Personal Details			
Name	Pranali Rajendra Baviskar		
Designation	Assistant professor	(Constant	
Department	Pharmaceutics		
Date of Birth	14/06/98		
Mob. No	7248964441	F : 1	
Email ID	Pranalibaviskar271@gmail.com		
Aadhar No	866532584453	+ PISOVISKOR	
Pan No	CREPB7784B		
Voter Id No			
Date of Appointment University Approval No & date (Asst.Professor) University Approval No & date (Asso.Professor) University Approval No & date (Professor) PG Teacher Approval No & Date Ph.D Guide Approval Letter & Dat	Bank Name: Shirpur peoples coope	erative bank A/c.	
Bank Account No	No: 001100964562		
Current Address	Branch: Shirpur IFSC Code: IBK01600SP		
Spouse / Husband Full Name Spouse / Husband Adhar No	414, c, Shimpi galli, shirpur		

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Spouse /					
Husband Date of					
Birth					
No of Child					
Blood Group	O+				
Caste	Shimpi				
Category	OBC				
Sub Caste	Hindu shimpi				

Educational Qualifications				
Degree	Specialization	Name of the College/Institute	University	Percentage& Class
MPharm	Pharmaceutics	R. G. Sapkal college of pharmacy, Anjaneri, Nashik.	Savitribai Phule Pune University	84 % first class with distinction
BPharm		H. R. Patel Institute of Pharmaceutical education and research, shirpur	KBC, North Maharashtra University	80% First class with distinction
Whether Ph.D. awarded :- NO				
Title of Ph.D. thesis awarded:-				
Whether qualified NET / SET :- Exempted				

Academic / Industry Experience							
Name of the Institution / Industry		Position		From		То	
KVPS, Institute of Pharmacy, Boradi		Assistant pre	fessor	2 Jan	2023	20 Aug 20	23
Total Experience	8 months	Teaching		Research		Administration	

Subjects Taught(if Academic Experience)			
UG	PG		
Pharmaceutics I			
Biopharmaceutics			

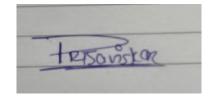
Additional Roles & Key Responsibilities Handled

Research Publications						
Tota	I	International	National	International	National	Total
Number of		Journal	Journal	Conference	Conference	
Publicat	ions					
		(Journals) Name, ISSN/ ISBN	N No. / Impact I	Factor / Author/C	o-author/ Volun	ne / Pg. No)
1.						
2.						
-	nfere			es ding -ISSN/ ISBN	No./ Impact Fact	or / Author/Co-
Books A	uthor	red/Co-authore	ed			
1.						
2.						
Awards,	Pate	nts, Prizes etc.				
1.						
2.						
	<u> </u>					
Membe	rship	in Professional	Bodies			
1.						
2.						
Training	Prog	ram Attended(Seminar / Worl	kshop / Conferen	ce / Refreshers (Course etc.)
1.	Dec	entralized Clinica	al Traits and Ca	reer scope in UK		
	Cold	l High Pressure H	lomogenizer: A	A versatile Nanop	particulate produ	uction technique
2.	for 1	Thermosensitivs	drug molecule	S		

Note: - In case of additional credentials, attach likewise

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1.	
2.	

I hereby declare that the information given above is correct and to the best of my knowledge and belief. I fully understand that if it is found at a later date that any information given in the application is incorrect/false or if I do not satisfy the eligibility criteria, my candidature/appointment is liable to be cancelled/terminated.



Place: Shirpur

Date: 6/5/2024 Signature of the Applicant