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# MGM INSTITUTE OF HEALTH SCIENCES

(Deemed to be University u/s 3 of UGC Act, 1956)

**Accredited by NAAC with 'A++' Grade**

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## Application for Recognition as P.G. Teacher

(Version 12/2023)

- Name of Teacher Dr./ Mr./ Ms. \_\_\_\_\_  
Current Designation: \_\_\_\_\_ Current Department: \_\_\_\_\_  
College: \_\_\_\_\_  
Email ID: \_\_\_\_\_ Mobile No.: \_\_\_\_\_
- Date of Birth : (DD/MM/YY) \_\_\_\_\_ Age : Years \_\_\_\_\_ Months \_\_\_\_\_
- Registration Number and Date [ NMC/MMC / Other State Medical Council/INC/ MNC/ State OTPT Council/ State Paramedical Council/ RCI/others]  
U.G. \_\_\_\_\_ P.G. \_\_\_\_\_  
Superspeciality : \_\_\_\_\_ PhD : \_\_\_\_\_
- Level of Educational qualifications: (UG / PG Diploma / PG Degree / Super specialty / Ph. D. / Fellowship/ Other)

Level	Title of Qualification	Name of University	Year of Passing*

\*(For Internship associated programs, mention the year of Internship Completion as year of Passing.)

5. Teaching Experience (Post PG):

Sr. No	Designation	Name of College/ Institute	Period		Total Teaching Experience
			To	From	
1					
2					
3					
4					
5					

6. Name of PG Speciality for which recognition is sought: \_\_\_\_\_

- If the PG qualifying degree is different than the speciality for which PG Teacher recognition is required, kindly mention the regulatory council norms which you have fulfilled to consider such request (Attach relevant document).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. If already approved PG teacher from previous/current University. Yes/No : \_\_\_\_\_

If Yes Details: \_\_\_\_\_

I hereby declare that the information given in the application as it relates to me is true and correct.

Place:

Date:

Signature of the Applicant

**(To be submitted through, the Head of the Department and Head of Institute.)**

The above faculty has fulfilled all criteria / Norms of respective Statutory Council to be recognized as a PG teacher.

Signature of the Head of Department  
of the Subject in the College / Institute

Signature of the Dean / Principal  
& Stamp of the College / Institution

**ANNEXURE:**

- 1) Degree certificate UG & PG
- 2) Regulatory body Registration certificate UG & PG
- 3) Valid continuation of registration with respective Council
- 4) UG Teacher recognition letter
- 5) Previous PG Teacher approval letter (faculty who were working in other institute)
- 6) Name change Gazette copy (if applicable)
- 7) Relevant document if point No.06 is applicable.