



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
Morane (PL), Sakri Road,
Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **981** /ACPMMC/Dhule

Date : **10 / 05 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs~~ Agrawal Aniket Sandeep.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20...**19**..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191023**.....
Provisional Registration Number **PR/5043/2020**..... of State Council as
Maharashtra Medical Council, Mumbai

That Mr / ~~Miss~~ / ~~Mrs~~ Agrawal Aniket Sandeep..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year** duration i.e. for **365** days from date **25** / **02** / **2020**
to date **23** / **02** / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- **10 / 05 / 2021**

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A.C.P.M. Medical College, Dhule.

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE,
DHULE - 424001. [M.S.]



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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 745 / ACPMMC/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that ~~Mr.~~ / Miss / ~~Mrs.~~ Ahire Punam Tarachand
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191024.....
Provisional Registration Number PR14677/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That ~~Mr.~~ / Miss / ~~Mrs.~~ Ahire Punam Tarachand..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year.... duration i.e. for 365.... days from date 25.... / 02.... / 2020
to date 23.... / 02.... / 2021.. as per the Central Council and University Norms.
During this period ~~his~~ / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus ~~he~~ / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 30 / 03 / 2021

Place :- Dhule

Sp Patel
Dr. Shraddha Patel

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

D
Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 645 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **AHIRE SWARNIL KISAN**... has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20..19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ...0116191025..... Provisional Registration Number ..P.R./5233/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **AHIRE SWARNIL KISAN**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of ...1..YEAR.. duration i.e. for ...365..... days from date ...25... / ...02... / .2020 to date ...23... / ...02... / 20 21. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 22 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
ACPM MEDICAL COLLEGE
DHULE - 424001. [M.S.]



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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 903 /ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Ansari..Namaan..Arshi..Jalaluddin has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20...19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ...0.1.1.6.1.9.1.0.2.8..... Provisional Registration Number ...PR/4675/2020. of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Ansari..Namaan..Arshi..Jalaluddin. has satisfactorily completed Compulsory Rotatory Internship Training Programme of ...1...year... duration i.e. for ...365... days from date ...25... / ...02... / ...2020 to date ...23... / ...02... / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



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**Annasaheb Chudaman Patil
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Fax : (02562) 278027
email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **441** / ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ **Arush Kamboj**
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 **19**..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0.115.12.3349**.....
Provisional Registration Number **PR/4066/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ **Arush Kamboj**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 yr**..... duration i.e. for **365**..... days from date **35**..... / **02**..... / **2020**
to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date : **09 / 03 / 2021**

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **441** / ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ **Arush Kamboj**
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 **19**..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0115123349**.....
Provisional Registration Number **PA/4056/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ **Arush Kamboj**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 yr**..... duration i.e. for **365**..... days from date **35**..... / **02**... / **2020**
to date **23**... / **02**.. / 20 **21**. as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **09 / 03 / 2021**

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. G. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



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Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 435 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Ashutosh Buri
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0115183350.....
Provisional Registration Number PR/5164/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Ashutosh Buri..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020
to date 23..... / 02..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine
A. C. P. M. Medical College, Dhule. (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001 (M.S.)



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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 988 / ACPMMC/Dhule

Date : 12 / 05 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Ayush Kumar
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0114110603.....
Provisional Registration Number PR/5684/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Ayush Kumar..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 12/05/2021

Place:- Dhule

Dr. Prashant Islanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 647 / ACPMMC/Dhule

Date : 22 / 03 / 2021

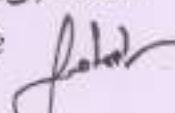
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Bele Tejashree Babarao... has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20..19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ...0116191032..... Provisional Registration Number ...PR/4827/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Bele Tejashree Babarao..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of ...1 year.... duration i.e. for ...365..... days from date ...25... / ...02... / 2020 to date ...23... / ...02... / 2021. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 22 / 03 / 2021


Place:- Dhule


Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]


Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 428 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Bhupendra Singh.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191034.....
Provisional Registration Number PR/5061/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Bhupendra Singh..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year... duration i.e. for 365... days from date 25... / 02... / 2020
to date 23... / 02... / 20 21 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patel

Name of Dean / Principal with sign
DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 798 / ACPMMC/Dhule

Date : 08 / 04 / 2021.

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ Chakravati. Ankit. V......
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20 ~~19~~..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number ...0111182123.....
Provisional Registration Number ..PR.15163.12020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ Chakravati. Ankit. V...... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 03 / 2021.. as per the Central Council and University Norms.
During this period his / ~~her~~ clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 08 / 04 / 2021.

Place :- Dhule

Dr. Prashant. Solanke.

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A.C.P.M. Medical College, Dhule.



Dr. Vijay. B. Patil.

Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 609 / ACPMMC/Dhule

Date : 16 / 03 / 2021

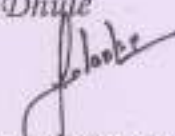
Internship Completion Certificate


This is to certify that Mr. / Miss / Mrs. **CHAUDHARI...ADITI...PATHUBHAI** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number011.61.91.035..... Provisional Registration Number **PR-14072 / 2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **CHAUDHARI...ADITI...PATHUBHAI**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 year**..... duration i.e. for **365**..... days from date **25**... / **02**... / **2020**. to date **24**... / **02**... / **2021**.. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 16 / 03 / 2021

Place :- Dhule


Name of HOD with sign
DR. PRASHAT SOLANKE
Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule (M.S.)


Name of Dean / Principal with sign
DR. VIJAY B. PATIL
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **438** /ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that **Mr. / Miss / Mrs. Chauhan Krishna S.**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20 **19**..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191036**.....
Provisional Registration Number **PR/4842/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That **Mr. / Miss / Mrs. Chauhan Krishna S.**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1yr**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020**
to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **09 / 03 / 2021**

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,

A. C. P. M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 892 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **CHEFRIESH. R. B.**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20....19.... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **011.61.910.37**.....
Provisional Registration Number **PR/5160/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **CHEFRIESH. R. B.**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 Year** duration i.e. for **365** days from date **25** / **02** / **2020**
to date **23** / **02** / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
Morane (PL), Sakri Road,
Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax. : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 1061 / ACPMMC/Dhule

Date : 31 / 05 / 2021

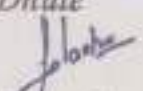
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Dhage Balasaheb Bharatrao has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191038..... Provisional Registration Number PR/5681/2020..... of State Council as Maharashtra Medical Council, Mumbai.

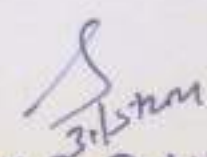
That Mr / Miss / Mrs. Dhage Balasaheb Bharatrao has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 yr..... duration i.e. for 365..... days from date 25..... / 02 / 2020 to date 23..... / 02 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 31 / 05 / 2021

Place :- Dhule


Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community
A.C.P.M. Medical College, Dhule


Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 653 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Fahadullah Khan Khawaja Moinalah Khan has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter, 20 19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number Q116191039..... Provisional Registration Number PR/2892/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Fahadullah Khan Khawaja Moinalah Khan..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year..... duration i.e. for 365..... days from date 25... / 02... / 2020 to date 23... / 02... / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 22 / 03 / 2021

Place :- Dhule

DR. PRASHANT SOLANKE
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

DR. VIJAY B. PATIL
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE

DHULE - 424001, [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 652 / ACPMMC/Dhule

Date : 22 / 03 / 2021

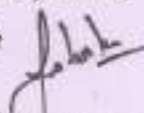
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Gaikwad Deepak Ratiram... has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191041..... Provisional Registration Number PR/4676/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Gaikwad Deepak Ratiram..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year..... duration i.e. for 365..... days from date 25 / 02 / 2020 to date 23 / 02 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 22 / 03 / 2021

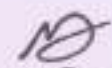
Place :- Dhule


Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]


Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 443 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Garima Shrota.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number ...0116191042.....
Provisional Registration Number ...PR/4708/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Garima Shrota..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020
to date 23..... / 02..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [MS.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [MS.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 646 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Girase Nishantsingh Jaideepsingh..... has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20..19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ..0116191044..... Provisional Registration Number ...PR/4667/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Girase Nishantsingh Jaideepsingh..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of ..1.. year..... duration i.e. for ...365..... days from date ..25.... / ...02... / ..2020 to date ..23... / ...02.... / 20 21. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 22 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 890 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. GOMASE TEJAS GAJANAN
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number Q116191045
Provisional Registration Number PR / 4068 / 2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. GOMASE TEJAS GAJANAN..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year..... duration i.e. for 365..... days from date 25..... / 02..... / 2020
to date 23..... / 02..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B Patil
Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **454** /ACPMMDHule

Date : **10 / 03 / 2021**

Internship Completion Certificate

This is to certify that ~~Mr. / Miss / Mrs.~~ **Govind Sharma**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20 ~~19~~..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **011315241**.....
Provisional Registration Number **PR/5047/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That ~~Mr. / Miss / Mrs.~~ **Govind Sharma**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 yr**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020**
to date **23**..... / **02**..... / **2021**, as per the Central Council and University Norms.
During this period his / ~~her~~ clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **10 / 03 / 2021**

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine
A.C.P.M. Medical College, Dhule, [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 644/ACPMMD/Dhule

Date : 22/03/2021

Internship Completion Certificate

This is to certify that Mr./Miss/Mrs. **Ingole Monali Subhash**... has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20...19..... He/She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ...0116191047..... Provisional Registration Number ...PR/5213/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr/Miss/Mrs. **Ingole Monali Subhash**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of1 year.. duration i.e. for ...365..... days from date ...25... / ...02... / .2020 to date ...23... / ...02... / 20.21 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 22/03/2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001 [M.S.]



Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College, Dhule

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **897** /ACPMMC/Dhule

Date : **29 / 02 / 2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **Tadkao Himanggi Vishnu** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20 **19**..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191048**..... Provisional Registration Number **PR/4836/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **Tadkao Himanggi Vishnu**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 Year**.... duration i.e. for **365**..... days from date **25**..... / **02**... / **2020** to date **23**..... / **02**..... / 20 **21**. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- **29 / 04 / 2021**

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Med
A. C. P. M. Medical College, Dhule.

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE

DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 650 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **JADHAV PRITHI GOKULDASRAO** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20...**19**.... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number**0116191049**..... Provisional Registration Number**PR/4069/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **JADHAV PRITHI GOKULDASRAO**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 year**.... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020** to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule

DR. PRASHANT SOLANKE

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

DR. VIJAY B. PATIL

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College, Dhule

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 916 / ACPMMC/Dhule

Date: 30/04/2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Jagtap Balasaheb Hariram
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number0115183382.....
Provisional Registration NumberPR/5162/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Jagtap Balasaheb Hariram..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of1yr..... duration i.e. for365..... days from date25..... / ..02..... / ..2020.....
to date23..... /02..... / 20 21 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 30/04/2021

Place:- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **442** / ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that **Mr. / Miss / Mrs. Jasleen Kaur** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter, 20 **19**. He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0115123385** Provisional Registration Number **P.R. 5005/2020** of State Council as Maharashtra Medical Council, Mumbai.

That **Mr / Miss / Mrs. Jasleen Kaur** has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 yr** duration i.e. for **365** days from date **25** / **02** / **2020** to date **23** / **02** / **2021** as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date : **09 / 03 / 2021**

Place : **Dhule**

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule.

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 746 / ACPMMC/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / M/s / M/s. Jaybhaye Prafull Nirruhi has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0115183387..... Provisional Registration Number PR/5881/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / M/s / M/s. Jaybhaye Prafull Nirruhi has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year duration i.e. for 365 days from date 25 / 02 / 2020 to date 23 / 02 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 30 / 03 / 2021

Place:- Dhule

Dr. Shradha Patel

Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule - 424001

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

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email : acpmmedhule@gmail.com

web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 528 / ACPMMC/Dhule

Date : 10 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / Mrs. Joshi. Dhairya. Bhanatkumar has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / ~~She~~ is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191054..... Provisional Registration Number PP/5260/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / Mrs. Joshi. Dhairya. Bhanatkumar..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020 to date 23..... / 02..... / 2021 as per the Central Council and University Norms. During this period his / ~~her~~ clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 10 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay. B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE

DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 434 / ACPMMC/Dhule

Date : 09 / 03 / 20 21

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Tugele Sayush Shyam has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20 19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191055 Provisional Registration Number PR 1493712020 of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Tugele Sayush Shyam has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year duration i.e. for 365 days from date 25 / 02 / 2020 to date 23 / 02 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 09 / 03 / 20 21

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule.

Dr. Vijay B. Patil

Name of Dean / Principal with sign

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
Morane (PL), Sakri Road,
Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. **738** / ACPMMC/Dhule

Date : **30 / 03 / 2021**

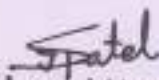
Internship Completion Certificate

This is to certify that Mr. / Miss / ~~Mrs.~~ **Kailash Chand Samota**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20 ~~19~~..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191056**.....
Provisional Registration Number **PR/5041/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / ~~Mrs.~~ **Kailash Chand Samota**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 Year**... duration i.e. for **365**..... days from date **25**..... / **02** / **2020**
to date **23**..... / **02** / **2021**, as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **30 / 03 / 2021**

Place :- Dhule


Dr. Shraddha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule, MS


Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001, (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 739 / ACPMMC/Dhule

Date : 30 / 03 / 2021

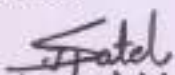
Internship Completion Certificate

This is to certify that Mr. / Miss / M/s. Kamble Ankita Digambar has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191057..... Provisional Registration Number P.R./4991/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / M/s. Kamble Ankita Digambar has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year duration i.e. for 365 days from date 25 / 02 / 2020 to date 23 / 02 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 30 / 03 / 2021

Place :- Dhule


Dr. Shraddha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]


Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 1791 / ACPMMC/Dhule

Date : 16/06/2021

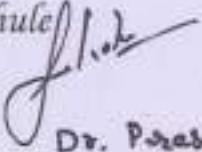
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Kanade Shreya Avinash.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191058.....
Provisional Registration Number PR/4974/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Kanade Shreya Avinash..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 25 / 02 / 2020
to date 05 / 05 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

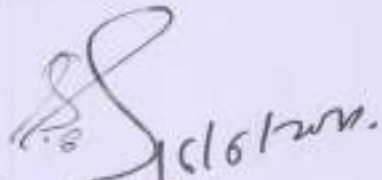
Date :- 16 / 06 / 2021

Place :- Dhule


Dr. Praeshant Solanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine
A. C. P. M. Medical College, Dhule.




Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 741 / ACPMMC/Dhule

Date : 30 / 03 / 2021

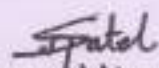
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Kankul Shringi.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191059.....
Provisional Registration Number PR/5302/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Kankul Shringi..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 Year.... duration i.e. for 365.... days from date 25.... / 02.. / 2020
to date 23.... / 02.... / 2021.. as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 30 / 03 / 2021

Place :- Dhule


Dr. Shraddha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule.


Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Fax. : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 648 /ACPMMC/Dhule

Date : 22 / 03 / 2021

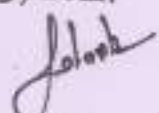
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Kapale... Madhuri... Vijaykumar has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20 19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191060..... Provisional Registration Number PB/4996/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Kapale... Madhuri... Vijaykumar..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1... year... duration i.e. for 365... days from date 25... / 02... / 2020 to date 23... / 02... / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 22 / 03 / 2021

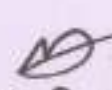
Place :- Dhule


Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A.C.P.M. Medical College, Dhule. [M.S.]


Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 440 /ACPMMC/Dhule

Date : 09 /03 /2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Khadke Shraddha Narayan has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20.19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number0116191062..... Provisional Registration Number PR/50911/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr. / Miss / Mrs. Khadke Shraddha Narayan..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020 to date 23..... / 02..... / 2021. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 09 /03 /2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule.

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001, (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Dhule - 424 001

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Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **737/ACPMMC/Dhule**

Date : **30/03/2021**

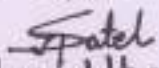
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Khadse Ashwini Sudhakarrao
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191063.....
Provisional Registration Number PR/5062 / 2020..... of State Council as
Maharashtra Medical Council, Mumbai.

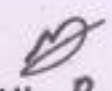
That Mr / Miss / Mrs. Khadse Ashwini Sudhakarrao..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **30 / 03 / 2021**

Place :- Dhule


Dr. Shraddha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule, M.S.


Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
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Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax. : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **448** /ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **Khande Radhika Rameshwar**
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 **19**..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191064**.....
Provisional Registration Number **PR/5086/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **Khande Radhika Rameshwar** has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1.44**..... duration i.e. for **365**..... days from date **25** / **02** / **2020**
to date **23** / **02** / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date : **09 / 03 / 2021**

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community M.
A. C. P. M. Medical College, Dhule.

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M MEDICAL COLLEGE
DHULE - 424001



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax : (02562) 278027
email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 649 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **KORE TEJAS ANIL**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191065**.....
Provisional Registration Number **PR/5049/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **KORE TEJAS ANIL**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020**
to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule

Dr. PRASHANT SOLANKE

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. VITAY. B. PATIL

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
 Memorial Medical College, Dhule**

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 Dhule - 424 001

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 Fax. : (02562) 278027
 email : acpmcdhule@gmail.com
 web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 1781 / ACPMMC/Dhule

Date : 15 / 06 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Kulkarni Jagannath Vijaykumar has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191067..... Provisional Registration Number P.R./4299/2020.... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Kulkarni Jagannath Vijaykumar has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 yr..... duration i.e. for 365..... days from date 25..... / 02... / 2020 to date 23.... / 02... / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 15 / 6 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
 A. C. P. M. Medical college, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A. C. P. M. MEDICAL COLLEGE
 DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 656 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **Latthe... Neha... Chandrakant** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20.19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191068**..... Provisional Registration Number **PR/4994/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **Latthe... Neha... Chandrakant**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 year** duration i.e. for **365** days from date **25 / 02 / 2020** to date **23 / 02 / 2021** as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

**A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]**



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 898 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Mane Rutuja Balasakeb
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20.19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191070
Provisional Registration Number PR/5234/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Mane Rutuja Balasakeb has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

A.C.P.M.M.C.
DHULE - 42

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Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 447 / ACPMMC/Dhule

Date : 09 / 03 / 20 21

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Manika Sharma
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191071.....
Provisional Registration Number PR/4711/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Manika Sharma..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 09/03/20 21

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College, Dhule

Post Box No. 145,
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Dhule - 424 001

Ph. (02562) 276317, 18, 19

Fax : (02562) 278027

email : acpmmedhule@gmail.com

web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 641 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **MHATRE RITESH PRAMOD**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number ...0116191072.....
Provisional Registration Number ...PR/5067/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **MHATRE RITESH PRAMOD**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year**..... duration i.e. for **365**..... days from date **25**... / **02**.. / **2020**
to date **23**... / **02**.. / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 22 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 453 / ACPMMC/Dhule

Date : 10 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ Mohammad Saquib.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20. 19..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191074.....
Provisional Registration Number P.R. 151351.2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr. / ~~Miss~~ / ~~Mrs.~~ Mohammad Saquib..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year... duration i.e. for 365... days from date 25... / 02... / 2020
to date 23... / 02... / 2021 as per the Central Council and University Norms.
During this period his / ~~her~~ clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 10 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign
DEAN,

A. C. P. M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 896 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ **Mahd. Azam**
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **9116191075**
Provisional Registration Number **2215864/2020** of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ **Mahd. Azam** has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year** duration i.e. for **365** days from date **25** / **02** / **2020**
to date **23** / **02** / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 29 / 04 / 2021

Place:- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
ACPM MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 734 / ACPMMC/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / Mrs. Muthal Shubham Dnyaneshwar has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter, 20 ~~19~~..... He / ~~She~~ is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191077..... Provisional Registration Number PR/4950/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / Mrs. Muthal Shubham Dnyaneshwar..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year..... duration i.e. for 365..... days from date 25..... / 02..... / 2020 to date 23..... / 02..... / 20 21..... as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 30 / 03 / 2021

Place:- Dhule

Dr. Shradha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **744/ACPMMC/Dhule**

Date : **30 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Nabeela Tabeen Md. Sarwar
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 **19**..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191078**.....
Provisional Registration Number **PR/5331/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Nabeela Tabeen Mohammed Sarwar has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020**
to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **30 / 03 / 2021**

Place :- Dhule

Dr. Shradha Patel

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **895** /ACPMMC/Dhule

Date : **29** / **04** / **2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **Nade Abhishek Pramod** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20**19**..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191079**..... Provisional Registration Number **PR/4834/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **Nade Abhishek Pramod**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 year**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020** to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date : **29** / **04** / **2021**

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

ACPM MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 427 / ACPMMC/Dhule

Date : 09/03/2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / Mrs. Navdeep
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20 ~~19~~ He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191080
Provisional Registration Number PR/5082/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / Mrs. Navdeep has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 25 / 02 / 2020
to date 24 / 02 / 2021 as per the Central Council and University Norms.
During this period his / ~~her~~ clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 09/03/2021

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 402 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Nikita Mukund Sharma
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191082.....
Provisional Registration Number PR/5291/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Nikita Mukund Sharma..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020
to date 23..... / 02..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign
DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College, Dhule

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Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 899 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that ~~Mr.~~ / Miss / ~~Mrs.~~ **PAGORE PALLAVI DINKAR**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20 ~~19~~..... ~~He~~ / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191084**.....
Provisional Registration Number **PR/5193/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That ~~Mr.~~ / Miss / ~~Mrs.~~ **PAGORE PALLAVI DINKAR**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 yr**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020**
to date **23**..... / **02**..... / 20 **21**..... as per the Central Council and University Norms.
During this period ~~his~~ / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus ~~he~~ / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- / / 20

Place :- Dhule

DR. PRASHANT SOLANKE

Name of HOD with sign

Prof. & H.O.D

Department of Community Med.
A. C. P. M. Medical College, Dhule. (M.S.)

DR. VIJAY B. PATIL

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 431 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ Parmar Pankaj M......
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20..19..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191086.....
Provisional Registration Number PR/5034/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ Parmar Pankaj M...... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 20 21, as per the Central Council and University Norms.
During this period his / ~~her~~ clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [m.c.]

Dr. Vijay B. Pahl
Name of Dean / Principal with sign

DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 643 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **PATIL...ARTJUN...SANTAY**,.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number0.116.191089.....
Provisional Registration Number ...P.R./4840/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **PATIL...ARTJUN...SANTAY**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of ...1.yr..... duration i.e. for ...365..... days from date .25.... / ...02.... / .2020
to date .23.... / ...02.... / 20 21 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 22 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

**A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]**



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 742 / ACPMMC/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that *Mr. / Miss / Mrs. Patil Ashwini Ramesh*...
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... *He / She* is bonafide student of this College / Institute, having University
Examination Permanent Registration Number *Q116191090*.....
Provisional Registration Number *PR/4825/2020*..... of State Council as
Maharashtra Medical Council, Mumbai.

That *Mr / Miss / Mrs. Patil Ashwini Ramesh*..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of *1 year*... duration i.e. for *365*..... days from date *25*... / *02*... / *2020*
to date *23*... / *02*... / *2021* as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 30 / 03 / 2021

Place :- Dhule

Spatel
Dr. Shraddha Patel

Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule

Vijay B. Patil
Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. JMS1



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 894 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Patil Gaurav Dilip.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191091.....
Provisional Registration Number PR/5215/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Patil Gaurav Dilip..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanki
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 655 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. PATIL SARA AJAY.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191093.....
Provisional Registration Number PR/4988/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. PATIL SARA AJAY..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year.... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 20 21 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
Morane (PL), Sakri Road,
Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax : (02562) 278027
email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 747 / ACPMMC/Dhule

Date : 30 / 03 / 2021

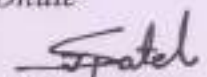
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Patil Shruti Deelip.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191094.....
Provisional Registration Number PR/5194/2020..... of State Council as
Maharashtra Medical Council, Mumbai.


That Mr / Miss / Mrs. Patil Shruti Deelip..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021, as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 30 / 03 / 2021

Place:- Dhule


Dr. Shraddha Patel.
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule


Dr. Vijay B. Patil.
Name of Dean / Principal with sign

DEAN
A.C.P.M.M.E.L. COLLEGE
DHULE - 424001. (MS)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 615 / ACPMMC/Dhule

Date : 16 / 03 / 2021

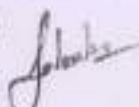
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Patil Tejas Ajay
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19. He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191095
Provisional Registration Number PR/4669/2020 of State Council as
Maharashtra Medical Council, Mumbai.


That Mr. / Miss / Mrs. Patil Tejas Ajay has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 16/03/2021

Place:- Dhule


Dr. Prashant Solanke
Name of HOD with sign

Dr. Prashant Solanke
Department of Community Medicine,
A.C.P.M. Medical College, Dhule, (M.S.)


Dr. Vijay B. Patil
Name of Dean / Principal with sign

Dr. Vijay B. Patil
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424 001, (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 651 / ACPMMC/Dhule

Date : 22 / 03 / 2021

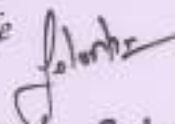
Internship Completion Certificate


This is to certify that Mr. / Miss / Mrs. **PATIL...TEJAS...SANJAY.....** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter, 20..19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ...0116191096..... Provisional Registration Number ..PR / 5189 / 2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **PATIL...TEJAS...SANJAY.....** has satisfactorily completed Compulsory Rotatory Internship Training Programme of1.yr..... duration i.e. for ..365..... days from date ..25.... / ...02.. / ..2020 to date ..23.... / ..02.... / 20 21 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule


Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]


Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
ACPM MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 654 /ACPMMD/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **PATIL VAIBHAV NARENDRA** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20...19.... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191097**..... Provisional Registration Number **PR/5046/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **PATIL VAIBHAV NARENDRA**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 year**... duration i.e. for **365**..... days from date **25** / **02** / **2020** to date **23** / **02** / **2021** as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule

Dr. PRASHANT SOLANKE

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. VIJAY B. PATIL

Name of Dean / Principal with sign

DEAN,

**A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]**



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **735** / ACPMMC/Dhule

Date : **30 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ **Patil Vivek Bhatu**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2019..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191098**.....
Provisional Registration Number **PR/2901/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ **Patil Vivek Bhatu**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year** duration i.e. for **365** days from date **25 / 02 / 2020**
to date **23 / 02 / 2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- **30 / 03 / 2021**

Place:- Dhule

Dr. Shradha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. [020 / ACPMMC/Dhule

Date : 20/05/2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **PAWAR RAKHI BALASAHEB** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number: **0116191099** Provisional Registration Number **PR/5074/2020** of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **PAWAR RAKHI BALASAHEB**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 year** duration i.e for **365**..... days from date **25** / **02** / **2020** to date **23** / **02** / **2021** as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 20/05/2021

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign
Prof. & H.O.D.

Department of Community
A. C. P. M. Medical College, Dhule.

Dr. Vijay B. Patil

Name of Dean / Principal with sign
DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 1021 / ACPMMC/Dhule

Date : 20 / 05 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **PELAGADE. AKSHAY. SHASHANK. RAO** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20.12..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number ..0116191100..... Provisional Registration Number ..PB/54691.2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **PELAGADE. AKSHAY. SHASHANK. RAO**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year duration i.e. for 365..... days from date 25..... / 02..... / 2020 to date 23..... / 02..... / 2021.. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 20 / 05 / 2021

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. (.....)

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College, Dhule

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 90 | /ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Pingle Ajinkya Annasaheb
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20.19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number0116191101.....
Provisional Registration NumberPR/5195/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Pingle Ajinkya Annasaheb..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of1 yr..... duration i.e. for365..... days from date ...25.... / ...02.... / 2020
to date ...23.... / ...02.... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Dhule - 424 001

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Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **432** / ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **Ponkiya Dhruvik A.**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191102**.....
Provisional Registration Number **PR/5037/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **Ponkiya Dhruvik A.**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1yr**..... duration i.e. for **365**..... days from date **25** / **02** / **2020**
to date **23** / **02** / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- **09 / 03 / 2021**

Place:- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 439 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Rajput Pranali Gopal Singh has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20 19..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0216191106..... Provisional Registration Number PR/5161/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Rajput Pranali Gopal Singh..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020 to date 23..... / 02..... / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A.C.P.M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 445 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Riya Shaka
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191111
Provisional Registration Number PR/4070/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Riya Shaka has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1yr duration i.e. for 365 days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date : 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 444 / ACPMMC/Dhule

Date : 09 / 03 / 20 21

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. ROHIT
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 19.... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191112
Provisional Registration Number PR/3511/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. ROHIT has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 03 / 20 21

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **733** / ACPMMC/Dhule

Date: **30 / 03 / 2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Sapkal Shubham Haridas
 has passed the final year examination of M.B.B.S. course conducted by the
 Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
 2019..... He / She is bonafide student of this College / Institute, having University
 Examination Permanent Registration Number 011619115
 Provisional Registration Number PR/5063/2020 of State Council as
 Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Sapkal Shubham Haridas has
 satisfactorily completed Compulsory Rotatory Internship Training Programme
 of 1 yr duration i.e. for 365 days from date 25 / 02 / 2020
 to date 23 / 02 / 2021 as per the Central Council and University Norms.
 During this period his / her clinical work and conduct was found satisfactory and
 there is no Legal or Admission Eligibility related matter is pending with the student
 and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
 Surgery degree by the University.

Date:- **30 / 03 / 2021**

Place:- Dhule

S. Patel
Dr. Shraddha Patel
 Name of HOD with sign
 Prof. & H.O.D.

Department of Community Medicine,
 A. C. P. M. Medical College, Dhule. [M.S.]

V. B. Patil
Dr. Vijay B. Patil
 Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
 DHULE - 424001, M.S.



Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College, Dhule

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email : acpmmedhule@gmail.com

web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 642 / ACPMMC/Dhule

Date : 22 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **SARDARE NIDHI MOHAN**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20...19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number ..0116191116.....
Provisional Registration Number ..PR/5071/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **SARDARE NIDHI MOHAN**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 YEAR**... duration i.e. for **365**... days from date **25**... / **02**... / **2020**
to date **23**... / **02**... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 22 / 03 / 2021

Place:- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 904 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Shai kh Farheena Abdul Samad has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20...19.... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191119 Provisional Registration Number PR/4893/2020 of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Shai kh Farheena Abdul Samad has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year duration i.e. for 365 days from date 25 / 02 / 2020 to date 23 / 02 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
Morane (PL), Sakri Road,
Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 736 /ACPMMD/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Shaikh Sabar Jabbar
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116131120
Provisional Registration Number PR/5087/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Shaikh Sabar Jabbar has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1.11..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 20 21. as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 30 / 03 / 2021

Place:- Dhule

Spatel
Dr. Shradha Patel
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule (M.S.)

B
Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 437 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Sonar Purna Sham Manisha has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20.19..... He/She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116121126..... Provisional Registration Number PR/5631/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Sonar Purna Sham Manisha has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020 to date 23..... / 02..... / 2021 as per the Central Council and University Norms. During this period ~~his~~ / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus ~~he~~ / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine
A. C. P. M. Medical College, Dhule. (P.S.)

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001 (P.S.)



Jawahar Medical Foundation's
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Memorial Medical College, Dhule**

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 891 /ACPMMD/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that ~~Mr.~~ / Miss / ~~Mrs.~~ **SRIVASTAVA DIKSHA SUBODH** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter, 2019..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191128**..... Provisional Registration Number **PR/4845/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That ~~Mr.~~ / Miss / ~~Mrs.~~ **SRIVASTAVA DIKSHA SUBODH**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 yr**..... duration i.e. for **365**..... days from date **25** / **02** / **2020** to date **23** / **02** / **2021** as per the Central Council and University Norms. During this period ~~his~~ / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus ~~he~~ / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 29 / 04 / 2021

Place:- Dhule

DR. PRASHANT SOLANKE

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

DR. VIJAY B. PATIL

Name of Dean / Principal with sign

DEAN,

A.C.P.M.MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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Fax : (02562) 278027
email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 429 / ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. SUBHAM
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191129.....
Provisional Registration Number PR/5214/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. SUBHAM..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 25..... / 02..... / 2020
to date 23..... / 02..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date : - 09 / 03 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [स.स.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [स.स.]

Subham



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 433 /ACPMMC/Dhule

Date : 09 / 03 / 2021

Internship Completion Certificate

This is to certify that ~~Mr.~~ / Miss / ~~Mrs.~~ Surani Azimah Amin.
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in ~~Summer~~ / Winter,
20..19..... ~~He~~ / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191130.....
Provisional Registration Number PR/5036/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That ~~Mr.~~ / Miss / ~~Mrs.~~ Surani Azimah Amin..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1yr..... duration i.e. for 365..... days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period ~~his~~ / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus ~~he~~ / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 09 / 03 / 2021

Place:- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 743 / ACPMMC/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Tathe Prajakta Madhukar has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20...19.... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191132..... Provisional Registration Number PR/4986/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Tathe Prajakta Madhukar..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year... duration i.e. for 365..... days from date 25.... / 02.... / 2020 to date 23.... / 02.... / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 30 / 03 / 2021

Place :- Dhule

Dr. Shraddha Patel

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 900 / ACPMMC/Dhule

Date : 29 / 04 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Thakare Yashwant Sureshrao
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20...19... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191134
Provisional Registration Number PR/5262/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Thakare Yashwant Sureshrao has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1yr duration i.e. for 365 days from date 25 / 02 / 2020
to date 23 / 02 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 29 / 04 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **430** /ACPMMC/Dhule

Date : **09 / 03 / 2021**

Internship Completion Certificate

This is to certify that **Mr. / Miss / Mrs. Vadhadia. Rutu. Shanji. bhai** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20 **19**..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191139**..... Provisional Registration Number **PR/5039/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That **Mr / Miss / Mrs. Vadhadia. Rutu. Shanji. bhai**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1yr**..... duration i.e. for **365**..... days from date **25**..... / **02**..... / **2020** to date **23**..... / **02**..... / **2021** as per the Central Council and University Norms. During this period ~~his~~ / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- **09 / 03 / 2021**

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule. (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 607 / ACPMMC/Dhule

Date : 16 / 03 / 2021

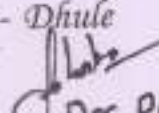
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. **YOGRAJ PARMAR**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20.19..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0114110710**.....
Provisional Registration Number **PR/5033/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. **YOGRAJ PARMAR**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1** Year duration i.e. for **365** days from date **25** / **02** / **2020**
to date **23** / **02** / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 16 / 03 / 2020

Place:- Dhule


DR. PRASHANT SOLANKE
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]


DR. VIJAY B. PATIL
Name of Dean / Principal with sign
DEAN,
A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
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web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 740 / ACPMMC/Dhule

Date : 30 / 03 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Sonawane Darshana Naresh
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20...19... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191127
Provisional Registration Number PR/5077/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Sonawane Darshana Naresh has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 03 / 03 / 2020
to date 02 / 03 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 30 / 03 / 2021

Place:- Dhule

Dr. Shradha Patel

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2559 / ACPMMC/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Munijeet Biswas
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~,
20..20.... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0115183338
Provisional Registration Number P.R. / 6404 / 2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Munijeet Biswas has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1.44 ... duration i.e. for 365 ... days from date 05 / 10 / 2020
to date 05 / 10 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021

Place :- Dhule

Dr. Prashant Salanke
Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]



Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN

A. C. P. M. Medical College
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's

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email : acpmmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2569 / ACPMMC/Dhule

Date : 12 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr / Miss / Mrs. AISHWARYA YADAV.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20..20.... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0115183343.....
Provisional Registration Number PR/6326/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. AISHWARYA YADAV..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr..... duration i.e. for 365..... days from date 05..... / 10..... / 2020
to date 05..... / 10..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 12 / 10 / 20

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine
A. C. P. M. Medical College, Dhule

Dr. Vijay B. Patil
Name of Dean / Principal with sign

A. C. P. M. MEDICAL COLLEGE
DHULE - 424001 (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **2558** / ACPMMC/Dhule

Date : **09 / 10 / 2021**

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Anurag Duley.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 20..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number ...011A-110601.....
Provisional Registration Number PR/6434/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Anurag Duley..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1.4x.... duration i.e. for 365.... days from date 05 / 10 / 2020
to date 05 / 10 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- **09 / 10 / 2021**

Place :- Dhule



Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN
A.C.P.M. Medical College,
DHULE - 424001, (M.S.)

DEAN
A.C.P.M. Medical College,
DHULE - 424001, (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2556 / ACPMMC/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that ~~Mr.~~ / Miss / ~~Mrs.~~ **BHOYAR SAYALI**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~,
20 ~~20~~..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0116191033**.....
Provisional Registration Number **PR/6395/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That ~~Mr.~~ / Miss / ~~Mrs.~~ **BHOYAR SAYALI**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 year** duration i.e. for **365**..... days from date **05**..... / **10**..... / **2020**
to date **05**..... / **10**..... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021

Place :- Dhule

Dr. Prashant Solanke

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]



Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN

A.C.P.M. Medical College
DHULE 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
Morane (PL), Sakri Road,
Dhule - 424 001

Ph. (02562) 276317, 18, 19
Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2569 /ACPMMC/Dhule

Date : 09 / 10 / 2021

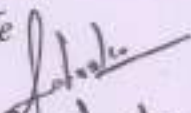
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Chaudhary Rakesh Kumar L. has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2020..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0114110607..... Provisional Registration Number PR / 6396 / 2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Chaudhary Rakesh Kumar L...... has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year.. duration i.e. for 365..... days from date 05.... / 10.... / 2020 to date 05.... / 10.... / 2021. as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.


Date :- 09 / 10 / 2021

Place :- Dhule


An Prashant Solanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]




Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN
A.C.P.M. Medical College
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
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Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2719 / ACPMMC/Dhule

Date : 20 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. GAHAROTE SHUBHAM SHALIKRAO has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 20.20..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191043..... Provisional Registration Number PR/0023/2021..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. GAHAROTE SHUBHAM SHALIKRAO has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 YR.... duration i.e. for 365 days from date 05 / 10 / 2020 to date 05 / 10 / 2021 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 20 / 10 / 2021

Place:- Dhule

Name of HOD with sign

Name of Dean / Principal with sign



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
 Memorial Medical College, Dhule**

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 email : acpmmedhule@gmail.com
 web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **2562** / ACPMMC/Dhule

Date **09 / 10 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ **Lokhande Rajeswarji Gautam** has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~, 20**20**..... He / ~~She~~ is bonafide student of this College / Institute, having University Examination Permanent Registration Number **0116191069**..... Provisional Registration Number **PR/6442/2020**..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ **Lokhande Rajeswarji Gautam**..... has satisfactorily completed Compulsory Rotatory Internship Training Programme of **1 yr**..... duration i.e. for **365**..... days from date **05**..... / **10**.. / **2020** to date **05**..... / **10**..... / **2021**, as per the Central Council and University Norms. During this period his / ~~her~~ clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- **09 / 10 / 2021**

Place :- Dhule

Dr. Rameshant Solanke
 Name of HOD with sign
 Prof. & H.O.D.

Department of Community Medicine,
 A. C. P. M. Medical College, Dhule.



Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN
 A.C.P.M. Medical College
 - DHULE - 424001 (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Fax : (02562) 278027
email : acpmmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2555 / ACPMMC/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Suraj Achyutrao Nikam.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
2020..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191081.....
Provisional Registration Number PR/6398/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Suraj Achyutrao Nikam..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 05 / 10 / 2020
to date 05 / 10 / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. [M.S.]



Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN

A. C. P. M. Medical College
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2885/ACPMMC/Dhule


Date : 18/11/2021

Internship Completion Certificate

This is to certify that Mr./Miss/Mrs. Pawara Suraj Jatansingh
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer/Winter,
2020..... He/She is bonafide student of the College/Institute, having University
Examination Permanent Registration Number 0107112729
Provisional Registration Number 22/6399/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr/Miss/Mrs. Pawara Suraj Jatansingh has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 yr duration i.e. for 365 days from date 05 / 10 / 2020
to date 05 / 10 / 2021 as per the Central Council and University Norms.
During this period his/her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he/she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- 18/11/2021

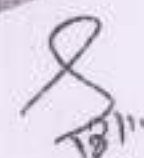
Place:- Dhule


Dr. Prashant Solankhe

Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule.


Dr. Vijay B. Patil

Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2538 / ACPMMC/Dhule


Date : 07 / 10 / 2021

Internship Completion Certificate

This is to certify that ~~Mr~~ / Miss / ~~Mrs~~ **PREMLATA KUMARI**.....
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~,
20.20..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number **0113152467**.....
Provisional Registration Number **PR/6343/2020**..... of State Council as
Maharashtra Medical Council, Mumbai.

That ~~Mr~~ / Miss / ~~Mrs~~ **PREMLATA KUMARI**..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of **1 YR**.... duration i.e. for **365**... days from date **05**... / **10**... / **2020**
to date **05**... / **10**... / **2021** as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date:- / / 20

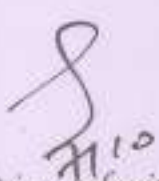
Place:- Dhule


Name of HOD with sign

Prof. S.H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. (M.S.)




Name of Dean / Principal with sign



Jawahar Medical Foundation's
Annasaheb Chudaman Patil
Memorial Medical College, Dhule

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 web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **2560** / ACPMMC/Dhule

Date : **09 / 10 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ **Shahabaz Hassain**.....
 has passed the final year examination of M.B.B.S. course conducted by the
 Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~;
 20 ~~20~~..... He / ~~She~~ is bonafide student of this College / Institute, having University
 Examination Permanent Registration Number **0116191118**.....
 Provisional Registration Number **PR/6344/2020**..... of State Council as
 Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ **Shahabaz Hassain**..... has
 satisfactorily completed Compulsory Rotatory Internship Training Programme
 of **1 year**..... duration i.e. for **365**..... days from date **05**... / **10**... / **2020**
 to date **05**... / **10**... / **2021**.. as per the Central Council and University Norms.
 During this period his / ~~her~~ clinical work and conduct was found satisfactory and
 there is no Legal or Admission Eligibility related matter is pending with the student
 and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
 Surgery degree by the University.

Date:- **09 / 10 / 2021**

Place:- Dhule

Dr. Parashant Solanke
 Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
 A.C.P.M. Medical College, Dhule. (M.S.)



Dr. Vijay B. Patil
 Name of Dean / Principal with sign

DEAN

A.C.P.M. Medical College
 DHULE - 424001 (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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email : acpmcdhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2561 / ACPMMC/Dhule

Date : 09 / 10 / 2021

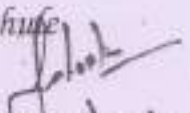
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. SHARMA VISHAL RATKUMAR
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 20.... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191121.....
Provisional Registration Number PR/0034/2021..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. SHARMA VISHAL RATKUMAR..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year..... duration i.e. for 365 days from date 05 / 10 / 2020
to date 05 / 10 / 2021, as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021


Place :- Dhule


Name of HOD with sign

Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule, (M.S.)




Name of Dean / Principal with sign

DEAN

A.C.P.M. Medical College
DHULE - 424001 (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

Post Box No. 145,
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Dhule - 424 001

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email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2571 / ACPMMC/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr./Miss/Mrs. SHENDE NEHA SUMEDH has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2020..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191122..... Provisional Registration Number PR/6323/2020..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr/Miss/Mrs. SHENDE NEHA SUMEDH has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 year..... duration i.e. for 365..... days from date 05..... / 10..... / 2020 to date 05..... / 10..... / 20 21 as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date:- 09 / 10 / 2021

Place:- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. & H.O.D.
Department of Community Medicine,
A.C.P.M. Medical College, Dhule. (M.S.)

Dr. Vijay B. Patil
Name of Dean / Principal with sign

A.C.P.M. Medical College
DHULE - 424 001 (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
 Memorial Medical College, Dhule**

Post Box No. 145,
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 Fax : (02562) 278027
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 web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. **2553** / ACPMMC/Dhule

Date : **09 / 10 / 2021**

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ Solanki..... Bhavesh..... Kalubhai.
 has passed the final year examination of M.B.B.S. course conducted by the
 Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~,
 20.20..... He / ~~She~~ is bonafide student of this College / Institute, having University
 Examination Permanent Registration Number 0116191124.....
 Provisional Registration Number PR/6327/2020..... of State Council as
 Maharashtra Medical Council, Mumbai.

That Mr / ~~Miss~~ / ~~Mrs.~~ Solanki..... Bhavesh..... Kalubhai. has
 satisfactorily completed Compulsory Rotatory Internship Training Programme
 of 1 year duration i.e. for 365 days from date 05 / 10 / 2020
 to date 05 / 10 / 2021 as per the Central Council and University Norms.
 During this period his / her clinical work and conduct was found satisfactory and
 there is no Legal or Admission Eligibility related matter is pending with the student
 and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
 Surgery degree by the University.

Date:- **09 / 10 / 2021**

Place:- Dhule



Dr. Prashant Solanke
 Name of HOD with sign

Dr. Vijay B. Patil
 Name of Dean / Principal with sign
 DEAN

Dr. Prashant Solanke
 A.C.P.M. Medical College, Dhule - 424 001

A.C.P.M. Medical College
 DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2554 / ACPMMC/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Thacker Deep Bharathai
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~
20 ~~20~~..... He / ~~She~~ is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191133
Provisional Registration Number PR/6325/2020 of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Thacker Deep Bharathai has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 year duration i.e. for 365 days from date 05 / 10 / 2020
to date 05 / 10 / 20 21, as per the Central Council and University Norms.
During this period his / ~~her~~ clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / ~~she~~ found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign



Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN
A.C.P.M. Medical College
DHULE - 424001 (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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Fax : (02562) 278027
email : acpmmedhule@gmail.com
web : www.acpmjmf.com

Reg. No. E-314-Dhule / 17/07/1984

Ref. No. 2570/ACPMMD/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. Thakur Mayur Mahendrasingh
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / Winter,
20 20..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0116191135
Provisional Registration Number PR/6446/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. Thakur Mayur Mahendrasingh..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1 Year..... duration i.e. for 365..... days from date 05..... / 10..... / 2020
to date 05..... / 10..... / 2021 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021

Place :- Dhule

Dr. Prashant Solanke
Name of HOD with sign

Prof. S.H.O.D.

Department of Community Medicine
A.C.P.M. Medical College, Dhule. [M.S.]

Dr. Vijay B. Patil
Name of Dean / Principal with sign

DEAN,

A.C.P.M. MEDICAL COLLEGE
DHULE - 424001. [M.S.]



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2552 / ACPMMC/Dhule

Date : 09 / 10 / 2021

Internship Completion Certificate

This is to certify that Mr. / ~~Miss~~ / ~~Mrs.~~ Ravi Kumar Yadav
has passed the final year examination of M.B.B.S. course conducted by the
Maharashtra University of Health Sciences, Nashik held in Summer / ~~Winter~~,
20.20..... He / She is bonafide student of this College / Institute, having University
Examination Permanent Registration Number 0115183426.....
Provisional Registration Number PR/6321/2020..... of State Council as
Maharashtra Medical Council, Mumbai.

That Mr. / ~~Miss~~ / ~~Mrs.~~ Ravi Kumar Yadav..... has
satisfactorily completed Compulsory Rotatory Internship Training Programme
of 1.4x..... duration i.e. for 365..... days from date 05... / 10... / 2020
to date 05.. / 10.. / 20 21 as per the Central Council and University Norms.
During this period his / her clinical work and conduct was found satisfactory and
there is no Legal or Admission Eligibility related matter is pending with the student
and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of
Surgery degree by the University.

Date :- 09 / 10 / 2021

Place :- Dhule

Dr. Prashant Salanke
Name of HOD with sign
Prof. & H.O.D.

Department of Community Medicine,
A. C. P. M. Medical College, Dhule. (M.S.)



Dr. Vijay B. Patil
Name of Dean / Principal with sign
DEAN

A. C. P. M. Medical College
DHULE - 424001. (M.S.)



Jawahar Medical Foundation's
**Annasaheb Chudaman Patil
Memorial Medical College, Dhule**

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web : www.acpmjmf.com

Reg. No. E.-314-Dhule / 17/07/1984

Ref. No. 2828 / ACPMMC/Dhule

Date : 29 / 10 / 2021

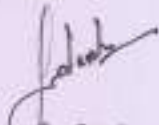
Internship Completion Certificate

This is to certify that Mr. / Miss / Mrs. KUDADE SACHIN LAXMANRAO has passed the final year examination of M.B.B.S. course conducted by the Maharashtra University of Health Sciences, Nashik held in Summer / Winter, 2020..... He / She is bonafide student of this College / Institute, having University Examination Permanent Registration Number 0116191066..... Provisional Registration Number PR/0224/2021..... of State Council as Maharashtra Medical Council, Mumbai.

That Mr / Miss / Mrs. KUDADE SACHIN LAXMANRAO has satisfactorily completed Compulsory Rotatory Internship Training Programme of 1 YR..... duration i.e. for 365..... days from date 23..... / 10..... / 2020 to date 22..... / 10..... / 2021, as per the Central Council and University Norms. During this period his / her clinical work and conduct was found satisfactory and there is no Legal or Admission Eligibility related matter is pending with the student and thus he / she found eligible for the award of Bachelor of Medicine & Bachelor of Surgery degree by the University.

Date :- 29 / 10 / 2021

Place :- Dhule


Name of HOD with sign
Prof. & H.O.D.

Department of Community
A. C. P. M. Medical College, Dhule.


Name of Dean / Principal with sign
DEAN,

ACPM MEDICAL COLLEGE
DHULE - 424001. [M.S.]