FOR FELLOWSHIP/CERTICATE COURSE(S) FOR A.Y. 2024 - 2025

(As per provision of the Maharashtra University of Health Sciences Act, 1998 and University rule / Guidelines)

| Date of Inspection | 1: | |
|--------------------|----|--|
| Date of Hispection | • | |

1. Name(s) of the Fellowship/Certificate Course(s)

| Sr. No | Name of the Fellowship /Certificate Course | Course Started From the Academic Year | Intake Capacity Sanctioned by the University | Name of Mentor and Contact Details |
|-----------|---|---|--|--|
| 1 | Certificate Course In Modern Pharmacology for Homeopathic Practitioners | 2017-18 | 50 | |

(Attach separate List if Necessary)

2. Year wise number of students admitted to Fellowship/Certificate Course during last 5 years

| Sr. No | Academic Year | Name of Fellowship / Certificate Course | Intake Capacity | No. Of Students Admitted (In Figure only) |
|-----------|----------------|---|--------------------|---|
| 1 | A.Y. 2018-2019 | Certificate Course In Modern Pharmacology for Homeopathic Practitioners | 50 | 50 |
| 2 | A.Y. 2019-2020 | Certificate Course In Modern Pharmacology for Homeopathic Practitioners | 50 | 44 |
| 3 | A.Y. 2020-2021 | Certificate Course In Modern Pharmacology for Homeopathic Practitioners | 50 | 50 |
| 4 | A.Y. 2021-2022 | Certificate Course In Modern Pharmacology for Homeopathic Practitioners | 50 | 50 |
| 5 | A.Y. 2022-2023 | Certificate Course In Modern Pharmacology for Homeopathic Practitioners | 50 | 50 |

