing Impairment
36.	Engagement of Children with Disabilities in Various Activities at Home - Parents of the Children with Disabilities
37.	Advancement and Challenges in Duchenne Muscular Dystrophy: A Global and Indian Perspective on eve of World Duchenne Muscular Dystrophy Day - Students and Staff of the Institute
38.	Speech and Language Disability Certification - BASLP Students
39.	Home Based Activities to Improve Speech and Language in Children with Speech and Language Disorders - BASLP Students

40.	Parents Training Programme Theme : Language Development for Hearing Impairment - Parents of Special child and Teacher Trainees
41.	Orientation of Caregivers of Cases with Neuro Communication Problems - Caregivers and Patients
42.	CRE on Literacy Development for CwDHH - Special Educators
43.	CRE on DHVANI Teaching Learning Material to Develop Academic Skills in Young Deaf Children - Special Educators
44.	Early Identification of Hearing Loss - Nurses of Govt. College
45.	Neonatal Hearing Screening and Importance of Early Identification of Hearing Loss - Nurses of Govt. College
46.	CRE on Curricular Activities at School Level in Special Schools for CwHI - Special Educators
47.	Workshop on Welfare Schemes of Central and State Govts. and Facilities and Concessions for Persons with Disabilities - Persons with Disabilities, Parents, Special Educators, Social Workers and Volunteers
48.	State Level Awareness Generation Programme on Accessible Media Technology for Inclusive Education vis-à-vis NEP 2020 - Media Professionals, Special Educators and Students of Mass Media
49.	CRE on Early Identification and Intervention of Children with Deaf Blindness - Special Educators
50.	CRE on Functional Communication Skills in Indian Sign Language - Special Teachers (SSA)
51.	Importance of Nutrition and Healthy Eating Habits for CwSN - Parents of the Children with Disabilities
52.	Orientation Programme on Nirmaya Health Insurance Scheme for PwDs - Parents of PwDs
53.	Orientation Programme on Dyslexia - BASLP Students
54.	Mental Health in Work place - Psychologists, Staff and students of AYJNISHD
55.	Uniquely CP - Parents of CP Children, Staff and students of AYJNISHD
56.	Navigating Independence Celebrating White Cane Day and Empowering Persons with Visual Impairments - Staff and Students of AYJNISHD
57.	Disability Rehabilitation - Nursing Students
58.	CRE on Development of Reading and Writing Skills of Young Hearing Impaired Children - Special Educators (HI)
59.	Skill Development for PwDs - Parents of Persons with Disabilities
60.	Standing Tall – Challenges and Solutions in Life in Empowering Persons with Dwarfism - Students and Faculty from Film Club of Gurunank College, Mumbai and students & Staff of AYJNISHD
61.	Reply Interpreting and Telephone/Video Interpreting - Institute Students of DISLI & DTISL Courses
62.	Improving Daily Living Skill - Parents of Children with Cross Disabilities
63.	Parent Training Programme – Language Development for Hearing Impairment - Parents of Children with Hearing Impairment
64.	Early Intervention and Management of Persons with Stroke in Terms of Prevention of Speech Impairment - CMOs from 21 districts, Nursing students, Doctors and Health Workers

65.	Parent Training Programme - Parents of Children with Hearing Impairment
66.	Orientation on Disability Rehabilitation - Anganwadi Workers, Grassroot Level Workers & ASHA Workers
67.	Orientation on Disability Rehabilitation - Anganwadi Workers, Grassroot Level Workers & ASHA Workers
68.	Orientation on Disability Rehabilitation - Anganwadi Workers, Grassroot Level Workers & ASHA Workers
69.	CRE on CBR and Advocacy in the field of Disability - Special Educators and Rehabilitation Workers
70.	CRE on Methods and Techniques of Teaching Language - Special Educators
71.	Seminar on Inclusive Education - Special Educators and Rehabilitation Workers
72.	Parents Training Programme Theme: Language Development for Hearing Impairment - Parents of Special Child & Teacher Trainees
73.	Financial Literacy - Persons with Disabilities
74.	CRE on Orientation Programme on Disability Certification - Rehab. Professionals
75.	Apps for Treatment of Aphasia - ASLP Students
76.	CRE on Indian Sign Language - Rehab. Professionals
77.	CRE on Understanding 21 Disabilities included in revised PWD Act - Disability Professionals
78.	Training Programme on Sparsh 5.0 (Two live sessions) - Rehabilitation Professionals
79.	Surgical Methods for Voice Disorders - ASLP Students
80.	Augmentative and Alternative Communication for Autism Rehabilitation - ASLP Students
81.	Awareness on Prevention, Identification and Management for Persons with Hearing Impairment - Regular School Teachers, Health Workers, Anganwadi Workers and Parents
82.	Awareness on Prevention, Identification and Management for Persons with Hearing Impairment - Regular School Teachers, Health Workers, Anganwadi Workers and Parents
83.	Parent Training Programme - Parents of Children with Hearing Impairment
84.	Statistical Analysis and Research Techniques for Audiology & Speech Pathology - ASLP Students
85.	Seminar on Inclusive Education in respect of NEP 2020 - Students and Faculties of Prasanta Chandra Mahalanabis College, Kolkata
86.	Training Programme on Sparsh 5.0 on Auditory Hierarchy - Rehabilitation Professionals
87.	Recent Advances in Audiological Sciences - BASLP, MSc Students, Faculty and Clinical Staff of AYJNISHD
88.	Accessible Media Technology for Inclusive Education Vis-à-vis National Educational Policy 2020 - Professionals and Students from the field of Rehabilitation, Media, Social Science & Law

89.	Recent Advances in Cochlear Implant - BASLP, MSc Students, Faculty and Clinical Staff of AYJNISHD
90.	CRE on App Based Fluency Management - ASLP Students.
91.	Orientation Programme on Prevention, Early Identification and Rehabilitation for PWDs - Nurses
92.	Training Programme on Sparsh 5.0 on ISD - Rehabilitation Professionals.
93.	Evidence Based Practice in the Treatment of Speech and Language Disorders - ASLP Students
94.	Electro Acoustic Analysis of Hearing Aids - ASLP Students.
95.	Parents Training Programme Theme: Directed Activities - Parents of Special Child & Teacher Trainees.
96.	Training Programme on Sparsh 5.0 on Listening Strategies for CI Recipients - Rehabilitation Professionals.
97.	Training Programme on Indian Sign Language - Teachers and Parents.
98.	Parent Training Programme - Parents of Children with Hearing Impairment
99.	Training Programme on Sparsh 5.0 on Developing Listening Skills in CI Recipients - Rehabilitation Professionals.
100.	Parent Training Programme - Parents of Children with Disabilities.
101.	Training Programme on Indian Sign Language - Teachers and Parents.
102.	CRE on Orientation Cum Awareness on Disability Information Line and UDID Benefits - Rehabilitation Professionals.
103.	Training Programme on Indian Sign Language - Teachers and Parents.

*Suman Kumari*  
Dean/ Principal  
Stamp & Signatur

DIRECTOR  
अ.या.जं.रा.वा.श्र.दि.सं.  
A.Y.J.N.I.S.H.D. (D)  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

**Maharashtra University of Health Sciences, Nashik**  
**Inspection Committee Report for Academic Year 2026 - 2027**  
**Attendance Details/ Research Details/ Welfare Scheme Details**

**Faculty : BASLP/M.SC. (AUDIOLOGY)**

**Name of College/Institute : ALI YAVAR JUNG NATIONAL INSTITUTE OF SPEECH & HEARING  
 DISABILITIES (DIVYANGJAN) MUMBAI-50.**

1	Attendance	}	Month-wise Biometric attendance to be uploaded by the college on College Website
	Teaching Staff		
	Non teaching staff		
	Hospital Staff		
	UG & PG Students		
2	Project		
	Research Articles/Publications		List attached
	Research Award (Student/Teacher)		List attached
3	<b>Utilization of Student Welfare Schemes :-</b>		
	Earn and Learn Scheme		NO
	Dhanwantri Vidyadhan Scheme		NO
	Sanjivani Student Safety Scheme		NO
	Student Safety Scheme		NO
	Book Bank Scheme		NO
	Savitribai Phule Vidyadhan Scheme		NO
	Bahishal Shikshan Mandal Scheme		NO
4	<b>Sport participants/Other Activities:</b>		
	i) Information of Student(s) who participated University level & State level Avishkar Competition.		NO
	ii) Information of Student(s) who participated in Regional Sport Competition & State level Sports Competition.		NO
	iii) Information of Student(s) who participated in Cultural Activities.		NO
	iv) Does the college have NSS Unit?		NO
5	Whether "Swaccha Bharat Abhiyan" implemented in college		YES

**Dean/ Principal Stamp & Signature**

**Maharashtra University of Health Sciences, Nashik**  
**Audiology and Speech Language Pathology**  
Inspection Committee Report for Academic Year 2026 – 2027  
AISHE Certificate Details

Name of College/Institute AYJNISHD(D), MUMBAI

College / Institute Code of AISHE C13967

Certificate Date with reference No.: 14/08/2025 C-13967-2024

The Certificate details to be verified on the College web site

Verified by the LIC Committee Members

*Suman Kumar 05/11/25*  
Dean/ Principal Stamp & Signature

**DIRECTOR**  
अ.या.जं.रा.वा.श्र.दि.सं.  
**A.Y.J.N.I.S.H.D. (D)**  
K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050

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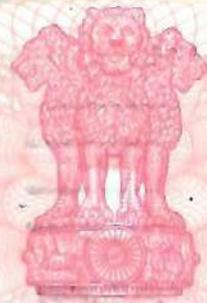


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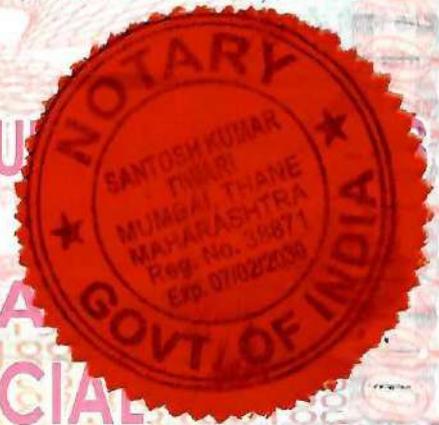
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Sub Treasury Office  
Vasai  
08 JAN 2026  
Addl. Treasury Officer

ANNEXURE- XII

DECLARATION

Audiology and Speech Language Pathology (To be prepared on a Stamp Paper Rs.100)

08/01/26

I, the Director of the Ali Yavar Jung National Institute of Speech & Hearing Disabilities (Divyangjan) solemnly states on affirmation, that the information provided by me in Inspection Format as well as uploaded on College Website alongwith all Annexures is true and correct to the best of my knowledge. The said information is provided to me by the concerned teachers and duly verified by me. It is further submitted the teachers information attached in respective Annexure-VI are not working in / at any other College /Institute or presented themselves at any inspection for the Academic Year 2025-2026 as per my knowledge and information provided by the concerned teachers. The teachers in the Annexure - VI are staying in the same city / town / village where the College / Institute is situated or adjacent to the city / town / village, where the College/Institute is situated and having the valid proof of residence of the said city / town / village. The teachers in the Annexure- VI are not practicing in College working hours or out-side the City where the College /Institute is situated.

*Suman Kumar*



I am further hereby declare that every information or contents in this Inspection Format is based on the information provided by the concerned teachers and endorsed by me after due verification and the same is/are absolutely true and correct. If at any stage it is revealed that any information or content given in this declaration is not true and correct, in such event the undersigned/ the concerned teacher as the case may be, shall be liable for disciplinary action or penal action or Affiliation of the College shall be withdrawal, as the case may be.

This declaration is voluntarily signed by me on 16<sup>th</sup> day of January, 2026 at Bandra, Mumbai

Date : 16/01/2026

Place : Mumbai



Signature  
of

Dean/Princi  
pal Name

of the

Signatory-

(with Seal of the College /  
Institute) DIRECTOR

अ.या.जं.रा.वा.श्र.दि.सं.

A.Y.J.N.I.S.H.D. (D)

K. C. Marg, Bandra Reclamation  
Bandra (W), Mumbai - 400 050.

BEFORE ME

*Santosh Kumar Tiwari*

SANTOSH KUMAR TIWARI  
NOTARY MUMBAI, THANE  
MAHARASHTRA  
(GOVT. OF INDIA)



19 JAN 2026